

Pain treatment implementation research: Opportunities and Challenges

William C. Becker, MD
Professor, Internal Medicine
Yale School of Medicine
VA Connecticut Healthcare System



Disclosure

I have no conflicts of interest related to the content of this presentation.

Chronic pain epidemiology

- In 2016, estimated 20.4% (50.0 million) U.S. adults had chronic pain; 8.0% with (19.6 million) high-impact chronic pain
- Higher prevalences among women, older adults, currently unemployed, those living in poverty, with public health insurance, and rural residents
- Prevalence likely increasing



Evidence-based high value chronic pain care

Improved
Pain
Function
Quality of Life

**Self
Management**

Behavioral
therapies

**Self
Efficacy**

**Management
of co-
occurring
conditions**

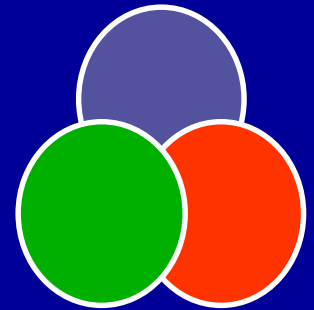
Rational
Pharmaco-
therapy

Physical
modalities

**Incorporating
patient
values/preferences**

Integrated Health System

Evidence-based treatments for chronic pain



Active/Physical modalities

- Structured exercise
- Physical therapy
- Yoga
- Tai Chi
- Aqua-therapy

Behavioral treatments

- Cognitive behavioral therapy
- Mindfulness based stress reduction

Manual techniques

- Chiropractic
- Acupuncture

Evidence based models

- Collaborative care interventions
- Integrated Pain Team

Barriers to uptake of pain EBPs

Workforce issues

- Unprepared workforce (education/training)
- Over-burdened primary care providers/competing priorities

Financial/systems issues

- Financial misalignment favoring use of low value treatments; Healthcare system prioritizing biomedical model

Public health needs

- Public health campaigns on pain/biopsychosocial model

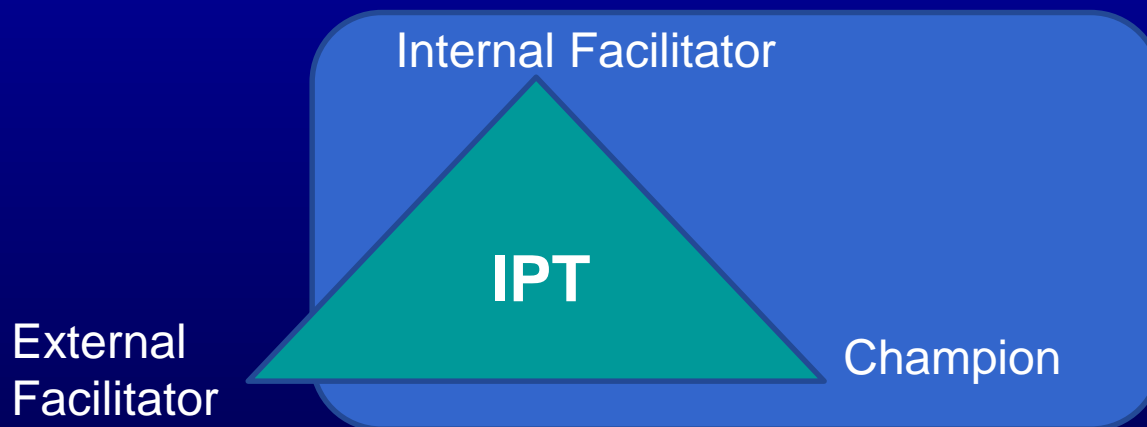
Facilitation

A goal-oriented, context dependent social process for implementing new knowledge into practice or organizational routines. It typically involves individuals learning together in the context of a recognized need for improvement and supportive relationships. Effective communication and interactive problem solving are key process components.

Berta et al. (2015). Why we think facilitation works: insights from organizational learning theory. *Implementation Science*, 10:141.

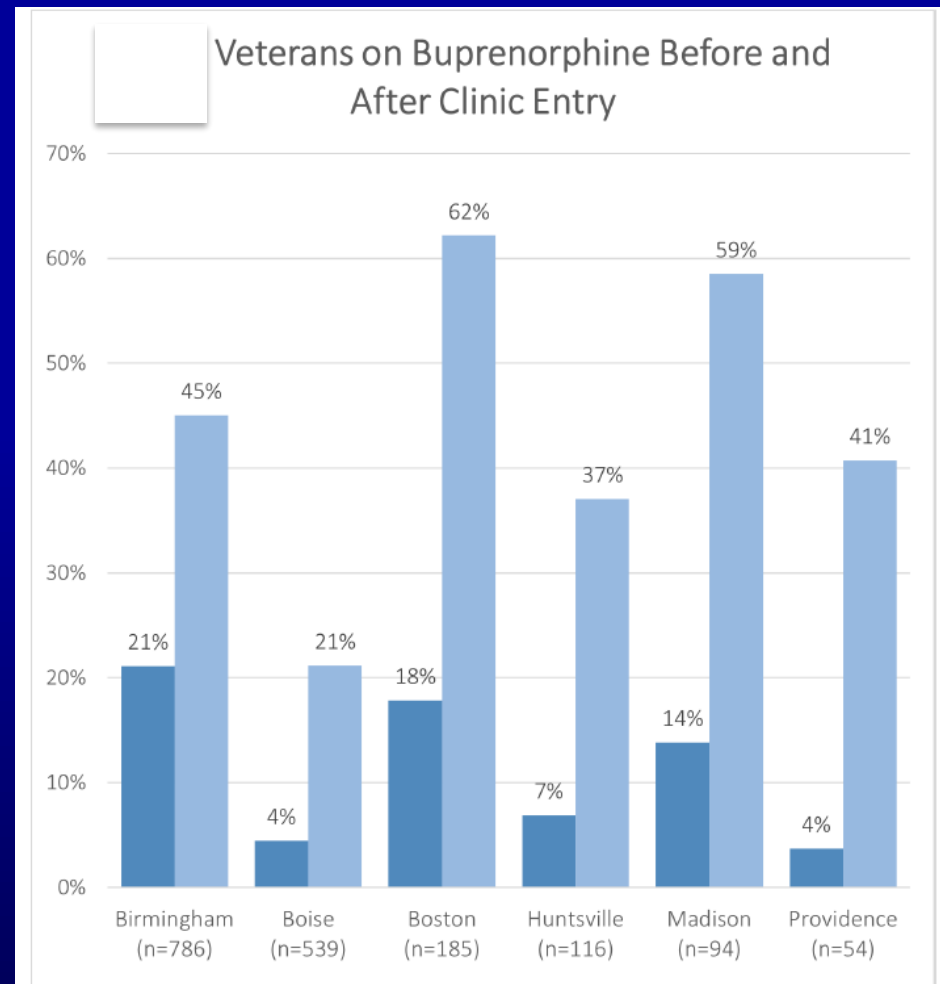
Facilitation

- Multifaceted, dynamic process
- Bundle of integrated set of strategies
- Relies upon supportive interpersonal relationships with partners, continuous problem-solving/coaching along the way



IPT implementation using facilitation

- 6 VA sites
- Facilitation strategies:
 - 6 months of biweekly EF/IF
 - Dashboard creation
 - Audit and feedback
 - Community of practice
- RE-AIM guided outcomes



Summary

- Chronic pain and high-impact chronic pain are highly prevalent
- Multimodal, multidisciplinary care is optimal
- Formidable multi-level barriers
- To enact National Pain Strategy's vision, will need major policy efforts and significant investment in implementation research and dissemination efforts