



PARTNERS *for*
UNDERSTANDING PAIN

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FOR IMMEDIATE RELEASE

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**SURVEY SHOWS MYTHS, MISUNDERSTANDING
ABOUT PAIN COMMON AMONG AMERICANS**

Partners for Understanding Pain Marks September as Pain Awareness Month

SACRAMENTO, Calif., September 17, 2002 -- What is the most common cause of disability in the United States today? The answer is *pain*, but if you didn't know, you have plenty of company.

Partners for Understanding Pain, a consortium of more than 50 organizations that have an interest in pain and its effects, commissioned a telephone survey of 1,000 adult Americans in June to raise awareness of the effects of pain on society. The survey showed that most Americans have little understanding of pain and its treatment.

"Knowledge about pain is lacking and misinformation abounds among those living with pain, as well as those in care-giving professions," said Dr. Daniel Carr, vice chairman of research and medical director for the chronic pain management program at Tufts-New England Medical Center. "The Partners for Understanding Pain survey highlights how misinformed most people are about pain. Nearly two-thirds of survey respondents cited something other than pain as being the primary cause of disability in the United States."

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The Impact of Pain

Pain is a serious public health and economic issue. According to statistics, pain touches everyone:

- Pain costs \$100 billion annually in lost work days, medical expenses and other benefit costs (National Institute for Occupational Safety and Health);
- Pain personally affects one in three people (Partners for Understanding Pain survey); and
- Pain causes more disability than cancer and heart disease combined (National Medical Association).

“The Partners for Understanding Pain want to raise awareness of both the medical and socioeconomic impacts of pain. Pain and its consequences are issues of unrecognized significance,” said Penney Cowan, executive director of the American Chronic Pain Association (ACPA), which is spearheading Partners for Understanding Pain. “Access to care also is an issue. Skyrocketing health care costs leave some, especially seniors, minorities, and the urban and rural poor, unable to get the help they need to manage their pain.”

Specifically, more than 50 million Americans suffer from chronic pain each year, and another 25 million experience acute pain caused by injury or surgery. 50 to 70 percent of cancer patients experience significant pain sometime during their illness, the American Cancer Society reports. But, experts say, 90 percent of cancer pain can be alleviated with proper treatment, according to the National Cancer Institute.

“While pain is often a natural response to illness or injury, there are a number of techniques and medications that can help us manage our pain more effectively, which in turn can aid recovery and improve quality of life,” Carr said.

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More Training Needed for Physicians

The majority of respondents to the Partners for Understanding Pain survey are confident that their primary care physician can effectively diagnose (79 percent) and treat (83 percent) any pain problem they may have. **However, most doctors receive very little training in identifying and treating pain problems among their patients.**

“Few medical schools have included formal training in pain and pain management in their curriculum in the past and doctors have not felt well prepared to deal with their patients’ pain,” Carr said. “Pain has been like the elephant in the middle of the room; no one knows exactly what to do about it, so we act as if it isn’t there. Fortunately, this is changing.”

Addiction Fears May Result in Suffering

Fear of addiction is a major concern among survey participants. More than three out of four respondents (78 percent) believe that addiction would be very or somewhat likely when strong pain medication is given to treat pain.

In fact, when prescribed for pain problems, most pain medications, including opioids, do not cause the “high” associated with street drug use and rarely cause addiction, according to Carr. Failing to provide appropriate medications to people with cancer, acute or chronic pain can cause unnecessary suffering.

Pain Doesn’t Discriminate

Who is most likely to suffer from chronic pain? Most respondents (43 percent) believed a typical person with ongoing pain is an adult age 65 or older. **In fact, anyone can develop chronic pain, and 80 percent of those who have chronic pain are in the adult 24 to 64 age group, according to The Arthritis Foundation.**

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Is the Pain Real?

The majority of respondents agree or agree strongly that people sometimes exaggerate their pain to get drugs (83 percent), avoid work (84 percent) or get attention (86 percent). **In fact, few people exaggerate their pain for any reason, Cowan said. However, since pain is an invisible disability, it's impossible to know how much pain someone is experiencing by observing him or her.**

“People sometimes use pain behavior (grimacing, grabbing their backs, groaning) because they fear that their caregivers or families will not believe that their pain is real,” Cowan said. “That’s one reason we convened Partners for Understanding Pain – to open up a dialogue about pain and encourage greater understanding about its impact.”

About Partners for Understanding Pain

Partners for Understanding Pain is a consortium of more than 50 organizations that touch the lives of people with chronic, acute and cancer pain. Each member brings its own perspective to the dialogue and together they represent a comprehensive network of resources and knowledge about issues in pain management. Partners for Understanding Pain, spearheaded by the American Chronic Pain Association, strives to create greater understanding among health care professionals, individuals and families who are struggling with pain management, the business community, legislators and the general public that pain is a serious public health issue.

For more information about pain management and the Partners for Understanding Pain, call 1-800-533-3231 or visit www.theacpa.org.

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PAIN FACT SHEET

Pain touches each one of us at one time or another. Pain can begin for many different reasons. Yet as common as pain is, the medical community is just beginning to understand and better address the many forms of pain.

Partners for Understanding Pain developed this fact sheet to provide information and to distinguish among the three types of pain – chronic, acute, and cancer pain.

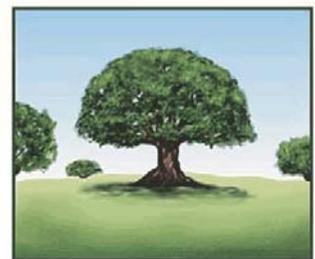
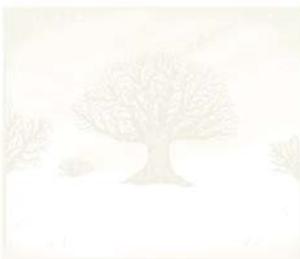
Acute pain has a distinct beginning and end and is the result of illness or injury. This type of pain usually can be largely relieved with appropriate treatment, as can cancer pain. It is important that the pain be taken seriously and managed as part of sound patient care.

Currently there is no cure for chronic pain and, as a condition that can affect individuals life long, it also needs to be taken seriously. A multidisciplinary treatment approach can help people with chronic pain regain control of their lives and reduce their sense of suffering.

CHRONIC PAIN FACTS

Key Facts:

- Chronic pain lasts. Pain is considered chronic when it continues beyond the usual recovery period for an injury or an illness. It may be continuous or come and go.
- Chronic pain, sometimes called persistent pain, can be very stressful for both the body and the soul and requires careful, ongoing attention to be appropriately treated.
- Chronic pain is often intractable, as the cause of pain cannot be removed or treated.
- Chronic pain is the number-one cause of adult disability in the United States.





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- Chronic pain can touch nearly every part of a person's daily life. It also has an impact on the family and, because of its economic and social consequences, it affects us all.
- Chronic pain can be a source of frustration for the health care professionals who seek to provide care and assistance.

Incidence:

- The American Chronic Pain Association (ACPA) estimates that one in three Americans (approximately 50 million people) suffer from some type of chronic pain.

Causes:

- Lower back problems, arthritis, cancer, repetitive stress injuries, headaches, and fibromyalgia are the most common sources of chronic pain. These causes also include nerve injury from diabetes, shingles and other infections, operations or limb amputation, and other neurological conditions such as RSDS.

ACUTE PAIN FACTS

Key Facts:

- Acute pain may be mild and last just a moment. It also can be severe and last for weeks or months, as does pain from a burn, pulled muscle, or broken bone.
- Acute pain usually starts suddenly, may be sharp, and often triggers visible bodily reactions such as sweating, an elevated blood pressure, and more. Acute pain is generally a signal of rapid-onset injury to the body and it resolves when pain relief is given or the injury is treated.
- Acute pain normally has a distinct beginning and end. Sometimes, particularly when under treated, acute pain may evolve into chronic pain.





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- In the hospital, pain should be considered the fifth vital sign, along with respiration, pulse, blood pressure, and core temperature.
- Most of the time medication and other treatment can greatly relieve acute pain. Pain management is an important part of effective total care.

Incidence:

- Muscle pain, one of the most common types of acute pain, affects 53 percent of Americans.
- Lower back pain is the most common form of acute pain and is the fifth most common cause for all physician visits. It is responsible for direct health care expenditures of more than \$20 billion annually.
- Depending on the type of operation, between one in ten and one in two patients may develop persistent pain.

Causes:

- Acute pain is triggered by tissue damage such as a skin burn, muscle pain, or a broken bone. It's the type of pain that generally accompanies an illness, an injury, or surgery.
- Acute pain can manifest in just about any part of the body.

CANCER PAIN FACTS

Key Facts:

- Not everyone who has cancer experiences pain; those who do may not have it all the time.





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- Ongoing cancer pain can be successfully treated in about 95 percent of people with cancer with the drug and non-drug therapies that are currently available.
- Along with ongoing cancer pain, sometimes people have acute flares of pain when not all pain is controlled by the medication or therapy. This pain, usually called breakthrough pain, can also be controlled by additional medications.
- Cancer patients often downplay their pain to doctors for fear that their pain means that their cancer is getting worse or that they will be thought to be complainers.
- In almost every aspect of cancer treatment – surgery, chemotherapy or radiation – cancer patients follow the lead of their doctors. But when it comes to pain, patients need to assert themselves and be open about the degree of pain they are experiencing.

Incidence:

- Approximately 30 to 40 percent of Americans diagnosed with cancer experience moderate to severe pain, with 90 percent of people who have a more advanced diagnosis of cancer experiencing significant amount of pain.
- Sixty to 80 percent of all cancer patients with bone metastases feel pain.

Causes:

- Most cancer pain is caused by the effects of cancer itself, side effects of treatment, compression on bones, nerves or body organs, poor blood circulation, blockage of an organ, metastasis, infection, or inflammation.

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Daniel B. Carr, M.D.

Biographical Summary

Daniel B. Carr, M.D., is the Saltonstall Professor of Pain Research in the departments of anesthesia and medicine at Tufts-New England Medical Center. He also serves as vice chairman for research of Tufts-New England Medical Center's department of anesthesia, and medical director of its pain management program.

A graduate of Columbia College and Columbia University, Carr trained in internal medicine at Columbia-Presbyterian Medical Center and later at the Massachusetts General Hospital, where he continued his training in internal medicine, endocrinology and anesthesiology. He is a diplomate of the American Boards of Internal Medicine and Anesthesiology and the American Board of Pain Medicine, and holds the Certificate of Added Qualification in Pain Management from the American Board of Anesthesiology.

Carr is known internationally for his contributions to pain research, including:

- Co-chairing and drafting major portions of the Agency for Health Care Policy and Research *Clinical Practice Guidelines on Acute and Cancer Pain Management*;
- Preparing related scholarly publications, such as meta-analyses of pain therapies;
- Serving as principal technical consultant for the Agency for Healthcare Research and Quality's evidence reports on cancer pain; and
- Serving in leadership roles in developing comprehensive multidisciplinary pain treatment centers (and their accredited fellowship programs) at the Massachusetts General Hospital and Tufts-New England Medical Center.

Carr is the editor-in-chief of the International Association for the Study of Pain's didactic publication for front-line clinicians, *Pain: Clinical Updates*; lead editor for pain trials in the Cochrane collaborative review group on Pain, Palliative and Supportive Care; and an editorial board member of several pain-related journals.





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He co-directs the multidisciplinary Master of Science degree program in pain research, education and policy at Tufts University School of Medicine. He has served as a consultant or board member for the American Pain Society, the American Academy of Pain Medicine, the International Association for the Study of Pain, the Legislative Task Force on Pain of the Commonwealth of Massachusetts, the Joint Commission for the Accreditation of Healthcare Organizations, and the National Institutes of Health Clinical Center Pain and Palliative Care Working Group.

Carr is the recipient of many awards, including the Bernard Schoenberg Memorial Award and the American Institute of Life-Threatening Illness and Loss, New York. He has received citations from the U.S. Department of Health and Human Services for co-chairing the Acute and Cancer Pain Guideline Panels. Carr also has been selected as a Bonica Lecturer for the University of Washington and the inaugural Benson lecturer at Johns Hopkins University. He received an honorary fellowship in the faculty of pain medicine from the College of Anesthetists of Australia and New Zealand.

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Penney Cowan

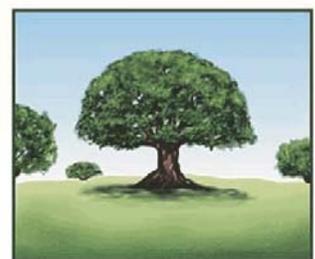
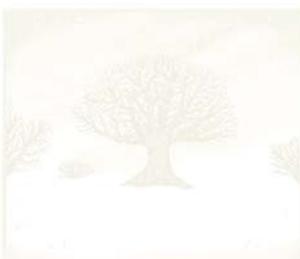
Biographical Summary

Penney Cowan is the founder and executive director of the American Chronic Pain Association (ACPA). Cowan lives with chronic pain and established the ACPA in 1980. The ACPA provides peer support and education in pain management skills to people with pain and their families. The ACPA also works to build awareness about chronic pain among professionals, decision makers and the general public.

Over the past 22 years, Cowan has been an advocate and consumer representative for pain issues. She was awarded the Jefferson Medal for Outstanding Citizen by the Institute for Public Service, Washington, and is listed in *Who's Who in America, 24th Edition*. She is the author of *Patient or Person, Living With Chronic Pain*, published by Gardner Press.

Cowan serves on the American Academy of Pain Medicine Medical School Curriculum Advisory Board to develop standardized medical school curriculum in the basic and clinical science of pain care. The committee works with the American Academy of Pain Medicine to refine, test and implement the curriculum. Cowan also serves on the Chronic Pain Panel of the Practice Guidelines Coalition, which develops multidisciplinary clinical practice guidelines for behavioral health care.

Cowan is a recognized speaker advocating a multidisciplinary approach to pain management on behalf of those living with pain. Some of her speaking engagements have included the Auburn Pain Clinic; Web MD; National Institute of Health Barriers on Treatment of Pain; the Worldwide Pain Congress; and Pain in the Workplace executive briefing.

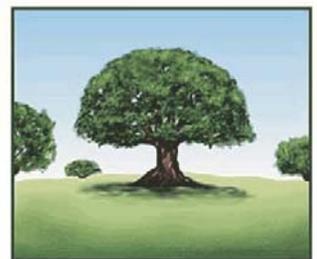
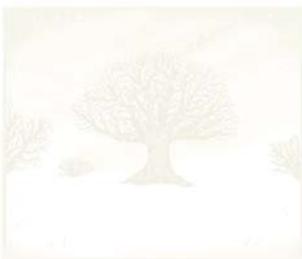




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Cowan has contributed to the Time-Life Medical video series *At the Time of Diagnosis* and a Time-Life book about back pain. She also served as a lay representative for the Cleveland Clinic Foundation Pain Management Program, for accreditation by the Commission on Accreditation of Rehabilitation Facilities, now known as CARF. Cowan also served as a consultant for the development of the pain management program for Forbes Regional Hospital, Pittsburgh.

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The American Chronic Pain Association (ACPA) Fact Sheet

- Founded in 1980, the ACPA is the most comprehensive and well-established self-help network dedicated to helping people with chronic pain in conjunction with their medical treatment.
- ACPA facilitates peer support and education for individuals with chronic pain and their families.
- ACPA works to raise awareness among the health care community, policy makers, and the public at large about issues of living with chronic pain.
- Learn more about the American Chronic Pain Association at www.theacpa.org.

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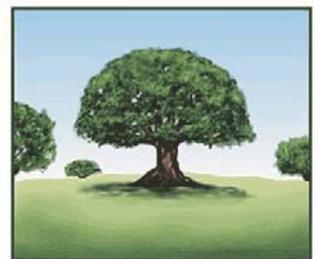
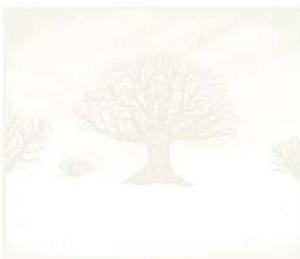


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Partners for Understanding Pain Mission

- Partners for Understanding Pain is a consortium of organizations that touch the lives of people with chronic, acute, and cancer pain.
- The partnership, spearheaded by the American Chronic Pain Association (ACPA), will strive to create greater understanding among health care professionals, individuals and families who are struggling with pain management, the business community, legislators, and the general public that pain is a serious public health issue.
- Through its members, each of whom brings its own perspective to the dialogue, Partners for Understanding Pain represents a comprehensive network of resources and knowledge about issues in pain management.
- Partners for Understanding Pain is dedicated to building the understanding and support that can help people with chronic, acute, and cancer pain lead better lives. Call 1-800-533-2075 or 1-800-533-3231 or visit www.theacpa.org for more information.

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Partner List

August 21, 2002

American Academy of Nurse Practitioners

American Academy of Pain Medicine

American Academy of Physical Medicine and Rehabilitation

American Alliance of Cancer Pain Initiatives

American Back Society

American Cancer Society

American Chronic Pain Association

American Nurses Association

American Pain Foundation

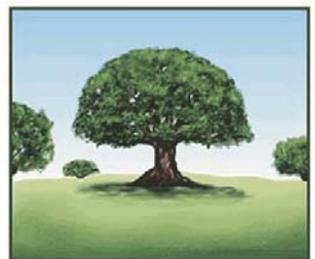
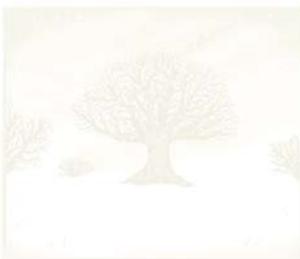
American Pain Society

American Sleep Apnea Association

American Society of Perianesthesia Nurses

American Society of Pain Management Nurses

Arthritis Foundation





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Association of Rehabilitation Nurses

Association of Repetitive Motion Syndromes

**Baylor College of Medicine:
Department of Physical Medicine & Rehabilitation**

Center for Cancer Pain Research at Johns Hopkins

**Chronic Fatigue Syndrome and Immune Dysfunction Syndrome (CFIDS)
Association of America**

Circle of Friends with Arachnoiditis

Family Caregivers Alliance

Intercultural Cancer Council

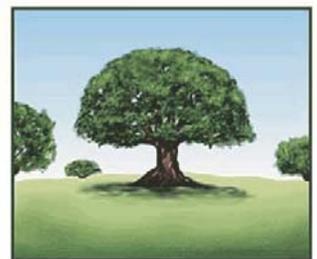
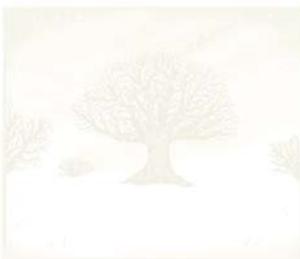
International Endometriosis Association

International Polio Network

Interstitial Cystitis Association

Lupus Foundation of America

National Association of Social Workers





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National Black Women's Health Project

National Committee on the Treatment of Intractable Pain

National Consumer League

National Fibromyalgia Association

National Fibromyalgia Partnership

National Headache Foundation

National Pain Foundation

National Urban League

National Vulvodynia Association

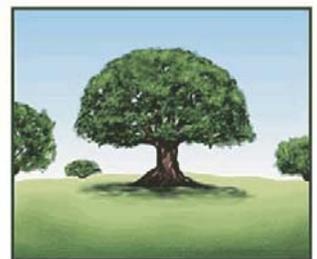
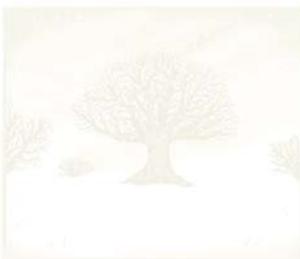
National Women's Health Resource

Peripheral Neuropathy

Progress on Pain

Reflex Sympathetic Dystrophy Syndrome (RSDS) Association of America

Sickle Cell Disease Association





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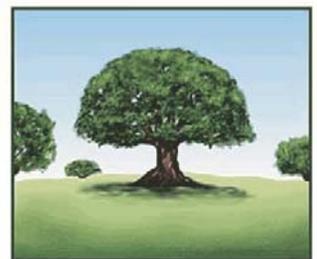
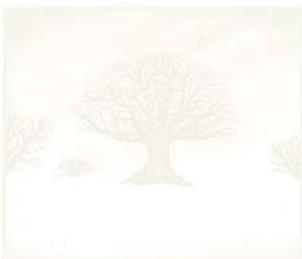
Southern California Cancer Pain Initiative

Trigeminal Neuralgia Association

Triumph Over Pain Foundation

VZV Research Foundation

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For a high-resolution digital image of the Partners for Understanding Pain logo, please contact:

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