



# 2016 SUMMIT

---

## ON Balanced Pain Management



ALLIANCE FOR  
Balanced Pain  
Management





# Overview

**On December 6, 2016, the Alliance for Balanced Pain Management convened its third annual Summit on Balanced Pain Management.** The summit's attendees and presenters included patients, advocates, health care providers, industry representatives and government officials.

Through panel discussions, featured speakers and on-stage interviews, the summit highlighted the benefits of balanced pain management and the barriers that prevent patients from accessing personalized and multimodal pain care. Participants and attendees also explored the role of balanced pain management in national efforts to reduce opioid abuse.

Summit programming concluded with the presentation of a Blueprint for Balanced Pain Management, which identifies next steps for summit participants to increase awareness and access to balanced pain management.

## What is Balanced Pain Management?

A comprehensive approach to diagnosing, treating and managing pain, which gives people access to the full range of effective treatment strategies.

It encompasses ***multimodal analgesia*** for acute pain and ***integrated care*** for chronic pain.

# DISCUSSION ON The National Pain Strategy

In “A Conversation with the National Institutes of Health,” **David Thomas, PhD**, and **Linda Porter, PhD**, explored the vision of the National Pain Strategy. The document outlines steps toward realizing a much-needed cultural shift in pain treatment. It reflects the input of six federal agencies and 80 experts from across the medical, advocacy, patient and scientific communities. Among its six key areas is the need for access to multidisciplinary care.



Dr. Thomas remarked on how little training most physicians receive about treating pain – typically nine hours out of their four years in medical school. As a result, many patients are receiving opioids who would benefit from a different approach.

***“Opioids are not a replacement for comprehensive pain treatment.”***

***David Thomas, PhD***

In a separate presentation, **Thomas Novotny, MD**, outlined the Department of Health and Human Services’ Healthy People 2020 targets for implementing the National Pain Strategy. The goal, he explained, is “balancing access to pain treatment with reducing health harms from inappropriate opioid use.”

# DISCUSSION ON Balanced Pain Management in Practice

The summit's "Balanced Pain Management in Practice" panel conveyed the value of patient education and access.



**Penney Cowan** of the *American Chronic Pain Association* noted that patients should be told to always expect some element of pain. Her message to physicians and patients alike:

"Talk about balanced pain management every chance you get."



**Sara Bertoch** of the *Brooks Rehabilitation Hospital* described the impressive outcomes she's seen in facilities that use balanced pain management. One five-week program requires at

least three hours of physical therapy a day, along with occupational therapy, weekly physician oversight and psychological counseling.



**Vern Saboe** of the *Oregon Chiropractic Association* described how insurance coverage for integrated pain treatment benefits patients and enhances communication among

members of a health care team.

But access to such treatments is complicated.

**Bob Twillman, PhD**, of the *Academy of Integrative Pain Management* elaborated on coverage challenges in his summit address, including:

- Lack of trained anesthesiologists and staff who care for patients after surgery
- Restrictive formularies that block access to medications due to cost
- Other utilization management techniques such as cost sharing, prior authorization, step therapy and coverage limitations.



Cutting through these barriers is crucial, Dr. Twillman explained, as **a balanced approach can "speed recovery, shorten hospital stays, reduce opioid use, and reduce complications" for patients.**



# DISCUSSION ON Overcoming Prescription Drug Abuse & Addiction

The summit also explored the needs of patients struggling with prescription opioid abuse and addiction. **Rep. Larry Bucshon, MD, (R-Ind.)**, a former heart surgeon who now serves on the Energy & Commerce Committee's Health Subcommittee, noted the progress made by Congress with the recent passage of the Comprehensive Addiction and Recovery Act. He described it as "a start" in addressing the nation's pressing opioid addiction problem. He also echoed earlier speakers' emphasis on the need for more formal training for physicians on how to treat pain.



**The event's keynote speaker, former NFL quarterback Ryan Leaf**, put a personal face to the issue of pain treatment and abuse.

Ryan was one of the most promising collegiate football players of his time, ultimately selected second by the San Diego Chargers as their franchise quarterback. But 10 months after his retirement from the NFL, Leaf began to abuse prescription opioids. For the next nine years Leaf fought for sobriety through periods of depression and addiction, including a 32-month stint in prison in 2012.

His time in prison became a turning point in his life. Today, Ryan Leaf is a voice for the recovery community.

At the summit, Ryan praised the work of the Alliance for Balanced Pain Management in trying to ensure safe, personalized options for patients and emphasized the need for young athletes to ask for help. "I don't want people who are going through what I did to feel as miserable as I did," he explained.



## DISCUSSION ON **Safe Use & Disposal**

Education efforts must also extend to the safe use and disposal of prescription drugs, the “Patient Safety, Abuse Deterrence and Safe Disposal” panel explained.



**Shaina Smith** of the *U.S. Pain Foundation* emphasized the need for more communication and education on issues such as the interaction and safe use of over-the-counter medications.



**Judi Lund Person** of the *National Hospice and Palliative Care Organization* addressed the need for safe use among patients at end of life, where issues like addiction and abuse are less pertinent.



**Daniel Cohen** of the *Abuse Deterrent Coalition* noted the need for better education on the role of abuse-deterrent opioid formulations, which resist crushing or dissolving for recreational use. “They’re not for addicts; they’re not for patients,” he explained, “What they do is serve the public health benefit.”



**Lisa McElhaney** of the *National Association of Drug Diversion Investigators* outlined the value of prescription drug monitoring programs for informing prescriber’s decisions and providing records of patients’ treatment over time. But, the “ultimate decision is up to the prescriber,” she noted.

## NEXT STEPS

# Blueprint for Balanced Pain Management

The alliance's Blueprint for Balanced Pain Management, introduced at the summit, uses the process of constructing a home as a metaphor for the steps necessary to remove barriers to integrated pain care access.

- Advocates must lay the foundation by defining balanced pain management, then frame the issue around optimizing patient care and preventively addressing addiction while still providing pain relief.
- This blueprint contains an “open floorplan” that broadly defines the pain community and encourages openly exchanging information, freely sharing best practices, and reaching consensus on a new standard of care.
- To “raise the roof,” advocates must promote comprehensive national policy strategies and engage policymakers at the federal, state and health plan levels.

But first, advocates must lay the cornerstone by asking: **What is my organization doing to advance balanced pain management in 2017?**

## 17 IDEAS for furthering balanced pain management in 2017

1. **Join** the Alliance for Balanced Pain Management
2. **Highlight** balanced pain management during National Pain Awareness Month
3. **Publish** an infographic about balanced pain management
4. **Add** balanced pain management to the agenda at your annual meeting
5. **Write** a letter in support of abuse-deterrent formulations access legislation
6. **Promote** safe disposal programs in your newsletter
7. **Adopt** guidelines that incorporate balanced pain management
8. **Feature** information about balanced pain management on your website
9. **“Like”** balanced pain management stories and comments on Facebook
10. **Publish** a position statement on favoring balanced pain management
11. **Promote** National Prescription Drug Take-Back Day
12. **Develop** a balanced pain management webinar for your membership
13. **Share** a YouTube video on balanced pain management
14. **Draft** an op-ed promoting balanced pain management
15. **Start** an online petition calling for access to balanced pain management
16. **Host** a meeting with policymakers about balanced pain management
17. **Plan to attend #SummitBPM2017 and bring a colleague.**



ALLIANCE FOR

# Balanced Pain Management



[AllianceBPM.org](http://AllianceBPM.org)



[facebook.com/Alliance-for-Balanced-Pain-Management](https://facebook.com/Alliance-for-Balanced-Pain-Management)



[@afbpm](https://twitter.com/afbpm)