



Press Release for Dods Monitoring Parliamentary Magazine Piece prepared by Kathleen Grieve, Market Access Strategy Associate Director, Grünenthal UK Ltd

Summary of SIP 2014

Brussels, 18th November 2014. Better education on pain management and the need to foster European best practice sharing was discussed at the 5th Symposium on the Societal Impact of Pain (SIP), an international multi stakeholder platform aimed at raising awareness for the impact that pain has on our societies, health and economic systems. Pain therapy and palliative care were listed as a priority by the Italian Presidency of the EU Council and, for the first time ever, all EU ministers of health discussed this topic at the recent informal Health Council meeting in September. Delegates of the SIP symposium, endorsed by the Italian Ministry of Health, welcomed the EU health ministers' decision to create a European network for the training of healthcare professionals and the sharing of information and best practices¹. They discussed what measures are urgently required to ensure that pain therapy and palliative care remain priorities on the agenda of both the EU institutions and national governments. European countries should benefit from existing good practices to avoid inequalities in access to pain treatment and the Commission and member states should secure the necessary resources to ensure that such a network is put in place for the benefit of European patients, especially considering the needs of both the elderly and paediatric patients.

The CPPC perspective on SIP 2014

I asked Neil Betteridge, as both Vice Chair of the Chronic Pain Policy Coalition (CPPC) and as one of its patient representatives his thoughts on this year's SIP meeting.

The CPPC is the UK umbrella body for chronic pain. Its members are organisations with an interest in pain representing patients, primary and secondary care, the private and public sectors, and academic institutions. For several years it has provided secretarial support to the All Party Parliamentary Group on Chronic Pain in the UK Parliament.

On this year's SIP meeting, Neil Betteridge says: 'It was a privilege to participate on behalf of the CPPC in two of the four panel discussions. All of these sessions were lively, with active audience engagement where you could feel the positive energy in the room.'

There are very few opportunities for the diverse perspectives, which the Coalition represents in the UK, to come together via a European platform. It allowed us to identify common challenges, but also some of the common solutions. As Chair of the panels, Nick Ross, not only brought independent expertise of the highest level, he also kept everyone focused on outcomes and next steps. The whole event therefore was both stimulating and purposeful.'

'For example, I see one of the CPPC's main functions being to draw up an agenda for change which we can then use constructively in discussions with policymakers. To strengthen this further via a pan-European consensus can only help in these discussions. It means we come not just with challenges but with constructive and mandated recommendations for what can be done. Given that 1 in 5 people in the UK live with chronic pain it is essential we do this.'

Neil continued: 'Two specific issues stood out for me. The first was a strong desire to agree what best practice in supporting people with chronic pain would look like. It was agreed this should include not only access to the safest and most effective treatments – irrespective of where the person with pain might be living – but also non-pharmacological support such as structured self-management and psychological support where needed.'

He noted, 'As meeting hosts, the European pain federation (EFIC) welcomed the suggestion of a multi-stakeholder approach which might agree what these standards of care could look like, whilst recognising important variation at national level between health systems.'

This would help UK citizens with pain to feel more entitled to a high quality service (even if they moved countries in Europe); and would also be helpful to UK health professionals in terms of delivering care consistently no matter where they were working.

Alongside this, delegates also wanted to see further development of education modules on pain for trainee health professionals. Current provision is scant and, where it exists at all, differs widely between countries. This impacts on people living with pain in the UK because they will encounter a high proportion of health professionals at the community level who have not been even adequately trained in pain. It also means the profile of chronic pain is unnecessarily low within the medical community. We need more priority for pain services at the specialist level, to complement wider recognition of pain issues within primary and community care.'

Neil stated that: 'Since the SIP meeting, myself and Martin Johnson, the Royal College of General Practitioners' lead on chronic pain, have been elected as Co-chairs of the CPPC. This reflects the importance of patient representatives and health professionals working as a team.'

We each look forward to providing updates on these exciting developments to parliamentarians over the coming period. We remain grateful for the support of Lord Luce, Linda Riordan MP and the many other active supporters we have in both Houses.'

About SIP

The European, multi-stakeholder platform Societal Impact of Pain (SIP) was created in 2010 as a joint initiative of the European Pain Federation EFIC® and the pharmaceutical company Grünenthal GmbH. The aims are to:

- raise awareness of the relevance of the impact that pain has on our societies, health and economic systems;
- exchange information and share best-practices across all member states of the European Union;
- develop and foster European-wide policy strategies & activities for an improved pain care in Europe.

As a multi-stakeholder platform SIP provides opportunities for discussion for health care professionals, pain advocacy groups, politicians, insurance companies, representatives of health authorities, regulators and budget holders. The scientific framework of the SIP platform thereby is under the responsibility of EFIC[®]. Grünenthal is responsible for funding and non-financial support (e.g. logistical support). More information: <http://www.sip-platform.eu/>

About European Pain Federation EFIC[®]

The European Pain Federation EFIC[®] is a multidisciplinary professional organisation in the field of pain research and medicine, consisting of the 36 chapters of the International Association for the Study of Pain (IASP[®]), which are the IASP approved official National Pain Societies in each country. Established in 1993, EFIC's constituent chapters represent Pain Societies from 36 European countries and more than 20,000 physicians, basic researchers, nurses, physiotherapists, psychologists and other healthcare professionals across Europe, who are involved in pain management and pain research. More information: www.efic.org

About Grünenthal

The Grünenthal Group is an independent, family-owned, international research-based pharmaceutical company headquartered in Aachen, Germany. Building on its unique position in pain treatment, its objective is to become the most patient-centric company in the field of pain and thus to be a leader in therapy innovation. More information: www.grunenthal.com

References

¹ Summary of the conclusions of EU Health Ministers meeting in Milan, 23 September 2014: <http://italia2014.eu/en/news/post/conclusioni-informale-salute/>