

Preventing Chronic Pain and Addiction

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Dentistry, Medicine, and Public Health

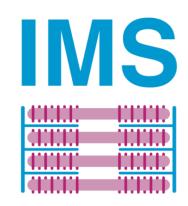
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MS The Campaign for



Chronic Pain. It's Real. It's Preventable. Learn how.

www.preventingchronicpain.org



Disclosure Information Dr. James Fricton Preventing Chronic Pain



- Support from National Institutes of Health
 - No off label use and/or investigational use of medications are discussed
- Private Practice, Minnesota Head and Neck Pain Clinic
- Seven Realms Solutions and PACT



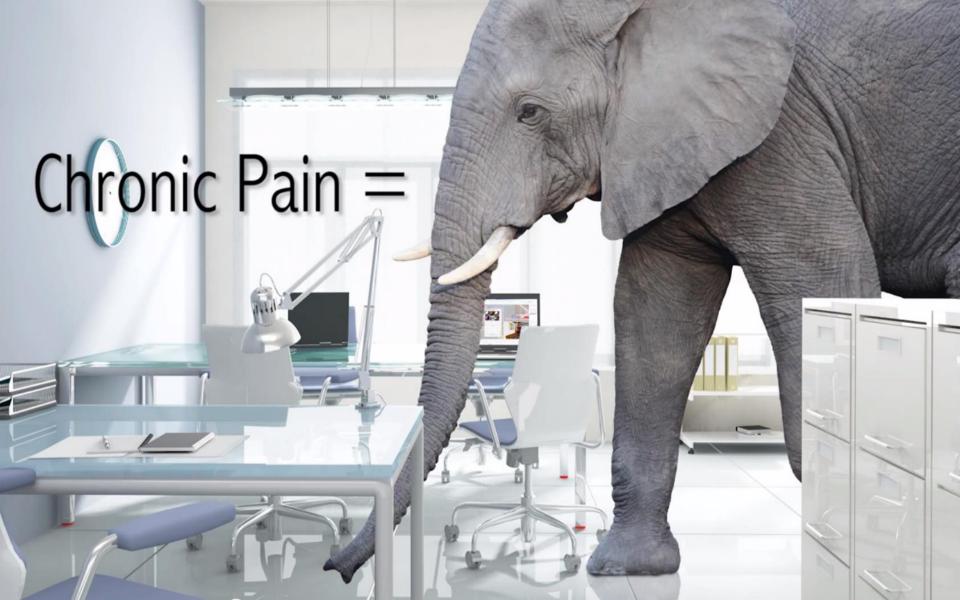


Topics



Chronic Pain. It's Real. It's Preventable. Learn how.

- The dilemma of chronic pain
- The Importance of preventing chronic pain
- Expanding education, research, and advocacy for preventing chronic pain and addiction
- Personalized Activated Care and Training



#1 driver of healthcare costs

Chronic pain costs U.S. up to \$635 billion, study shows

Date: September 11, 2012

Source: American Pain Society

Summary: Health economists have reported the annual cost of chronic pain in the

United States is as high as \$635 billion a year, which is more than the

yearly costs for cancer, heart disease and diabetes.

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Health & Medicine

> Pain Control

ealth economists from Johns Hopkins University writing in *The Journal of Pain* reported the annual cost of chronic pain is as high as \$635 billion a year, which is more than the yearly costs for cancer, heart disease and diabetes.

#1 reason people seek care

67% of all visits



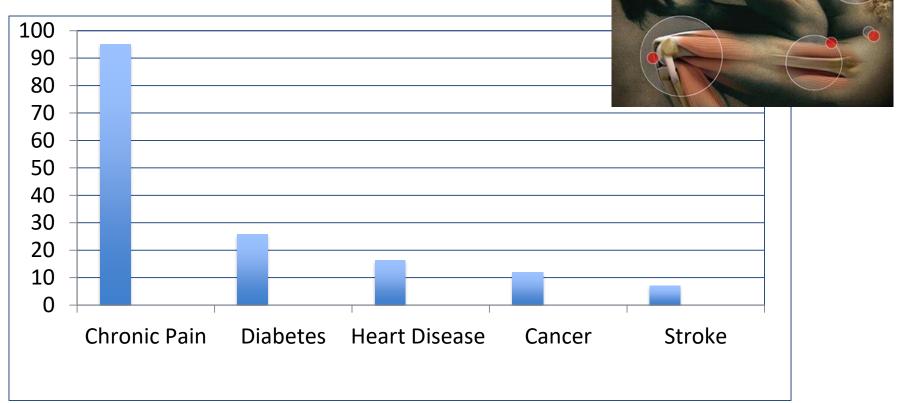






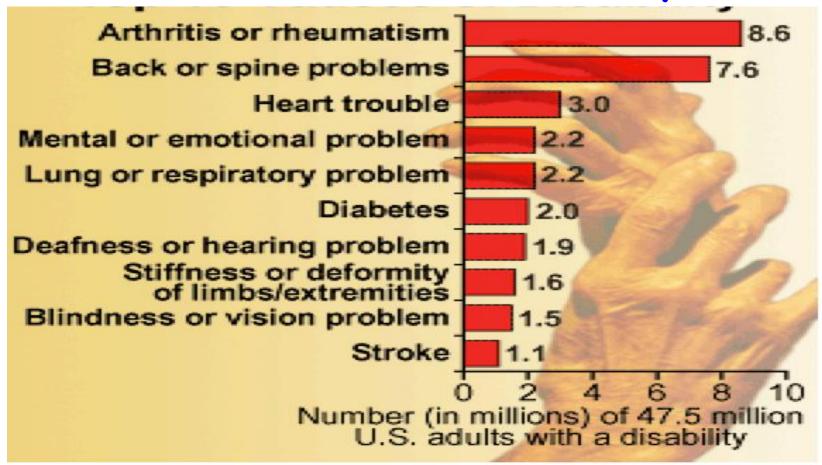
Mayo Clinic Proceedings, 2011



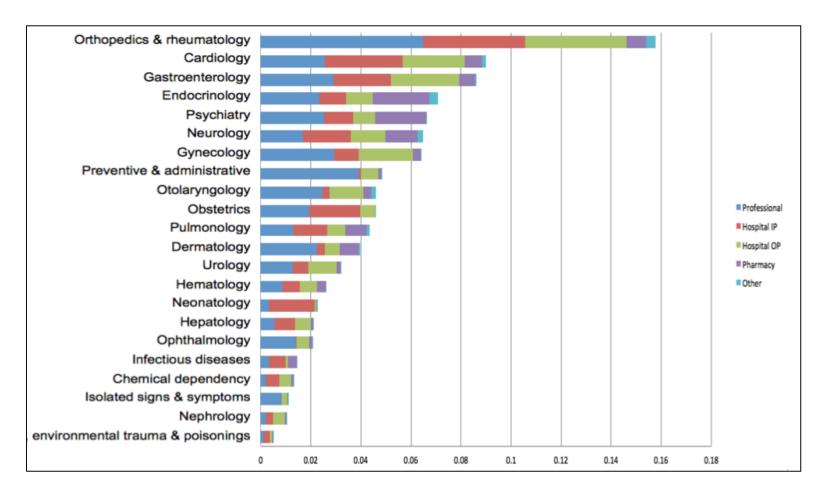


Figures in millions of people from the Institute of Medicine of The National Academies and the American Diabetes, Heart and Cancer Associations

The #1 Cause of Disability



#1 cost driver of health care



HealthPartners Health Plan, 2010 Cost Analysis by specialty



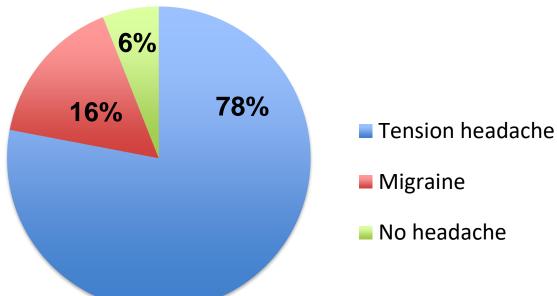
#1 cause of addiction



Pain Physician. 2012;15:ES67-ES92

Headache and facial pain are the most common...

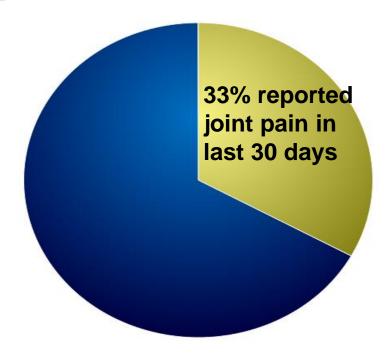
Lifetime Prevalence of Headache





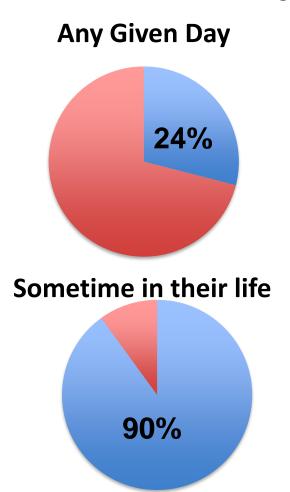
47% had at least one headache within the past year

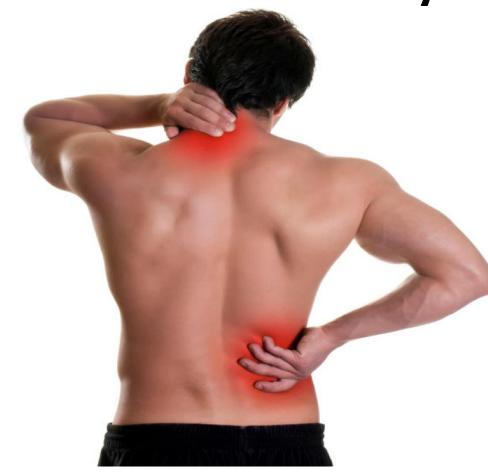
Joint pain is the most expensive...





Back and neck pain cause more disability...





Summary Health Statistics for U.S. Adults: National Health Interview Survey, Center for Disease Control, 2011

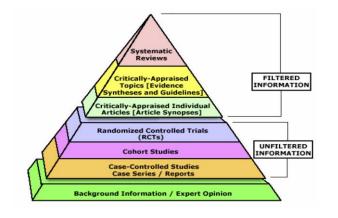
Billions are spent treating it



How well do pain treatments work?

Systematic reviews of RCTs for...

- ✓ Physical therapy & chiropractic
- ✓ Cognitive-Behavioral treatments
- ✓ Psychological treatments
- ✓ Splints and orthotics
- ✓ Medications including opioids (oral & topical)
- ✓ Injections and nerve blocks
- ✓ Surgery and implants



Systematic reviews show...



Almost every treatment works about 10 to 20% above placebo...



Almost every treatment works about 10 to 20% above placebo...

but only short-term



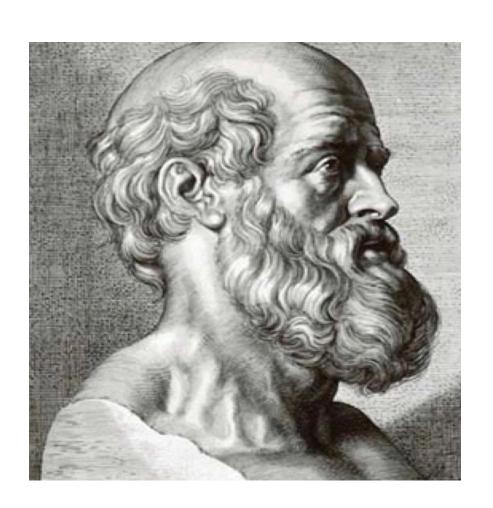
Delayed recovery is common



- Over half of individuals with pain conditions at 1 month still have pain 5 years later
- Many of these patients continue to seek care for their pain years after onset
- Failed treatment and delayed recovery is often due to many physical, behavioral, and psychosocial risk factors that are not addressed



Consider ancient wisdom...



"It is more important to know what kind of person has a disease than to know what kind of disease a person has."

-Hippocrates (384 BC to 322 BC)



Risk Factor (causes)

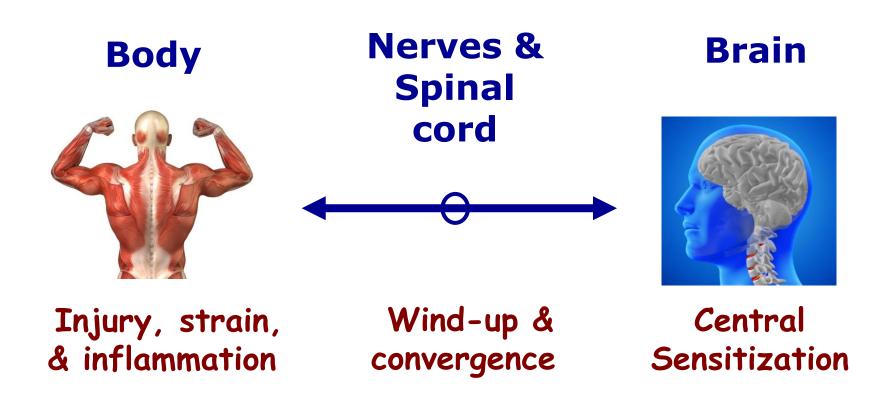
Characteristic, condition, or behavior, such as poor sleep, diet, stress or smoking, that increases the possibility of illness, injury, pain (sensitization).



Protective Factor (cures)

Characteristic, condition, or behavior, such as exercise or healthy diet, that prevents or reduces vulnerability to developing an illness and pain.

How do risk factors increase pain?



Risk Principle

Injury Acute Pain

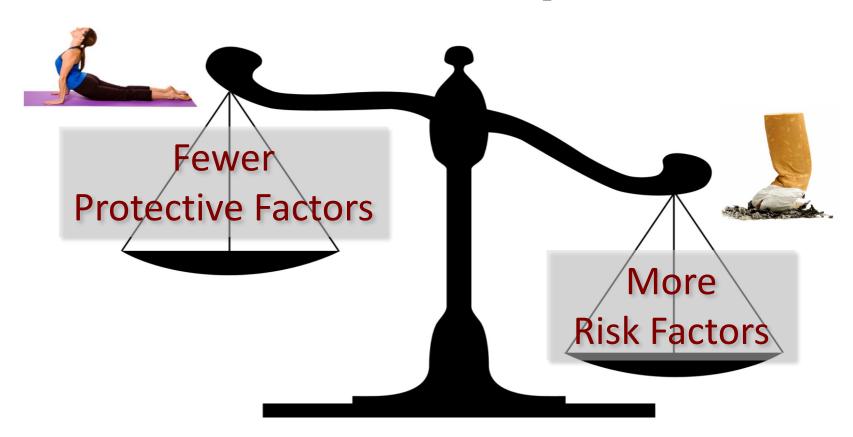


Risk Factors

Delayed Healing **Chronic** Pain



Risk Principle



Protective Principle

Injury Acute Pain

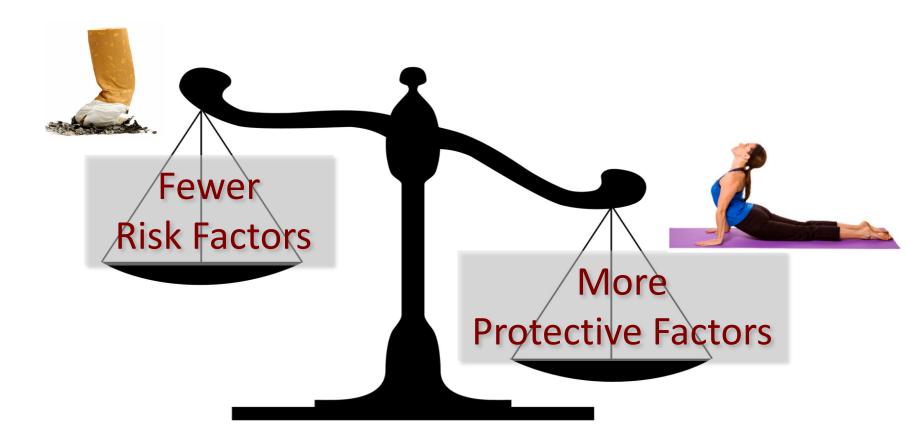


Protective Factors

Normal Healing
No Chronic Pain



Protective Principle



Risk and Protective Factors for chronic pain

6 5		
	B ody	e.g. fitness, range of motion, posture, strength, injury
	L ifestyle	e.g. diet, sleep, activity level, pacing, sitting, strain, work activity, substance use
	E motions	e.g. anxiety/calm, depression/happiness, anger/peace, guilt/shame
	S pirit	e.g. direction/ burned out, hope/ hopeless, stress, self-compassion
	S ociety	e.g. harmony with others, social connection/ support, stress, secondary gain/ recovery rewards
	Mind	e.g. optimism/ pessimism, understanding, expectation, self-efficacy, resilience, coping
A THORN	E nvironment	e.g. safe, clean, infection-free, organized, orderly, adverse event-free, accident-free

New Model of Transformative Care

Treat as usual with medications, therapy, surgery, and others

Train patients in self-management to reduce risk and boost protective factors

Team with health coach to support patient change

Technology with patient training, tracking, and dashboard



Transform the patient and the health care system





Transformative Care is a rare TRIPLE WIN!

- Better quality of care
- Better outcomes of care
- Lower cost of care

-Institute for Healthcare Improvement

The Problem

Self-management training is neglected in routine care due to...

- ✓ Not part of biomedical model
- ✓ Inadequate time to "train" patients
- ✓ Lack of reimbursement
- ✓ Healthcare reform and regulation by health plans
- ✓ Tedious electronic health record charting
- ✓ Inadequate training of health professionals



But, just how do we change that?





Integrates Self-Management Training into Routine Care



- ✓ Extends provider's care into patient's daily life
- ✓ Free for health professionals to use
- ✓ Easy to explain & implement with patients
- ✓ Employs broader whole person model of care
- ✓ Reimbursed by health plans for preventive medicine counseling to supplement office visits
- ✓ Easy to document in electronic health records
- ✓ Training programs for health professionals to learn to use

Scope of Pain Conditions



- Back pain
- Hip pain
- Headache
- Neck/ upper back pain
- Jaw/ facial pain
- Shoulder pain
- Others in future



Easy to implement in routine patient care



PACT includes;

- ✓ Training patients in self-management skills
- ✓ Introduce and quick enroll patients
- ✓ Team with tele-health coach
- ✓ Personalized care based on risk assessment
- ✓ Tracking patient-centered outcomes
- ✓ On-line access anywhere anytime by team

Introducing PACT in the clinic



Health professionals need to ask...
"I am happy to provide you treatment but it is more effective long-term if we also train you to reduce the lifestyle causes of your pain.

Are you interested?"

Olivia's PACT User Experience

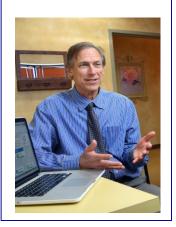
Clinic Consult

Olivia presents with history of years with headaches, facial pain, and neck Pain with many failed treatments. "I don't know what to do. Can you help me?"



Care Plan

Evaluate, discuss diagnosis, treatment & training. "I'm happy to treat you but it is more effective long-term if we also train you to reduce the causes of pain. Are you interested?"



PACT Portal

"Yes, of course I'm interested!" Quick Enroll by doc or staff with name & email. Patient clicks link in email for secure log-in to register. Completes pain & risk assessment and tour.



Telehealth Coaching

PACT matches Olivia to Health Coach. Secure email sent out to introduce them. Coach calls Olivia and begin initial session for goal setting and review of steps. Use telehealth phone visits.



PACT Training

- -Coach review lessons in over 6 months
- -Implement action plan
- -Tier 1: Understanding pain, immediate relief
- -Tier 2: Healing of pain condition
- -Tier 3: Long-term recovery
- -Living in 7 Realms
- -Resolves pain



Health coach extends are within the patient's daily life



- ✓ Help patient in achieve goals
- √ Tele-health visits (8 or more)
- ✓ Implementing action plan
- Encourage adherence
- Improve success and outcomes
- Refer to tele-health psychologist, if needed





On-line Self-management Lessons



Understanding Pain: Conditions, risk factors, pain cycles, self-care

Same-Day Self-Care: for back, hip, neck, shoulder, headache, jaw pain

Mind: Shift to optimism, self-efficacy, expectations, resilience

Body: Implement stretching, exercise, posture, reducing strain

Lifestyle: Healthy diet, sleep, substance use, and activity level

Emotions: Reduce anxiety, depression, anger, and shame

Spirit: Find purpose, self-compassion, hopefulness, grit & determination

Social life: Belonging, social support, work well-being, social stressors

Environment tools: Safe living, hygiene, pollution-free, and minimize risk

Healthy HABITS

Healthy Actions Bring Improvement & Transformation

Studies of...

Exercise

Posture

Diet

Sleep

Social support









= Excellent results

Daily PAUSEs

Pause Assess Understand Start New Enjoy moment

Studies of...

Mindfulness practice

Posture & strain awareness

Substance use

Emotional awareness

Social support









= Excellent results

Practice CALM

Calming Actions Lighten the Mind

Studies of...

Meditation

Biofeedback/ relaxation

Self-hypnosis

Emotional calming





= Excellent results

Resources to Enhance Engagement

- ✓ Smart phone
- ✓ Worksheets/daily log
- ✓ Dashboards
- Action plans
- ✓ Reminders/ alerts
- ✓ When to seek care



Providers reimbursed for preventive medicine counseling

Providers register in PACT for free

- ✓ Introduce PACT to patient & quick enroll (5-10 min)
- ✓ Use Preventive Medicine Counseling fee (e.g. CPT 99402) in addition to office visit
- ✓ Document both in EMR

Health plans reimburses PACT for 6 month pain program;

- ✓ Pain and Risk Assessment (CPT 96160)
- ✓ Risk Reduction Training (CPT 98960)
- ✓ Telehealth coaching for preventive medicine (CPT 99401-4)
- ✓ Tele-Mental Health Psychology (if needed) CPT 90834



Transformative Care Reverses the Pain Cycle



Lower stress, positive emotions, better coping



Decrease muscle habits & strain

Improved sleep energy, less chemical use



PACT Research & Development Phases



Pre-development Research (Risk and Protective factors) (NIH funded)





Conceptual evaluation in Coursera MOOC (U of Mn funded) (n=55,000)



https://www.coursera.org/learn/chronic-pain



Randomized Clinical Trial with PACT Version 1.0 (HPI & NIH funded) (n=80)





Broad-Scale Pragmatic Trial PACT Version 2.0 (NIH) (n=1000) (3 yr)



Training Health Professionals in Pain Management and Use of PACT



UMN On-Line Course on Preventing Chronic Pain and Addiction: A Human Systems Model. U of Minnesota (20 hour CME)



In Progress

SRS On-line Orientation to learn use of PACT Patient Engagement Portal to preventing chronic pain and addiction (2 hour CME)



In Progress

IHE CUE for Pain Transformation: Learning Patient Centered Skills to prevent chronic pain and addiction. (6 hour CME small group)



In Progress

IMS Pain Management Skills Training for Daily Clinical Practice to prevent chronic pain and addiction. (6 hour CME small group)



In Progress









"Divine is the task to relieve pain." -Hippocrates

Thank you

www.preventingchronicpain.org