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Chronic Pain Can Be Managed

When a child is hurt, one of the best feelings a parent can experience comes from the knowledge that a hug and a kiss from Mom or Dad often can make the pain disappear. If only that magical power worked throughout our lives! Unfortunately, according to the National Pain Foundation, over 75 million Americans know that some pain just never goes away.

Pain is classified as either acute or chronic. The National Institute of Neurological Disorders and Stroke defines acute pain as a “normal sensation triggered in the nervous system to alert you to possible injury.” Acute pain is short-lived, and usually goes away as the body heals.

Chronic pain is different. It is pain that persists for months and even years after an injury has healed. It can also be the result of a chronic condition like cancer or arthritis. Sometimes, no cause for the pain can be determined at all. Chronic pain is often severe and debilitating, and affects the quality of life for those who suffer from it. (The American Pain Foundation notes that over half of the patients studied reported deterioration in their quality of life.) It prevents them from conducting many of their normal daily activities, interrupts sleep, makes exercise and participation in sports difficult, and causes stress that leads to irritability and loss of motivation. Interpersonal relationships suffer, especially those involving a spouse, and many times the person with pain experiences guilt, anxiety, and depression.

The Emerging Solutions In Pain initiative asserts that “pain is the most widespread and the #1 cause of disability in the United States . . .” In addition to personal suffering, “pain costs our country 100 billion dollars annually in lost productivity, medical expenses, and other benefit-related costs.” A study published recently in the Journal of the American Medical Association reports that the productivity of 13% of American workers is reduced by an average of 4.6 hours each week because of pain. Further, over 80% of all physician visits are due to chronic pain. Loss of function can lead to loss of employment, resulting in decreased income that further complicates the physical and emotional aspects of living with chronic pain.

Unfortunately, most people fail to take chronic pain seriously when it first emerges, assuming it will go away by itself or that it is not serious. They only see a doctor when the pain becomes increasingly severe, so immediate treatment is unusual. Research has shown that 44% of people with chronic pain waited over a month before seeing their doctor, and 30% waited over 3 months (American Pain Foundation).

Even when a doctor is finally consulted, the statistics continue to look grim. The American Pain Foundation reports 72% of the people have been living with chronic pain for more than 3 years, and of those, 34% have been suffering for 10 years or more. Further, 76% of those studied experience pain daily, and for some, it is always present. About one-half say their pain is not in control.

There are a variety of treatments for chronic pain that may be used alone or in combination. They include prescription and/or over the counter medications, physical therapy, occupational therapy, electrical stimulation, injections, nerve blocks, acupuncture, psychological support, and even surgery. A number of doctors now specialize in pain. But for those who suffer with chronic pain, it must be kept in mind that

most pain treatments will not eliminate all their pain, but can be very helpful in reducing and managing the pain to minimize its impact on one's daily life.

Unfortunately, many people do not get the help they need because chronic pain is often misunderstood by both the public and the medical community. Unfounded fears of addiction and side effects, limited access to medication, lack of insurance coverage, and high co-pays further impede treatment. As a result, many health care professionals and organizations lobbied Congress in 2000 to make pain a national priority, and Congress declared 2000-2010 the Decade of Pain Control. However, it took five years before the National Pain Care Policy Act was introduced in Congress. HR 2010 establishes adequate pain care research, education, and treatment as national public health priorities, and creates the National Center for Pain and Palliative Care Research within the National Institutes of Health to conduct clinical and basic science research into the biology, causes, and effective treatment of pain, among other initiatives. However, it is now 2006 and HR 2010 has not been passed. As September (designated Pain Awareness Month) approaches, the National Pain Foundation is urging people to write their representatives in Congress to request their support in passing this legislation.

For further information about chronic pain, visit the American Pain Foundation's web site at www.painfoundation.org (1-888-615-7246), the National Pain Foundation at www.painconnection.org, the National Pain Awareness Campaign at www.crcamerica.org, or the National Institute of Neurological Disorders and Stroke at www.ninds.nih.gov (1-800-352-9424). Additional information about this or other public health concerns is available at the Central Connecticut Health District at www.ccthd.org (860-721-2822).