

INCREASE FEDERAL FUNDING FOR PAIN RESEARCH

POSITION:

The American Academy of Pain Medicine (AAPM) supports increased funding for the development of new infrastructure and mechanisms for advancing pain-specific research within various federal agencies, including the National Institutes of Health (NIH), the Department of Defense (DoD) and Department of Veterans' Affairs (VA).

AAPM members represent a variety of specialties, including anesthesiology, internal medicine, neurology, neurosurgery, orthopedic surgery, physiatry, and psychiatry. Its mission is to promote quality care of patients with pain as a symptom of disease and primary pain disease through research, education, and advocacy.

JUSTIFICATION:

Pain is associated with a wide range of injury and disease, and is sometimes the disease itself. Some conditions may have pain and associated symptoms arising from a discrete cause, such as postoperative pain or pain associated with a malignancy, or may be conditions in which pain constitutes the primary problem, such as neuropathic pains or headaches.

Millions suffer from acute or chronic pain every year and the effects of pain exact a tremendous cost on our country in health care costs, rehabilitation and lost worker productivity as well as the emotional and financial burden it places on patients and their families.

The costs of unrelieved pain can result in longer hospital stays, increased rates of re-hospitalization, increased outpatient visits, and decreased ability to function fully leading to lost income and insurance coverage. As such, patient's unrelieved chronic pain problems often result in an inability to work and maintain health insurance. Reduced productivity due to pain costs employers somewhere between \$60 and \$100 billion annually yet NIH barely spends 1% of its funding on research focused primarily on pain.

Proper assessment of pain is crucial for effective treatment. However, whether at NIH or within the DoD or VA health care systems, the federal government barely provides any funding for the appropriate diagnosis and treatment for pain, or to stimulate the research and education that would yield clinical advances. Even the NIH Pain Consortium established in the mid-1990s to enhance pain research and promote intra-Institute collaboration has had little significant impact on NIH's commitment to pain research, or its effectiveness. At the current time, the Consortium exists more on paper than in fact.

Despite great scientific strides in the past decade, we are far from accomplishing a satisfactory impact on this enormous world-wide health problem. Too many people suffer daily, severe pain. Much more needs to be done to meet these challenges and to increase public awareness of them.

REQUEST:

To answer these unaddressed priorities, AAPM requests that your office: 1) cosponsor the National Pain Care Policy Act of 2007; 2) cosponsor the Military and Veterans Pain Care Act of 2007; and 3) support increased funding for NIH, DoD and VA related pain research.