

MEDIA BACKGROUND INFORMATION:

THE IMPACT OF SEVERE CHRONIC PAIN

Pain is a widespread problem across Europe

Chronic pain is a widespread problem across Europe, and an estimated one in fifteen adults (n=46,394) are affected with severe chronic pain.¹ Chronic pain is classified as pain that persists or progresses over a long period of time (usually stated as over three months).² Examples include back pain, arthritis and osteoarthritis.

Pain can be classified into several types:

- Nociceptive pain: this arises from the stimulation of specific pain receptors and can be either somatic (from tissues such as skin, muscle, joints, bones and ligaments) or visceral (arising from internal organs);
- Neuropathic pain: arises from within the peripheral or central nervous system;
- Mixed pain: a combination of the above (neuropathic and nociceptive pain).

Differentiating between the various pain states can be crucial in identifying the right type of pain control.

Impact of pain

Pain can have a significant impact on a patient's quality of life. According to a recent pan-European survey of 4,839 people who experience chronic pain, simple everyday activities such as sleeping and exercising become significant problems for 40 percent of patients.¹ Nearly one third of the 4,839 patients surveyed say that their pain has affected their relationships with family and friends whilst nearly one in six feel their pain is sometimes so bad they want to die.¹

The impact of chronic pain also extends into patients' working lives. Nearly 500 million days every year are lost due to people suffering from chronic pain, costing the European economy at least €34 billion.¹ In addition, one in five of the 4,839 patients surveyed with chronic pain have lost their job and a similar percentage of people have been diagnosed with depression as a result of their pain.¹

Treatment of pain

The overall goal of treating chronic pain is to enable people with pain to live full and rewarding lives in the face of chronic illness.

There are a variety of treatment options for people with chronic pain including non-pharmacological treatments, such as acupuncture and transcutaneous electrical nerve stimulation (TENS) and pharmacological treatments. As the level of pain increases, different types of medication or doses can be used. Pharmacological treatments include:

- Over-the-counter (OTC) pain relief medications, including some nonsteroidal anti-inflammatory drugs (NSAIDs), e.g. ibuprofen
- Anti-convulsants and anti-depressants
- Opioid pain relief medications e.g. codeine, morphine, oxycodone

Despite the availability of effective treatments, research demonstrates that many patients in Europe are not receiving the best treatment for their pain. Two thirds of the 4,839 patients surveyed with chronic pain feel that their prescription medication is not sufficient to control their pain and one in four feel that their doctors are unable to control their pain.¹

Opioids

Opioids are a class of pain relief treatments that reduce the perception of pain in the brain. They have proven to be effective in treating many types of pain^{3,4} and are widely accepted and used both by general practitioners and specialists.⁵ Opioids are generally classified as either 'weak' or 'strong', which is an arbitrary classification.

Weak opioids such as codeine and dihydrocodeine may be taken on their own, or used in combination with other drugs such as paracetamol. If weak opioids fail to effectively control pain, strong opioids, such as morphine or oxycodone, may be introduced to better control the pain. Strong opioid analgesics play a key role in the treatment of severe, chronic, non-malignant pain. However, research has shown that strong opioids are often underused, resulting in poorly-controlled pain which negatively impacts patients' quality of life.^{1,5}

References

- ¹Pain in Europe: A Report. Available from:
http://www.paineurope.com/index.php?q=en/book_page/the_pain_in_europe_report
- ²Classification of Chronic Pain. Descriptions of Chronic Pain Syndromes and Definitions of Pain Terms, Second Edition, 1994. Prepared by the Task Force on Taxonomy of the International Association for the Study of Pain, Harold Merskey, Nikolai Bogduk, Editors
- ³Kalso E, Edwards JE, Moore RA, McQuay HJ. Opioids in chronic non-cancer pain: systematic review of efficacy and safety. *Pain* 2004;112:372-380
- ⁴Quigley C. Clinical Review: The role of opioids in cancer pain. *BMJ* 2005;331:825-829
- ⁵White Paper on Opioids and Pain: A Pan-European Challenge'. The OPEN Minds Group, June 2005