

The Societal Impact of Pain Joint Statement Recommendations for Policy Action 27 August 2021

Preamble

In Europe¹, there are approximately 740 million people², most of whom experience an episode of severe pain at some point in their life. For approximately 20 percent, that pain is chronic – episodic, persistent, or variable. In other words, today there are 150 million people experiencing pain. That number is approximately equal to the populations of Germany and France combined.

Pain complaints cause a large proportion of physician visits (Gureje, Simon, & Von Korff, 2001), (Mäntyselkä, et al., 2001) (Koleva, 2005), placing a large burden on clinics and healthcare professionals to treat the increase number of patients in an appropriate manner. As a result, pain places an enormous economic burden to healthcare systems (Eccleston, Wells, & Morlion, 2017).

Furthermore, pain-related conditions result in an increasing part of the workforce retiring too early. With more than 500 million sick days per year in Europe, musculoskeletal pain causes almost 50 percent of all absences from work lasting at least three days in the EU and 60 percent of permanent work incapacity (Bevan, Reducing Temporary Work Absence Through Early Intervention: The case of MSDs in the EU, 2013). Unsurprisingly chronic pain is one of the major reasons why people exit the labour market prematurely and it contributes significantly to disability retirement (Saastamoinen, et al., 2012).

Societal Impact of Pain Thematic Network Framing Paper

The Societal Impact of Pain Thematic Network Framing Paper, which accompanies these Recommendations for Policy Action, was drafted by the Societal Impact of Pain (SIP)³, in partnership with stakeholders and members of the EU Health Policy Platform (a full list of contributing organisations is available at the end of the paper). Our goal is to achieve improved care and pain management across the EU to reduce the societal impact of the disease, which touches upon all aspects of life.

The Framing Paper presents the common position of these stakeholders and outlines existing policies and actions taken that are and can be relevant to pain, laying them out into four categories: **health indicators, research, employment, and education**. Furthermore, each category presents examples by civil society of projects and activities which are running in the EU to address the societal impact of pain.

Call to Action

The Recommendations for Policy Action highlights opportunities for action and collaboration by the European Commission, Member States, and civil society to reduce the societal impact of pain, based on the findings of the Framing Paper. Reflecting the Framing Paper, the Recommendations are divided into the same four categories: health indicators, research, employment, and education. Finally, in this Statement, we include also our own commitments to foster pain policies, based on the input of our community and the best practices included in our SIP Framing Paper.

¹ Note: data taking from 37 countries, absent in Andorra, Armenia, Azerbaijan, Belarus, Georgia, Iceland, Liechtenstein, Luxemburg, Malta, Monaco, and the Vatican City.

² Eccleston, C., Wells, C., & Morlion, B. (2017). European Pain Management. Oxford, UK: Oxford University Press, ISBN: 9780198785750

³ The "**Societal Impact of Pain**" (SIP) is a multi-stakeholder partnership led by the [European Pain Federation EFIC](#) and [Pain Alliance European \(PAE\)](#), which aims to raise awareness of pain and change pain policies. The scientific framework of the SIP platform is under the responsibility of the European Pain Federation EFIC and the strategic direction of the project is defined by both partners. The pharmaceutical company [Grünenthal GmbH](#) and [Pfizer](#) are the main sponsors of the Societal Impact of Pain (SIP) platform.

Recommendations for Policy Action

1. Pain as an indicator: *Develop instruments to assess the societal impact of pain (pain as a quality indicator)*

We ask to explore opportunities to build on existing instruments which are available to define, establish and/or use pain as an indicator in the assessment of healthcare systems' quality and thus contribute to assessing the societal impact of pain and build on existing initiatives and opportunities to fill the data gap on the societal impact of pain.

We call on the European Commission to:

- Work on addressing the gap in the European Core Healthcare Indicators project, leveraging the inclusion of chronic pain in the 11th Revision of the International Classification of Diseases (ICD-11) and promote implementation of ICD-11 at national level
- Assess the possibility to include work on a European Core Healthcare Indicator on Pain in existing projects such as the Joint Action on Health Information
- Together with the OECD, present pain as a key indicator of health and health systems and analyse the links between population health and labour market outcomes in *Health at a Glance: Europe 2020*
- To repeat and broaden the 2006 Health Eurobarometer which included musculoskeletal pain and consult civil society for survey expertise

We call on Member States to:

- Establish quality indicators to set criteria for granting access to cross-border healthcare and ensuring comprehensive electronic health records
- Ensure proper implementation of the ICD-11 so that data on chronic pain will be available to build European Core Healthcare Indicator on Pain
- Ensure the implementation Article 8.5 of the European Commission Directive on cross-border healthcare for pain patients

Our commitments:

- Healthcare professionals, patient groups and researchers working on pain contribute to the implementation of the new the WHO 11th revision of the International Classification of Diseases (ICD-11) that includes chronic pain as a separate entry
- Healthcare professionals and patients provide their expertise and perspective in the creation of patient- relevant indicators

2. Pain education: *Prioritise pain education for health care professionals, patients, policymakers, and the general public*

We call for the sharing of best practice, identifying gaps, and proposing recommendations to foster education of healthcare professionals as well as awareness raising and education of patients, policymakers, and the general public on pain, across Europe.

We call on the European Commission to:

- Support national governments in the coordination and sharing of best practice (e.g. patient and healthcare education programmes) and further expand on the existing DG SANTE's [Best Practice Portal](#) to foster information exchange and cross-fertilisation among European health systems on the societal impact of pain, with all relevant stakeholders
- Support awareness raising activities and information campaigns aimed at educating the wider stakeholder environment to address the societal impact of pain on a holistic level.
- Take into account in its work on health workforce planning (such as the Joint Action on Health Workforce Planning and Forecasting), whether Member States have access to the necessary education and training resources to establish the integrated models of care, and interdisciplinary teams required for the treatment of conditions such as chronic pain

We call on Member States to:

- Initiate patient education programmes and information campaigns in order to create public awareness of the short and long-term consequences of inadequate access to pain treatment for pain symptoms
- Promote wider access to pain education within healthcare professions, especially to all those involved with assessing and treating pain

Our commitments:

- Civil society, healthcare professionals and patient groups share best practices on pain education for patients, healthcare professionals, politicians and the broader community
- Civil society, healthcare professionals and patient groups continue working on their educational programs and projects targeted to these audiences

3. Pain in employment: *Initiate policies addressing the impact of pain on employment and include pain in relevant existing initiatives*

We ask for reasonable, flexible workplace adjustments by employers which can help individuals with chronic pain to stay in work or reintegrate into the workforce.

We call on the European Commission to:

- Work together with national authorities to promote policies that reflect the link between pain management/care and employment
- Support projects such as CHRODIS-Plus and its participating organisations for the inclusion of pain into all of its proposed training tools as well as the development of any policies and recommendations, as tasked under Work Group 8.
- Take into account the recommendations from the PATHWAYS project report when reviewing current strategies and broaden them to address the needs of patients with chronic diseases and mental health issues in relation to employment policies.

Our commitments:

- Civil society, healthcare professionals, patient groups and industry representatives share best practice on flexible work environment for people living with pain and data gathered through surveys on employment and chronic pain to contribute to evidence-based policy making

4. Pain research: *Increase investment in research on the societal impact of pain*

We ask to identify and analyse gaps in national and European funding for research (basic science, clinical, epidemiological) on the societal impact of pain and drafting recommendations on how future EU framework programmes can fill these gaps. Such analysis should take into account the propositions on pain research prioritisation from the civil society and scientific community.

We call on the European Commission to:

- Propose further investment in research (basic science, clinical, epidemiological) on the societal impact of pain as a priority in future EU framework programmes as well as in employment and health policy.
- Support the development of pain centres of excellence across Europe and encourage a network for these centres to provide for better understanding of pain and offer better pain management
- Include pain as a topic for its mission-oriented research and under its research and innovation programmes, such as *Horizon Europe*. These could include models for effective pain treatment within research programmes, the development of screening tools, e- and m-health platforms, behavioural research, systems-level research, cellular and molecular research, and the development of precision medicine. Given the holistic approach to the social impact of pain, representatives from social science should also be involved.

We call on Member States to allocate further investment in research (basic science, clinical, epidemiological) on the societal impact of pain as a priority in future EU framework programmes and make funds available through employment and health policy and research and innovation programmes.

Our commitments:

- Industry representatives, research institutions, healthcare professionals and patient groups build on the achievements of public private research partnerships such as Innovative Medicines Initiative (IMI) with the aim of translating them in real word applications.
- Patient groups and healthcare professionals foster the dissemination of research outcomes to their community and support a patient-led approach to research

ANNEX I

SIP lead on the development of this Framing Document and Joint Statement, in collaboration with various organisations and members of the EU Health Policy Platform. The list of signatories is presented below.

About SIP

*The 'Societal Impact of Pain' (SIP) platform is a multi-stakeholder partnership led by the [European Pain Federation EFIC](#) and [Pain Alliance Europe \(PAE\)](#), which aims to **raise awareness of pain and change pain policies**.*

The platform provides opportunities for discussion for health care professionals, pain advocacy groups, politicians, healthcare insurance providers, representatives of health authorities, regulators, and budget holders.

The scientific framework of the SIP platform is under the responsibility of EFIC and the strategic direction of the project is defined by both partners. The pharmaceutical companies [Grünenthal GmbH](#) and [Pfizer](#) are the main sponsors of the Societal Impact of Pain (SIP) platform.

SIP was originally created in 2009 as a joint initiative of EFIC and the pharmaceutical company Grünenthal GmbH. Prior to July 2020, the scientific framework of the SIP platform was under the responsibility of EFIC, with input from co-operation partners Pain Alliance Europe and the Active Citizenship Network. Funding and non-financial support was provided from Grünenthal GmbH. Since July 2020, SIP has been operating under the new multi-stakeholder partnership governance model led by EFIC and PAE, with Grünenthal GmbH and Pfizer as the main sponsors

List of Endorsers

