

Backgrounder: Alberta Pain Strategy 2015

A Joint Initiative of the Pain Society of Alberta and Chronic Pain
Section of the Alberta Medical Association

September 2015



Chronic Pain in Alberta

- Chronic pain is common affecting 1 in 5 Albertans.
- Chronic pain is going to become an increasingly significant problem, with growing health costs, as the population demographics change with more patients over the age of 65
- Chronic pain significantly affects the personal, family and economic lives of Albertans.
- An integrated provincial wide strategy will allow for the successful management of the disease of chronic pain
- The Pain Society of Alberta, along with the Chronic Pain Section of the Alberta Medical Association, has developed a framework for an integrated provincial strategy

Background

Chronic pain is a common problem in Alberta with vast personal and economic consequences. It is estimated that 1 in 5 Albertans suffer from chronic pain. Alberta's senior population is most affected, with as many as 1 out of 3 seniors suffering from chronic pain. Chronic pain in Canada has been estimated to cost over 50 billion dollars annually, more than cancer, diabetes, and heart disease combined. With appropriate an appropriate pain management strategy, these costs can be managed and reduced.

Despite the frequency of chronic pain in the population and the significant amount of suffering endured by patients with chronic pain, the management of chronic pain is often disjointed, inconsistent and poorly managed. In fact, despite significant progress in our understanding of chronic pain and management, no standardized approach is available in Alberta for patients suffering from chronic pain.

Recognizing these issues, the Pain Society of Alberta hosted a Pain Summit in Calgary in March of this year to develop a strategy for the management of chronic pain in Alberta, with the participation of health care professionals from the executive of the Pain Society of Alberta and the executive of the AMA Section of Chronic Pain and invited guests.



Key Successes in the Management of Chronic Pain in Alberta:

The Province of Alberta has had several significant successes in regards to chronic pain management in the last 10 years.

Leading the way, the Pain Society of Alberta was founded to advance the study, treatment and management of pain in Alberta, and advocates for, educates and supports health care providers involved in delivering health services to chronic pain patients. Today the Society boasts over 300 members from a variety of health care groups including physicians, nurses, pharmacists, occupational therapists and psychologists. The group not only acts in a leadership role in Alberta but also hosts an annual scientific assembly in Banff to advance knowledge in the area of pain management.

Three years ago, the Alberta Medical Association established its Section of Chronic Pain, heralding another advancement in Alberta's leadership in the field of chronic pain management. This section represents a group of physicians with a special interest in pain management, and has been a strong advocate among physicians for responsible pain management and evidence based pain care.

Pain patients in Alberta have access to several strong patient support groups. Two very active organizations in the support of patients in Alberta are the People in Pain Network and the Chronic Pain Association of Canada. Both groups offer education for patients with chronic pain as well as organized meetings where patients can get support for their pain conditions among peers.

In some regions in Alberta, Primary Care Networks (PCNs) have taken a leadership role in pain management. PCNs in Calgary have set up a standardized approach to chronic pain that includes primary care pain clinics that offer basic non-tertiary level pain management. This has reduced the pressure on the Calgary Pain Program, and has allowed many chronic pain sufferers to obtain fundamental and necessary education on how they can manage their disease. Not everyone with chronic pain needs to be seen in a tertiary pain clinic. The Calgary model exemplifies this principle.

Gaps and Barriers to Pain Management in Alberta:

Despite the successes in pain management in Alberta in the last decade, there remain significant gaps and barriers to consistent patient care.

These gaps and barriers include:

- 1) Chronic pain is not currently on the Chronic Disease Management (CDM) radar, despite the large numbers of patient who suffer from this chronic condition.
- 2) There remains poor access to chronic pain management in rural Alberta and, despite the successes in Calgary, even urban Alberta has a disjointed and inconsistent approach to chronic pain.
- 3) Many services and medications are not universally covered for chronic pain patients, including psychological services, which are universally recognized as being foundational in the successful management of patients with chronic pain.
- 4) Marginalized patients such as lower socio-economic patients and aboriginal patients often do not get adequate assessment and management of their chronic pain.
- 5) Many in the media and public still equate chronic pain with addiction, despite the fact that the vast majority of chronic pain patients do not have a substance abuse disorder.
- 6) There remains ongoing stigma that some medications, including opioids, often a staple in chronic pain management, are harmful drugs and lead to addiction in most patients.
- 7) There are communication gaps among the many services providers of chronic pain in the province resulting in disjointed care.

Facets of the Chronic Pain Strategy

The Case for Chronic Pain

Chronic pain as mentioned in the introduction is costly and common. There is both a burden to the patient, family and society as a whole.

Despite this there is a lack of coordinated care throughout the province.

As the population ages, the impact of chronic pain on society is escalating. As a result there is an urgent need to develop and sustain a provincial pain strategy that aligns with current best practices around the world.

Guiding Principles

According to the International Association of Pain (IASP), Montreal Declaration written at the IASP world congress in Montreal in 20110:

“Access to pain management is a fundamental human right”

This foundational principle should guide the development of a provincial pain strategy. Additionally, the following principles are essential to a provincial pain strategy:

- 1) Chronic pain management should be patient and family centered.
- 2) Management of pain starts in primary care and at the patient’s medical home
- 3) There should be integration across the continuum of primary care and tertiary care.

Interdisciplinary Partnerships and Communication

To ensure patient centered care across the continuum of health care, integration of the various stakeholders involved in patient care is required. This includes the Pain Society of Alberta, the Alberta Medical Association Section of Chronic Pain, the PCNs in the province and the various tertiary care pain clinics.

Communication with Alberta Health Services with professional organizations is also essential to an integrated model of care for pain patients, with Alberta Health recognizing pain as a priority in the chronic disease model. The Alberta College of Physicians and Surgeons, the Alberta College of Pharmacists and other health

provider regulatory bodies should also be involved in the discussion as they play an essential role in safe prescribing for patients with chronic pain and ensuring that practitioners meet essential standards in caring for patients with pain.

Access to Resources

To ensure a standard approach to pain management in Alberta, access to informational resources should be made available to primary care providers. To facilitate access to appropriate resources the following recommendations are identified:

- 1) A 24 hour access line for which primary care providers can access trained professionals to help them manage difficult chronic pain cases.
- 2) The development of a provincial pain registry which can be housed either by the Pain Society of Alberta or Alberta Health Services
- 3) Improved access to addiction services including a registry of available resources in the province
- 4) The development of a registry of physicians who see patients with chronic pain including those that are licensed to prescribe suboxone or methadone.
- 5) The development of registry of programs for education regarding chronic pain management, assessment of addiction and responsible prescribing of medications in chronic pain.

Professional Development and Education

There is an urgent need for the development and maintenance of enhanced education programs directed at health care providers in the area of chronic pain management.

The following recommendations have been identified:

- 1) The development of a Certified Pain Educators (CPE) program, similar to the models used for certified respiratory educators and certified diabetic educators that already exist. These programs could be developed with input from the Pain Society of Alberta
- 2) Increased exposure of education programs already offered
- 3) The development of web based education programs and apps that would help clinicians navigate best standards in the assessment and management of chronic pain patients.
- 4) Mentorship programs of primary care providers and students across all disciplines

- 5) Partnership with the Canadian Pain Society in influencing medical programs across Canada to include a chronic pain curriculum in undergraduate programs.

Treatment and Management of Care

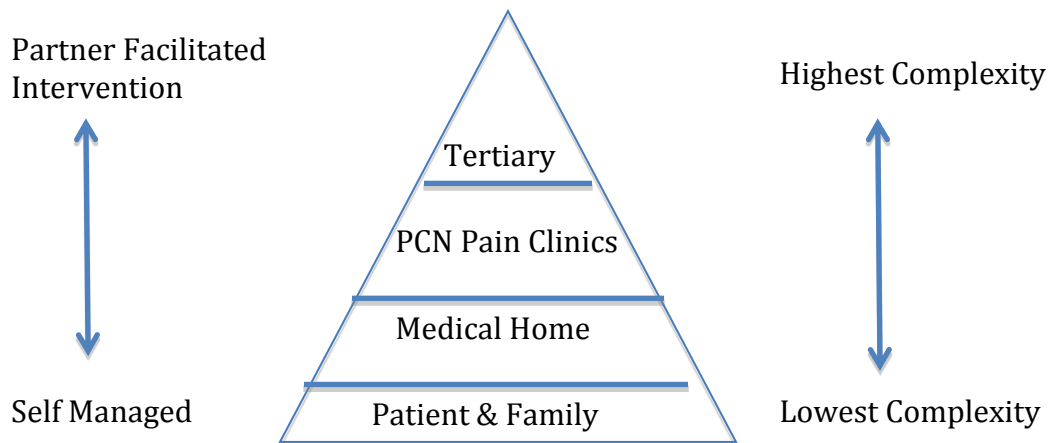
The best approach to the management of chronic pain patients involves a bio-psychosocial approach.

To facilitate this all patients with chronic pain deserve access to all forms of treatment for chronic pain, depending upon their specific needs. This includes both urban and rural patients without financial barriers to appropriate patient care and treatment.

Appropriate treatment includes the following:

- All patients should be enrolled in a self-management program. This is the recognized minimum standard in patient management for patients with chronic pain.
- Patients should be able to access an adequate trial of active physical therapies such as physiotherapy, without cost as a barrier.
- Patients should be able to access psychological services, without cost as a barrier.
- Access to medications for the management of chronic pain should not be limited by income. To this end, the provincial drug plans should provide coverage for all medications used in the management of chronic pain.
- Support should be given to patient support groups that help patients to live and thrive with chronic pain, including the People in Pain Network and the Chronic Pain Association of Canada.
- Finally, a culture of interdisciplinary coordination (i.e. working collaboratively with allied health providers) should be promoted.

The model for interdisciplinary collaboration can be described as follows:



Research

Finally, the strategy addresses the need for ongoing research in the area of pain management.

This includes:

- 1) Assessing the success of the provincial strategy with patient centered outcomes
- 2) Government and other funding for research into best practices in pain management
- 3) Government and other funding earmarked for developing new innovations in the following areas:
 - a. Pain education
 - b. Pain diagnosis
 - c. Pharmacotherapy
 - d. Psychological interventions
 - e. Interventional strategies