



SIP MEETING 25TH OCT 2018

Portugal

Prevalence of Chronic pain -Portugal



RESEARCH
EDUCATION
TREATMENT
ADVOCACY



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Epidemiology of Chronic Pain: A Population-Based Nationwide Study on Its Prevalence, Characteristics and Associated Disability in Portugal

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Prevalence of Chronic Pain -Portugal

Cross - sectional study characterizing the prevalence of chronic pain in primary health care units in Portugal

60 primary health care units from the 5 Regional Health Administrations (RHA) of continental Portugal – 600 patients

INTERIM RESULTS:

Patients population more frequent in primary care.

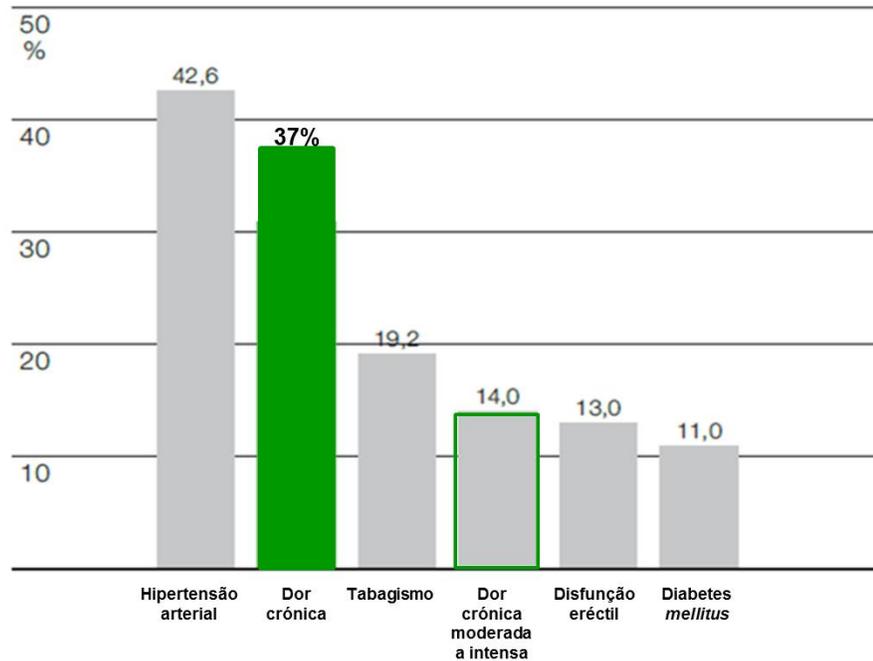
**Large number of follow-up visits - Significant resource consumption;
Significant time between onset of symptoms and diagnosis of Chronic Pain;**

**Poor control of Pain is the main difficulty pointed out by the doctors;
Patients' overall quality of life significantly low.**

Timelines

- Beginning of the project: Q1 2017
- Submissions: March/April 2017
- FPI (First Patient In): Sep 2017
- LPO (Last Patient Out): Oct 2018
- Statistical Output (draft): Dec 2018
- Final Report: Jan 2019
- Original Article: Jan 2019

Prevalence of Chronic pain and other diseases



* Dados recolhidos em apresentação pública do estudo "Dor Crónica – Portugal – Estudo de Prevalência e Impacto Individual, Social e Económico", da Faculdade de medicina da Universidade do Porto – Março 2011

Economical Burden

2,7%
PIB

Eur J Health Econ
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ORIGINAL PAPER

The economic impact of chronic pain: a nationwide population-based cost-of-illness study in Portugal

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Azevedo L *et al.* Eur J Health Econ. 2014

L.F. Azevedo et al.

Table 2 Estimates of annualised direct, indirect, and total costs (in euros, €) associated with chronic pain ($n = 562$) and extrapolation for the Portuguese population (in million euros)

Costs of chronic pain	P25	Median	P75	Mean (SD) ^a (bootstrap 95 % CI) ^b	Total annualised costs for the Portuguese population (in million €) (95 % CI) ^c	Percentage of total costs (%)
Direct costs annualised						
Pain medicines	€19.36	€77.48	€247.86	€196.67 (299.17) (173.00–225.70)	€481.59 million [423.63–552.68]	10.4
Non-pharmacologic treatment modalities	€0.00	€0.00	€616.80	€229.21 (324.35) (202.80–257.30)	€561.28 million (496.60–630.06)	12.2
Medical consultations (family physician, private, hospital, pain clinic, etc.)	€62.00	€124.00	€286.00	€219.44 (338.06) (197.40–257.80)	€537.36 million (483.38–631.28)	11.7
Other health professionals (nurse, physiotherapist, psychologist, etc.) ^d	€0.00	€0.00	€0.00	€127.44 (533.78) (93.50–192.60)	€312.07 million (228.96–471.62)	6.8
Medical tests	€0.00	€24.00	€100.20	€76.26 (124.51) (66.32–87.97)	€186.73 million (162.40–215.41)	4.0
Total direct costs annualised	€249.81	€646.16	€1,110.84	€807.37 (892.18) (744.50–894.60)	€1,977.04 million (1,823.08–2,190.63)	42.7
Indirect costs annualised						
Work absenteeism ^d	€0.00	€0.00	€0.00	€144.01 (1,273.08) (67.50–309.30)	€352.65 million (165.29–757.39)	7.6
Job loss ^d	€0.00	€0.00	€0.00	€223.95 (1,547.11) (100.70–362.40)	€548.39 million (246.59–887.42)	11.9
Early retirement ^d	€0.00	€0.00	€0.00	€712.56 (2,695.75) (483.20–926.10)	€1,744.87 million (1,183.22–2,267.76)	37.8
Total indirect costs annualised^d	€0.00	€0.00	€0.00	€1,080.52 (3,269.76) (820.00–1,367.00)	€2,645.90 million (2,007.95–3,347.41)	57.3
Total costs annualised						
Total CP costs annualised (direct + indirect costs)	€288.78	€731.92	€1,328.48	€1,883.30 (3,479.05) (1,605.00–2,190.00)	€4,611.69 million (3,930.20–5,362.71)	100

WHAT HAPPENED SO FAR IN PORTUGAL

Two meetings in 2018 attracted nearly 30 participants

Meeting with members of Association for the Study of Pain in PT (APED) - June

- To discuss how to build a national SIP platform in Portugal
- There is already a solid body of evidence that can be built upon



Meeting with patient groups, July

- To build a group of patient reps involved in the pain area
- To become part of the SIP platform



Conclusions

- General agreement on the need to have the SIP platform in PT
- Two main priority areas identified:
 - Increase awareness of pain (more education and reduction of stigma)
 - Pain and Work (flexibility of work places and other)

NEXT STEPS

- Participants of both meetings asked to choose one of the two working groups
- Attend SIP platform meeting in Brussels (today) to learn about experiences from other countries
- A meeting bringing together everyone involved will take place in late 2018 in order to:
 - Confirm the groups mission and objectives
 - Discuss structure and leadership
 - Develop involvement strategy with policy makers and media
 - Identify available data and best practices to support the working group activities -> breakout groups: *pain at work* and *awareness on pain*

Overall objectives

- **Bring relevant stakeholders together and speak in one voice**
- **Create a sustainable platform through projects work**
- **Work towards building recognition among policy makers and media (one stop shop for pain in Portugal)**

