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MBS Review will Consider Medicare Items for Pain Management

Chairman of the MBS Review Taskforce, Professor Bruce Robinson has advised Painaustralia a clinical committee will be formed later this year to consider Medicare item numbers for pain management.

Speaking at Painaustralia's fifth Annual General Meeting in April, Professor Robinson said the review would consider proposals put forward by Painaustralia for item numbers for a multidisciplinary Chronic Pain Care Plan and for GP, Specialist and allied health consultations specific to chronic pain.

"The current chronic disease care plan which allows for just five allied health consultations is inadequate to effectively manage the complex needs of people with chronic pain," said Painaustralia CEO Lesley Brydon.

"Most patients require additional support including psychology, so we are advocating for an extended care plan which allows for up to 15 allied health consultations."

"It is envisaged that item numbers would be accessible to health professionals who have appropriate training in pain management."

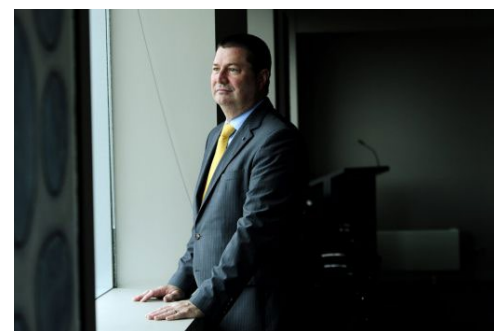
Painaustralia Chairman Robert Regan hosted the meeting, where Lesley Brydon presented a summary of progress made to implement the National Pain Strategy since the National Pain summit in 2010.



Health Care Home Offers Promise but Proof will be in the Rollout

People with chronic pain will have an opportunity to participate in trials of the Health Care Home – a new model for managing patients with chronic and complex conditions to be rolled out through seven Primary Health Networks next year.

Speaking at the Federal Government's budget briefing, Secretary of the Department of Health Martin Bowles said eligible patients will be able to enrol with a preferred clinician, usually a GP, and a tailored care plan will be developed to provide ongoing coordination, management and support of their conditions.



Martin Bowles PSM

Instead of a fee for service, payment will be made by way of quarterly bundled Medicare payments, which will provide clinicians with the flexibility to accommodate regional differences and individual patient needs.

The government has allocated \$21 million to evaluate the trial which will involve up to 200 Health Care Homes and up to 65,000 people with chronic and complex conditions.

Painaustralia will monitor and report on developments in the coming months and will encourage eligible participants to enrol in the trials.

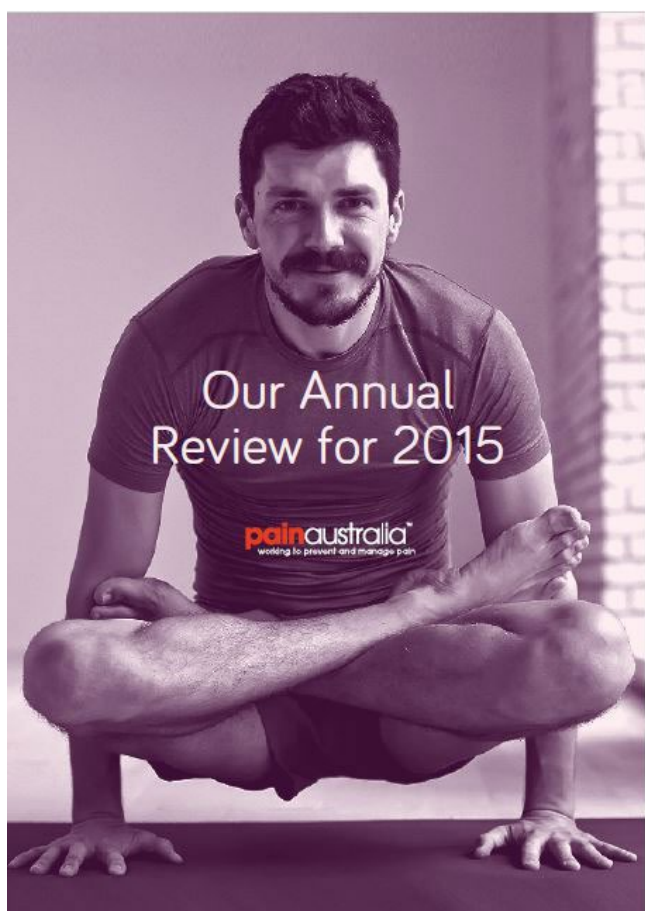
Annual Review Highlights Progress

Painaustralia's Annual Review 2015 highlights the progress made over the past year, including developments in service innovation, improved clinical practice, consumer education and ongoing learning opportunities for health care professionals.

A great deal of pioneering work has been done by individuals and organisations, and we thank all of our members and supporters for their ongoing commitment.

Together, we can do more for people in pain, as well as the community, government and industry.

[Download](#) your copy of our Annual Review 2015 today.



Support Us

Your donation will help Painaustralia continue to advocate for better healthcare for Australians who live with chronic pain. Your support could make all the difference.



DONATE NOW

Queensland Government Commits \$220,000 to Community-based Pain Support

The Queensland Government has announced a grant of \$220,000 over four years to the [Australian Pain Management Association](#) (APMA), for a range of advocacy and support services.

This is the first instance of government funding for a community-based organisation supporting people with persistent pain in Australia.

APMA CEO Elizabeth Carrigan, also a member of the Painaustralia board, says the grant not only recognises the work of APMA, but also validates the needs of people living with persistent pain.

"More than 500,000 Queenslanders live with unrelenting pain, and many of them struggle to find the support they need," said Ms Carrigan, who has lived with chronic back pain for almost 10 years.

"APMA helps them navigate the health system, provides up-to-date information, and offers face-to-face support.



Elizabeth Carrigan; Health Minister, Hon Cameron Dick; Deputy Premier, Hon Jackie Trad; Joe Kelly MP

The grant will provide training and resources to support the Pain Link helpline service—Australia's only dedicated phone service for people affected by pain—as well as the network of APMA Pain Support Groups.

"We are very grateful to the Queensland Government, particularly Deputy Premier Jackie Trad, Health Minister Cameron Dick and Member for Greenslopes Joe Kelly for their support," said Ms Carrigan.

GPs Welcome Quicksteps Pain Management Resource

GPs have welcomed Quicksteps, the new online decision-making tool developed by the NSW Agency for Clinical Innovation Pain Network, that will help them better manage chronic pain in their patients.

Designed to be quick and easy to use, the tool enables GPs to assess patients and develop a plan in eight steps, simply by moving through a set of questions and answers.

Depending on the answers provided, the tool will point the GP to specific pages on the ACI Pain Network website, which the GP can discuss during the consultation, and print out for the patient to take home.

The end result is a GP-led pain management plan, with a focus on holistic patient-centred and interdisciplinary care.

Sydney GP Dr Hester Wilson says the resource is already proving to be a help in her day-to-day practice.

“Quicksteps is very intuitive and easy to use and offers links to patient-specific information, which the patient can keep,” she said.

“The plan it develops is fabulous, because it takes into account all the issues around chronic pain, and is a really helpful guide for the GP.”

The tool is accessible from the ACI Pain Management Network website [here](#).

\$29.5m Real-Time Prescription Monitoring for Victoria

The Victorian Government is set to implement real-time monitoring of high-risk prescription drugs providing \$29.5 million in the 2016-17 Victorian Budget.

The funding will enable the roll out of monitoring software and provide additional counselling and addiction treatment services.

As well as training and support for doctors and pharmacists, the system will allow on-the-spot checks before prescribing or dispensing medicines that are at high risk of misuse.

Schedule 8 medicines such as morphine and oxycodone will be included as a minimum, and the government will consult with medical and pharmacy groups on the potential inclusion of other high-risk medicines.

Currently, more Victorians die each year from prescription drug overdoses than in road accidents, with 330 prescription drug overdose deaths compared with 252 road accident deaths in 2015.

Between 2009 and 2015 pharmaceutical drugs contributed to about 80 percent of all overdose deaths, with benzodiazepines such as Valium and Xanax, the most common group of drugs implicated.

“We welcome this move by the Victorian Government to address the issue of drug misuse and addiction,” said PainAustralia CEO Lesley Brydon.

“However without a national monitoring scheme its capacity to reduce harm is limited.”

The RACGP has renewed its call for an effective national monitoring system, with President Dr Frank R Jones saying the Andrews Government initiative should be replicated across Australia.

New Guide Will Help to Prevent Chronic Post-Surgical Pain

About one in 10 people who have major surgery go on to develop chronic pain—but there are ways to reduce the risk.

Launched at the annual scientific meeting of the Australian and New Zealand College of Anaesthetists (ANZCA), a new guide to managing acute pain will give medical professionals the insights they need, to minimise the chances of ongoing pain following surgery.

Acute Pain Management: Scientific Evidence is the fourth edition of the guide, summarising evidence currently available from more than 8,000 references.

Editor Professor Stephan Schug says it will be of particular help to medical professionals who are still unaware of the potential for acute pain to become chronic, offering lots of useful advice.

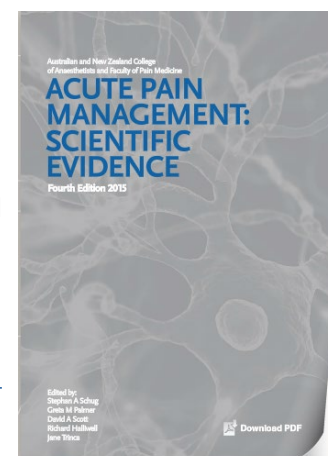
“In the past, we under-estimated how many people had chronic pain after surgery, and a lot of medical professionals are still unaware of the problem,” he said.

Among recent research findings, there is evidence that multi-modal analgesia after surgery helps reduce complications and improve outcomes; and in some cases, regional nerve blocks are better at preventing the development of chronic pain than general anaesthesia and conventional pain relief.

The book also identifies risk factors for the development of chronic pain, which include the existence of serious pain before surgery and a correlation with younger adults, females, and people who are anxious or depressed.

The guide sets the international standard in acute pain medicine and is endorsed by medical organisations around the world.

For more information, [read the story in the MJA](#). You can also download the guide [here](#).



MedsASSIST Codeine System Rolls Out

The Pharmacy Guild of Australia has commenced the national rollout of MedsASSIST, a new real-time recording and monitoring system for medicines containing codeine.

MedsASSIST was developed in response to concerns over patient safety relating to medicines containing codeine, and as an effective alternative to making them prescription-only.

A clinical decision support system, it is designed to help pharmacists identify consumers who are at risk of codeine dependence, and facilitate access to suitable referral pathways to help patients better manage their pain.



The Pharmacy Guild of Australia

MedsASSIST is the new real-time recording and monitoring system for medicines containing codeine.

- Supports patient safety and improves clinical outcomes.
- Assists pharmacists in identifying patients who are at risk of codeine dependence.
- Focuses on patient care and pain management.
- Facilitates access to suitable referral pathways to enhance health outcomes.

MedsASSIST - Informing Medicine Decisions

MedsASSIST IS IN USE ACROSS AUSTRALIA.

Delivered to all pharmacies in April, the Guild is urging all pharmacies across Australia to implement the monitoring system.

George Tambassis, the National President of the Guild said, "So far, the real-time system is demonstrating its effectiveness at reducing harm by identifying patients who may be at risk of developing dependency. It is also demonstrating that the overwhelming majority of consumers are using these products safely.

"We have consistently argued that re-scheduling codeine products to make them prescription-only will not address issues of misuse and abuse, and will increase Government expenditure on Medicare and the Pharmaceutical Benefits Scheme. In addition to real time recording, we have proposed new warning labels, smaller pack sizes and ongoing education for consumers and pharmacists as more effective means to address misuse."

Panadol Osteo to Remain Delisted

The Pharmaceutical Benefit Advisory Committee (PBAC) has restated its decision to delist Panadol Osteo from the PBS. The PBAC says it assessed the issues raised by stakeholders including the Pharmacy Guild and Painaustralia, but did not consider there was any basis to rerevisit earlier recommendations.

"The decision will be disappointing for many people who regularly rely on Panadol Osteo as the first line treatment for osteoarthritis," says Painaustralia CEO Lesley Brydon.

"It is generally regarded as the least harmful option, and it is quite likely that patients, especially those on a concession, will ask their doctor for alternative PBS subsidised medication to help manage their pain, including low dose opioids."

An analysis by the Guild last year reported that on the PBS, two packs of Panadol Osteo for a patient with a concession card was \$7.52 a month, which equated to \$90.24 a year and less if the patient reached their Safety Net during the year.

Following the delisting the price increased to \$14 a month, or \$168 a year, and it no longer contributes to Safety Net eligibility.

The PBS says the active ingredient in Panadol Osteo can also be found in the immediate release form of paracetamol, which can be purchased more cheaply.

However, it is the more convenient, sustained release formulation that made Panadol Osteo a drug of choice for many people with osteoarthritis.

Help Change Lives: Become a Member of Painaustralia

Chronic pain is not just an older person's disease. It can affect anyone, including children and adolescents.

As Painaustralia enters our sixth year, we are committed to improving the lives of millions of Australians who live with chronic pain, and their families.

While advocating for the National Pain Strategy to be implemented across Australia, we are working to influence policy makers and raise community awareness.

A key focus this year will be working with the MBS Review Taskforce which will consider new Medicare Items for pain management.

Our goal is to achieve recognition of chronic pain as a national health priority, with the funding it deserves.

[Help us change lives, by becoming a member.](#)

New Possibilities for Delivery of Pain Management Programs

CEO and Co-Founder of Prima Health Solutions, Luke Lawler has a vision for better preventative health care in Australia, where evidence-based pain management programs can be accessed from the comfort of people's homes.

This approach is being demonstrated in the company's Healthy Weight for Life program—a unique weight-loss and exercise program remotely delivered to thousands across rural, regional and metropolitan Australia and tailor-made for people with osteoarthritis. The program can be referred by GPs for eligible osteoarthritis patients, or self-referred by individuals through their private health insurer.



Unlike static programs, Healthy Weight for Life is continuously being updated with new information from published research, and offers clinical support over-the-phone and online, to keep participants on-track.

A study, soon to be published in *Arthritis Care & Research*, showed a significant relationship between weight loss and symptomatic improvement (function and pain) in people with knee osteoarthritis, when adhering to Healthy Weight for Life.

"We have been working for more than 10 years in research and development, with leading Australian and international medical and physiotherapy professionals, formulating a program of preventative health care for weight-related chronic conditions," Mr Lawler told Painaustralia.

"This has led to a set of systems, processes and methodologies to ensure the consumer gets to apply the latest evidence-based research to their personal situation.

"In the past it has taken years for research findings to trickle down to clinical practice and behavioural change, so we have a huge win for health care."

Prima Health Solutions is contracted to provide the program for BUPA, Medibank, HCF and nib, along with several smaller private health insurers.

According to Bupa, members with knee or hip pain who are waiting for orthopaedic procedures have found support through the Healthy Weight For Life program.

Those who are not eligible for the full program may

still be eligible for the Healthy Weight For Life home pain management education and exercise kit, designed for people with knee and hip pain.

Find out more about Healthy Weight for Life at www.healthyweightforlife.com.au

Painaustralia Buoyed by Member Survey

Our recent Member and Stakeholder Survey strongly supported Painaustralia's role as the national coordinating body and information hub for the pain community spanning consumers, health professionals, research and academic communities and a key point of contact for government and media.

More than 70 respondents stressed the need for Painaustralia to focus on advocacy for people with pain, awareness raising in the community, and influencing policy makers.

Facilitating education and training for health professionals, advising business and industry, and collaborating with researchers is also seen as important.

While people living with pain are seen to benefit most from our work, the majority also thought health professionals, healthcare service providers, government policy makers, employers and industry, as well as the community at large, benefit significantly or somewhat.

In terms of future objectives, there was an overwhelming call for the Federal Government to recognise chronic pain as a national health priority, with commitment and funding from all jurisdictions.

Improved primary care pain services were also seen as a priority—and underpinning this—changes to Medicare to shift funding priorities to evidence-based, multidisciplinary strategies.

"While there is clearly a great deal of goodwill towards Painaustralia, this has not yet yielded the funding needed to enable us to deliver on these high expectations," said Painaustralia Chairman Robert Regan.

"The over-riding priority for the future will be to secure sustainable funding and an effective succession plan which allows us to continue our work."

Download the [survey](#).

PAINAUSTRALIA
MEMBER AND STAKEHOLDER
SURVEY 2016

painaustralia
A NATIONAL HEALTH ORGANISATION

Michael Clarke Campaigns for Pain

A recent media campaign involving former Australian Cricket Captain Michael Clarke as National Pain Ambassador, generated a great deal of media interest, and awareness of chronic pain.

With his high profile, Michael's story of living with chronic pain—and playing world-class cricket despite it—was picked up by key media, including Channel 10's [The Project](#), Channel 7's Sunrise, 2UE Sydney, 702 ABC Sydney, NOVA 100.3, The Australian, Herald Sun and [The Huffington Post Australia](#). It also appeared on New Zealand and UK online news sites.



Michael has lived with back pain due to disc degeneration since the age of 17, and also now has chronic neuropathic pain.

At times the pain was so severe, like so many others with chronic pain, he considered an early retirement.

Michael talked about how he came to terms with his pain and learned the skills necessary to defy the pain, with his passion and ability to play cricket undiminished.

The campaign was supported by PainAustralia, the Australian Pain Management Association and Chronic Pain Australia, and sponsored by Pfizer.

ePPOC Recruiting

Applications are invited for the position of ePPOC Program Implementation Coordinator, a two-year appointment.

The primary role of the position is to provide ongoing support to participating pain management services, and assist them to use ePPOC data to improve outcomes and services.

The successful candidate should have a health-related background, with skills in communication, data collection and interpretation, research and quality improvement.

Applications close 15 May. To find out more or to apply, [click here](#).

Spotlight on GAIN Chronic Pelvic Pain Support Group

"I recently had a call from a mother with newborn triplets ready to jump off a bridge due to pelvic pain.

"Her gynaecologist told her she probably pulled a muscle and her GP had never heard of her condition."

This is one of the many experiences of Vanessa Watson and Catherine Aurubind, co-founders of the Gynaecological Awareness Information Network (GAIN) Chronic Pelvic Pain Support Group.

Providing help Australia-wide on a voluntary basis and free-of-charge, they say pelvic pain is one of the most excruciating forms of pain, but there is not enough awareness of it in the community or in the doctor's clinic.

The aim of the group is to direct people to the right practitioners to get the help they need, via phone and email, or through their support group, held bi-monthly in Perth.

Both Vanessa and Catherine lived with severe symptoms of pudendal neuralgia (pudendal nerve entrapment) for seven years before diagnosis.

"Even with my training as gynaecological nurse, I was unaware of the condition, and found it difficult to find a practitioner who would take my case seriously," said Vanessa (pictured, left).

"We aim to help people in the initial stages of their condition, while there is still time to prevent permanent nerve sensitisation and long-term pain."

Every week Vanessa speaks to both men and women from around Australia about their pain, and every week she hears the same stories.

"They say they can't sit down, they can't have sex, and they have no answers from their doctors," she said.

"We need to get physicians to understand that pelvic pain is not rare, it is just under-diagnosed."

For upcoming meetings, visit the [GAIN events page](#), or for anyone needing support urgently, they can contact Vanessa Watson 0437 498 917.



Everyday Hero

Innovate Pain Management Service Director and Health Psychologist Dr Mike Shelley, has proven his commitment to helping others goes beyond the clinic.

Recently back at work after completing Pollie Pedal 2016, to raise money for Carers Australia, he says it was well worth it.

"It was a great honour to be invited to ride in the event, alongside my brother Graeme," he said.

"But even more rewarding was knowing that the ride would make a difference to people's lives.

"We work hard at Innovate every day to improve the health and wellbeing of our community, and to go the extra mile was a wonderful opportunity."



Pollie Pedal is an annual charity bike ride which has raised more than \$4.5 million for important causes over the past 19 years.

Although this year's ride is over, Mike is still collecting money for Carers Australia. If you would like to donate, please visit email Mike to find out how.

Volunteers Needed for Migraine Treatment Trial

A new trial being conducted by the University of Notre Dame is calling for volunteers to assess the effectiveness of an antioxidant vitamin therapy on migraine.

Participants will receive a combination of N-acetylcysteine 600mg, Vitamin E 250 IU and Vitamin C 500mg (NEC), taken twice a day for 12 weeks.

It is thought antioxidants may lessen brain inflammation and in turn reduce the number and severity of migraines. This vitamin-based therapy has never been studied before and, if effective, may play an important role in migraine prevention.

Participants must be aged 18-65, with migraine onset before the age of 50, and 2-8 migraine episodes per month for at least the past 12 months.

They must take less than two migraine prevention

drugs and be able to distinguish between migraine and other headache types.

Volunteers can live anywhere in Australia, as long as they have access to a reliable Skype connection.

For more information or to apply for the trial, email Mr Eamon McDonnell/Professor Eric Visser ndvitmigraine@gmail.com

Yoga for Pain Practitioner Training Going Strong

Demand for the Yoga for Pain Practitioner Training has been so strong since the pilot was held in Melbourne last year, it is now being delivered on a regular basis by Perth-based Finding Yoga.

The 2.5-day foundations training teaches health practitioners how yoga can assist with the physical and psychosocial effects of pain, so that patients can experience less pain and live more meaningful lives.

Designed for yoga teachers as well as GPs and allied health professionals, it teaches the latest understanding about pain and how yoga can be a safe and effective part of a holistic pain management program.

Yoga for Pain founder and Yogic Educator Rachael West says previous program participants are now using yoga techniques in consultations, or referring patients to pain-specific yoga classes.

For Occupational Therapist and Yoga Teacher Tessa Heine, the course was a way to integrate the link between managing the impact of chronic pain through occupational therapy, and working on the nervous system using yoga techniques.

She has now developed a pain-specific six-week yoga program, which she will be promoting to local GP clinics and allied health practitioners.

"A lot of patients benefit from understanding more about the nervous system and neurophysiology of pain, so when they apply the breathing, relaxation and movement techniques, it makes more sense," she said.



To find out more about Yoga for Pain Practitioner Training and upcoming courses, visit www.yogaforpaincare.com

EVENTS



[PMRI Visiting Scholars Program](#)

The PMRI Visiting Scholars Program is a free monthly event providing an opportunity to hear from national and international experts in the field of pain. When: [Visit website](#) for 2016 dates, 4-5pm
Venue: Auditorium, Kolling Building, Royal North Shore Hospital, Sydney



[Societal Impact of Pain Annual Symposium](#)

This year's SIP conference will address themes including: pain as a quality indicator for health care; pain as a disease or multi-morbidity; the relevance of pain in cancer care and rehabilitation; and rehabilitation and reintegration of workers with pain. Participation is free however spaces are limited. When: 23-24 May 2016
Where: Brussels, Belgium
More information: www.sip-platform.eu/events/sip-2016/program.html



[Treatment Adherence Symposium](#)

At this inaugural symposium, healthcare practitioners and clinicians will better understand their role in patient adherence and learn how to improve patient outcomes. When: 1 July 2016
Where: Pain Management Research Institute, Sydney



[Putting Cognitive Behavioural Therapy Skills into Practice](#)

Online training webinar series run by the Pain Management Research Institute (PMRI), this is an excellent professional development opportunity for health professionals to enhance their skills to help patients manage chronic pain. Each program consists of six webinar sessions of 90 minutes duration conducted over a 2-3 month timeframe, and will explore specific strategies with an experienced facilitator. When: 16 August to 11 October
Where: online

AUSTRALIAN
PHYSIOTHERAPY
ASSOCIATION



[The Australian Physiotherapy Association's 2016 Business and Leadership Conference](#)

The 2016 Conference Program Committee is putting together a dynamic program to explore the theme of Driving Innovation. Three themes will make up the program—Engage, Lead, Act—and will showcase keynote speakers, invited speakers and abstract submissions. When: 26 August 2016
Where: Darwin



[Pain Management in Practice](#)

Pain Management in Practice is a two-day interdisciplinary workshop to provide practical training to clinicians who manage clients with persistent pain, to help them achieve their full potential. When: Melbourne 12&13 May and 8&9 September; Brisbane 16&17 June and 27&28 October; Sydney 21 & 22 July and 17&18 November
More information: www.empowerehab.com/workshops/

For more events please see our website www.painaustralia.org.au