

CHRONIC PAIN – A MAJOR ISSUE IN RURAL AUSTRALIA

...good health and wellbeing in rural and remote Australia

Pain is the most common reason that people seek medical help, yet it remains one of the most neglected and misunderstood areas of healthcare. Chronic pain is more prevalent in rural and remote Australia than in the cities. Treatment needs to be specific to the person needing care.



One in five Australians lives with chronic pain. This prevalence rises to one in three people over age 65 and is projected to increase as Australia's population ages – from around 3.2 million in total in 2007 to 5 million by 2050. Women over age 45 experience chronic pain consistently more than men.

Chronic pain is Australia's third most costly health condition after cardiovascular diseases and musculo-skeletal conditions, which also have strong connections to chronic pain. Back pain and arthritis - both associated with chronic pain - are the most common causes for people aged 45-64 to drop out of the workforce, accounting for 40 percent of forced retirements: around 280,000 people in 2012.

There is a strong link between chronic pain and lower socio-economic status. Aboriginal and Torres Strait Islander people and people from culturally and linguistically diverse backgrounds are at particular risk.

Almost one in five GP consultations involves a patient with chronic pain, and more than a third of these report severe, disabling chronic pain. Nevertheless, up to 80 per cent of patients miss out on treatments that could improve their quality of life; fewer than 10 per cent of patients with chronic non-cancer pain gain access to effective care.

Prevalence of chronic pain in rural and remote Australia

An Australian Bureau of Statistics (ABS) study reports that people who live outside major cities are 23 per cent more likely to have back pain (the most commonly

reported location of pain, and thus a reasonable 'proxy' for chronic pain), a figure that rises to a 30 per cent increased likelihood for rural residents aged 55 to 64.

Chronic pain treatment problems in non-metropolitan Australia follow the well-known patterns of rural and remote health disadvantage:

- consumer information is difficult to obtain;
- under-staffing and frequent lack of continuity of health professionals means reduced treatment accessibility;
- professional development in pain management techniques is hard to access; and
- specialists in pain management are rarely available locally.

The industries of rural and remote areas – agriculture, mining, forestry and fishing – have higher incidences of injury, which in turn mean more untreated pain. In addition, excess body weight can lead to osteoarthritis and thus chronic pain; and according to the ABS, rural residents are 13 per cent more likely to be overweight or obese.

The self-reliant culture of country people may exacerbate the problem. Their stoic attitude towards adversity means they may silently endure chronic pain and not complain.

Despite the higher prevalence of chronic pain in rural and remote Australia, there is not a sufficient research base on its incidence and treatment in those areas.



The National Pain Strategy: pain management for all Australians

Key Goals:

1. People in pain as a national health priority
2. Knowledgeable, empowered and supported consumers
3. Skilled professionals and best-practice, evidence-based care
4. Access to interdisciplinary care at all levels
5. Quality improvement and evaluation
6. Addressing gaps in knowledge and practice through research

Mental health, aged care and children

One in five adults with severe pain also suffers depression or other mood disorders. According to Suicide Prevention Australia, physical health problems are implicated in 21 per cent of suicides in Australia.

In residential aged care, 92 percent of people are taking at least one analgesic medication daily and 80 percent of people list pain as a problem. People in aged care facilities are frequently over-treated or under-treated for pain; dementia residents living with pain are being under-treated.

Although up to 35 per cent of children and adolescents experience chronic pain, there are only five dedicated multidisciplinary paediatric pain services in Australia, only one of which is in a regional centre.

Multidisciplinary approach to pain management

Patients with chronic pain often receive the same approach to treatment that would be applied to acute pain but this is generally ineffective. Use of medication such as morphine or another opioid alone may confer analgesic benefit but is unlikely to result in psychological or functional improvement, and has associated risks.

Growing evidence shows the effectiveness of multidisciplinary pain management, consisting of treating the physical, psychosocial, medical, vocational and social aspects of chronic pain. The multidisciplinary team should include a physician, nurse, psychologist or psychiatrist, and physiotherapist or occupational therapist and pharmacist, and may also include a vocational counselor or social worker.

Although a multidisciplinary approach may include medical interventions and medication, it is largely based on non-invasive and non-pharmacological treatments: a combination of medical approaches, physiotherapy, and psychological assistance based on Cognitive Behavioural Therapy (CBT). Many patients also benefit from joining a patient support group.

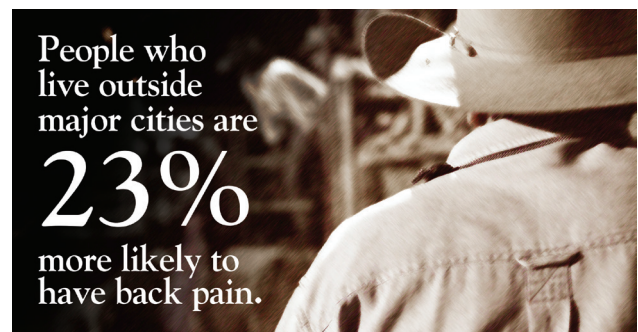
Responding to the rural challenges

The National Pain Strategy provides a blueprint which aims to ensure access to early intervention and effective pain management for people throughout Australia.

Multidisciplinary pain management is the model used in specialist pain centres; it should also be applied in primary care, where early intervention can be effective in preventing acute pain conditions becoming chronic.

Bringing together the necessary professional team can be challenging in rural settings. But five states and the ACT have now endorsed the National Pain Strategy and 12 new regional pain centres have been established in New South Wales, Queensland and Victoria.

Pain teams at most of these centres and in major metropolitan hospitals provide services in rural communities through the Medical Specialist Outreach Assistance Program, while telehealth allows people in more remote areas to have a video consultation with a specialist pain physician, psychiatrist or a multidisciplinary pain team.



Rural GPs now have access to pain management education on GP Learning, and the Department of Health has allocated funding to support development of education and training for nurses and allied health professionals online and by webinar. Painaustralia is working with the Australian Medicare Local Alliance to roll out this program nationally.

Resources and information for consumers and health professionals can be accessed at:

- www.painaustralia.org.au
- www.painmanagement.org.au
- painhealth.csse.uwa.edu.au



Painaustralia is a national not-for-profit body established to improve the treatment and management of pain in Australia. It was formed in 2011 to facilitate implementation of the National Pain Strategy.

For more information, visit: www.painaustralia.org.au