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EMBARGOED FOR RELEASE MARCH 6, 2014
5:15 PM Mountain Time/7:15 PM Eastern Time

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Post-surgical Pain Control Linked to Patient Satisfaction with Hospital Experience

March 6, 2014, Phoenix, AZ -- Postsurgical pain scores were highly correlated with reports of overall patient satisfaction during hospital stays, in a new finding that was true for some types of surgery more than others. The researchers, who presented results in a scientific poster today at the 30th Annual Meeting of the American Academy of Pain Medicine, stressed the importance of improving patient care in the peri-operative setting in alignment with new federal requirements tying performance to pay.

The goal of the research by Dermot Maher, MD, and colleagues from Cedars Sinai Medical Center in Los Angeles, Calif., was to clarify the relationship between pain control after surgery and the answers provided by patients on the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS). The HCAHPS is the first national, standardized, publicly reported survey of patients' perspectives on the care they receive in the hospital and is filled out at the time of discharge. The Affordable Care Act of 2010 makes the 27-question HCAHPS a factor in value-based incentive payments.

“This study illustrates the crucial role that pain management in the acute post-operative setting can have, not only on a patient’s perception of pain management, but also on the global perception of their hospitalization,” Dr. Maher said.

Investigators examined HCAHPS responses by 2,933 surgical patients who were hospitalized at a single trauma center between March 2012 and February 2013. Four questions (2 assessing satisfaction with in-hospital pain management and 2 addressing general satisfaction) showed a statistically robust relationship when retrospectively compared to patient pain scores as assessed via the post-anesthesia care unit (PACU) visual analog scale.

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Dr. Maher said the results are important to hospital care providers and patients.

“Patients consider a number of factors when evaluating physicians and hospitals. One of the most influential factors is a patient’s perception of pain,” he said. “The universal unpleasantness and complicated nature of pain, especially in the post-operative setting, has the potential to negatively impact overall satisfaction if not optimally managed.”

Further analyses of the data showed patients who had surgery related to spine, non-spine orthopedics, and obstetrics and gynecology showed significantly larger correlations of PACU pain scores with HCAHPS responses than did patients who had other types of surgeries. The stronger association between HCAHPS scores and post-operative pain in certain populations calls into question the appropriateness of universal application of patient satisfaction surveys, or at least the pain component, as a means of reimbursement, Dr. Maher said.

In addition to highlighting the need for better post-operative pain control for patients, Dr. Maher said, the study indicates additional value in identifying anesthetic techniques that might improve patient overall satisfaction (e.g., regional vs. general anesthesia). Preadmission, preoperative and intraoperative interventions, as well as changes in PACU patient care, all could strongly influence HCAHPS scores.

*Poster 115 – Post-Operative PACU Pain Score is Related to Post Discharge HCAHPS Scores: A Retrospective Analysis of 2933 Surgical Patients*

**About AAPM**
The American Academy of Pain Medicine is the premier medical association for pain physicians and their treatment teams with over 2,500 members. Now in its 31st year of service, the Academy’s mission is to optimize the health of patients in pain and eliminate pain as a major public health problem by advancing the practice and specialty of pain medicine through education, training, advocacy and research. Information is available on the Academy’s website at [www.painmed.org](http://www.painmed.org).

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