

Understanding chronic pain

To improve quality of life and reduce the socioeconomic burden...

Chronic pain, defined as pain that persists for longer than three months, is a significant health problem. The Centre for Pain Research (CPR) at the National University of Ireland, Galway, provides an important focus for scientists and clinicians to understand and alleviate the problem of chronic pain. Researchers at the School of Psychology play a key role in this multidisciplinary effort.

The PRIME study (Raftery et al) recently published in the journal 'PAIN', determined the point prevalence of chronic pain in Ireland, and examined the psychological and physical health profiles of adults with and without chronic pain. The prevalence of chronic pain among Irish adults was 35.5%, and it increased with age and manual employment. Chronic lower back pain emerged as the most common syndrome. Some 12% were unable to work or had reduced work hours, and 15% met the criteria for clinically relevant depression. Disability levels were predicted by pain intensity, depression and illness perceptions.

The authors have now completed a one year follow-up of the same survey respondents (due to be published in 'Journal of Pain'), which adds an estimate of the economic cost of chronic pain in Ireland. The mean cost per chronic pain patient was estimated at €5,665 per year and costs for those with clinically elevated depression scores were twice as high. Targeted treatment of depression, therefore, is vital as in addition to psychological benefits it can result in cost savings in the health services. The total cost for adults with chronic pain was estimated at €4.76bn per year, representing 2.55% of Irish GDP in 2008.

Chronic pain can also impact on cognitive function. A recent systematic review by researchers at CPR (Moriarty et al) published in 'Progress in Neurobiology' suggests that chronic pain may affect cognitive processes such as attention and memory, beyond the impact of medication taken for pain relief. An important study is now underway at CPR to examine this.

Psychological interventions contribute an important dimension to pain management programmes. Research published in 'Rheumatology' (Groarke et al) showed that perceived disease status, outweighed the impact of objective disease status in predicting perceived pain suggesting that interventions to modify illness perceptions may help with pain management.

Another report from the School of Psychology, published in 'PAIN' (Fish et al), described the validation of a brief measure of pain acceptance (the CPAQ-8), supporting research on the clinical effectiveness of cognitive/acceptance-based therapy. Other ongoing work examines the efficacy of a cognitive behavioural treatment programme in reducing pain related disability for chronic lower back pain.

Family physicians are at the forefront of managing people with chronic pain and are the gatekeepers for access to specialist services. Dr Pádraig MacNeela from the School of Psychology has led several research projects with colleagues at the Centre for Pain Research to study the clinical decision making processes of general practitioners in relation to chronic pain (MacNeela, Gibbons, McGuire, and Murphy, 2010).

Doctors relied on a knowledge base derived from their direct clinical

experience when managing patients with chronic lower back pain. The use of patient stereotypes, combined with limited training in formal psychosocial interventions, suggests a need to develop new interventions for professional development.

Another recent longitudinal qualitative study of the subjective experience of patients identified the distress seen in previous studies. It brought a new perspective by exploring patient acceptance and the active struggle they must undertake on an ongoing basis to manage chronic lower back pain (MacNeela, Mulveen, McGuire and O'Gorman).

Joint Director of the Centre for Pain Research, psychologist Dr Brian McGuire recently spoke at the EU Societal Impact of Pain meeting in Brussels. We know Ireland fares poorly compared to many of its neighbours in Western Europe and chronic pain services are scarce and under-resourced. Increased interdisciplinary pain rehabilitation programmes are essential to improve quality of life and they can reduce the economic burden of chronic pain in Ireland.



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