

**Societal benefit of  
multidisciplinary rehabilitation  
in chronic non-malignant pain  
patients.**

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**The Private Pain Clinic**

**Herlev, Denmark**

# The Private Pain Clinic

**Multidisciplinary primary-care clinic**

**Staff: 13**

**2 Primary care physicians (family medicine)**

**4 Psychologists**

**1 Social worker**

**1 Physiotherapist**

**2 Relaxation therapists**

**2 Nurses**

**1 Secretary**

# **The Private Pain Clinic**

**Agreement with the Danish health care system based on one month waiting-time guarantee for admittance.**

**Evaluation and treatment**

**400 new complex pain patients / year**

# The Private Pain Clinic

## Evaluation

### Individual treatments:

Pain medication

Psychological treatment

Physiotherapy and relaxation therapy

### Group treatments:

Pain school

Mindfulness based CBT

Rehabilitation Program

# **The Rehabilitation Program**

# Rehabilitation Program

**13 weeks \* 3 days/week \* 3 hours/day**

**10-12 participants**

**Group sessions and individual sessions**

**Sessions with spouses and children**

# **Inclusion criteria**

**Need to build 'a new life'**

**Potential of returning to a job..**

**Cannot return to prior job..**

**Unrealistic evaluation of  
own resources / own limitations..**

**Engage in personal development..**

**Work reflectively in a group..**

**Manage Danish language**

# **Exclusion criteria**

**Signs of serious anxiety or depression..**

**Beck Anxiety Inventory > 30**

**Beck Depression Inventory > 30**

**Unstable psychiatric disorders**

**Abuse**

**Unable / unwilling to engage in a group**



# **Themes**

**Anatomy / physiology**

**Physical training**

**Warm water training**

**Relaxation therapy**

**Pain medication**

**Psychological aspects of chronic pain**

**Reconsider 'rules of life'**

**Social legislation**

**Job training**

# Themes

**Adherence to the labour market is an essential part of pain treatment..**

**Working ability must be evaluated carefully to be long-lasting..**

# Staff

**Primary care physician**

***Psychologist***

**Physiotherapist**

**Relaxation therapist**

**Social worker**

# **Study population**

## **Demographic data**

**12 Rehabilitation Programs in 2007-2009**

**N=117**

**Females: 85 %**

**Age: 42 years (21 - 60)**

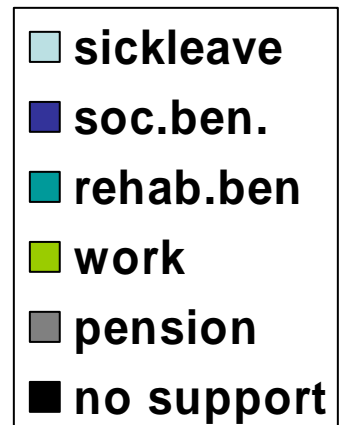
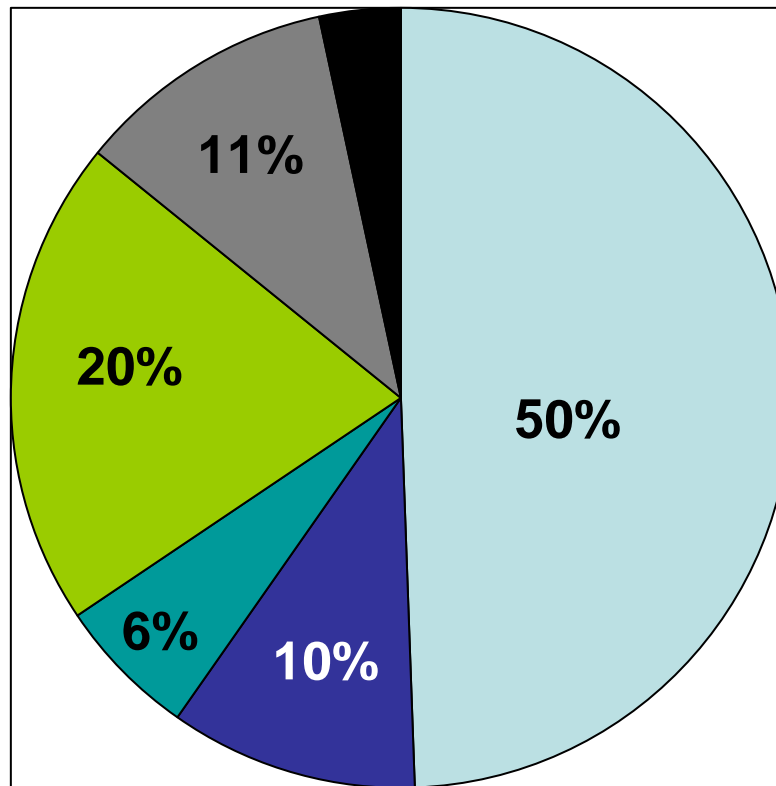
**Duration of chronic pain: 6 years**

**The scope of this talk:  
socio-economical status**

# Study population

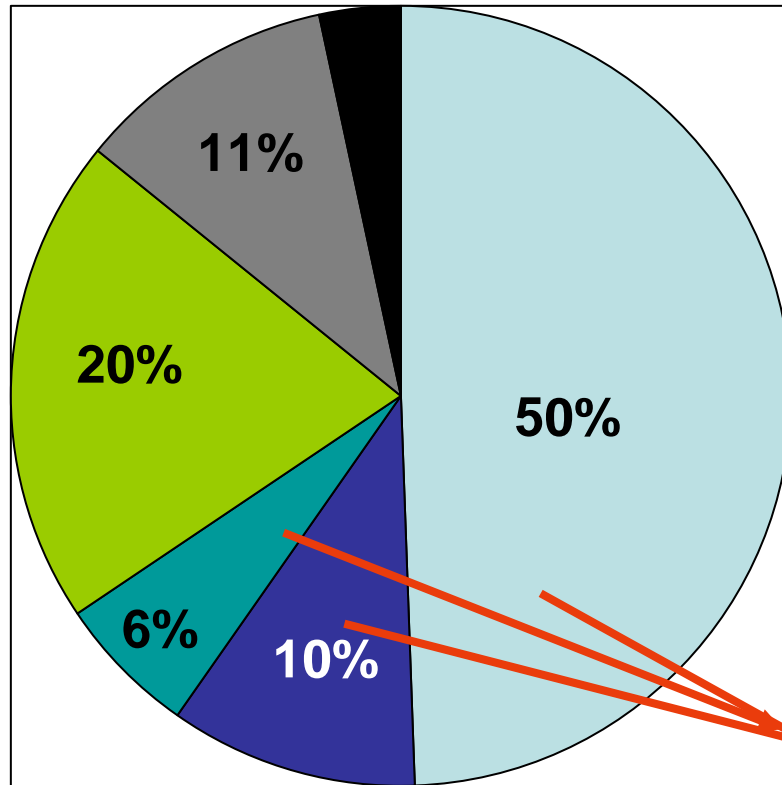
## Socio-economics at baseline

N=117

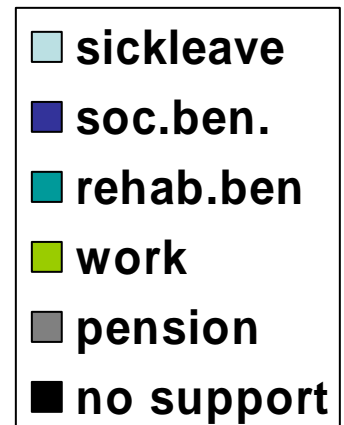


# Study population

## Socio-economics at baseline

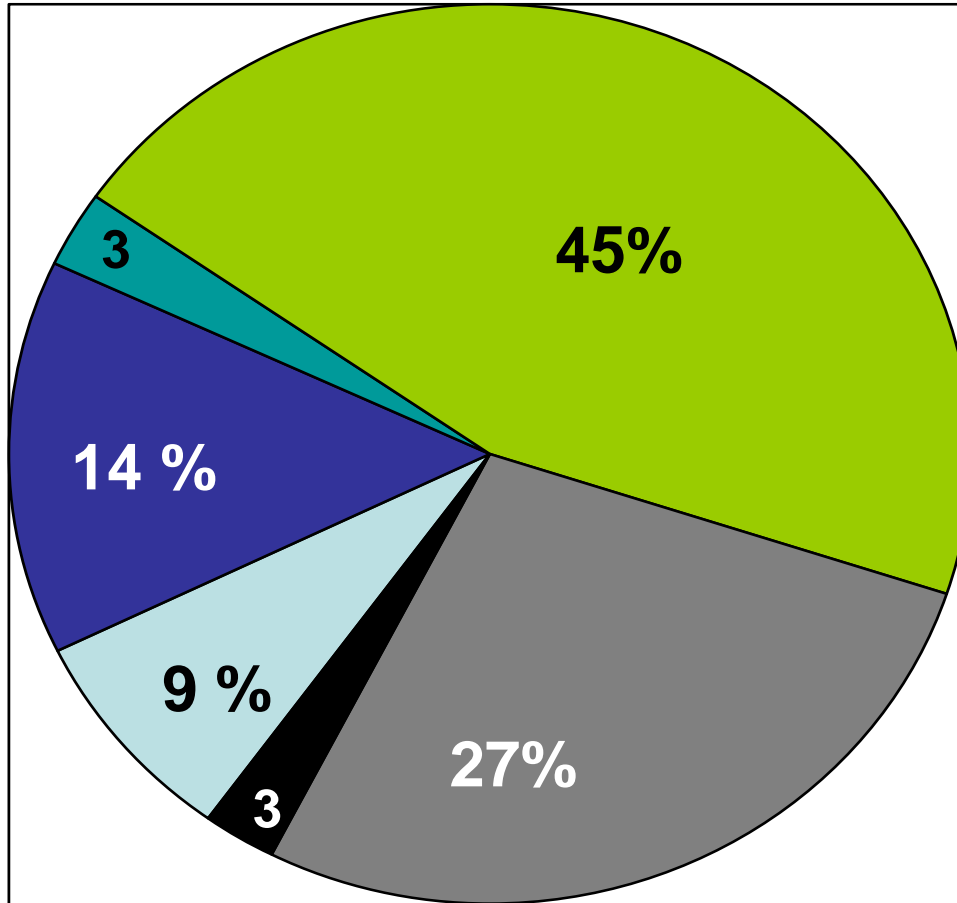


N=117

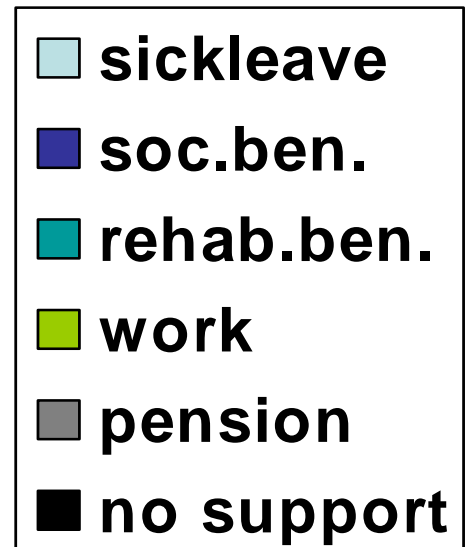


**Unclarified** N=77

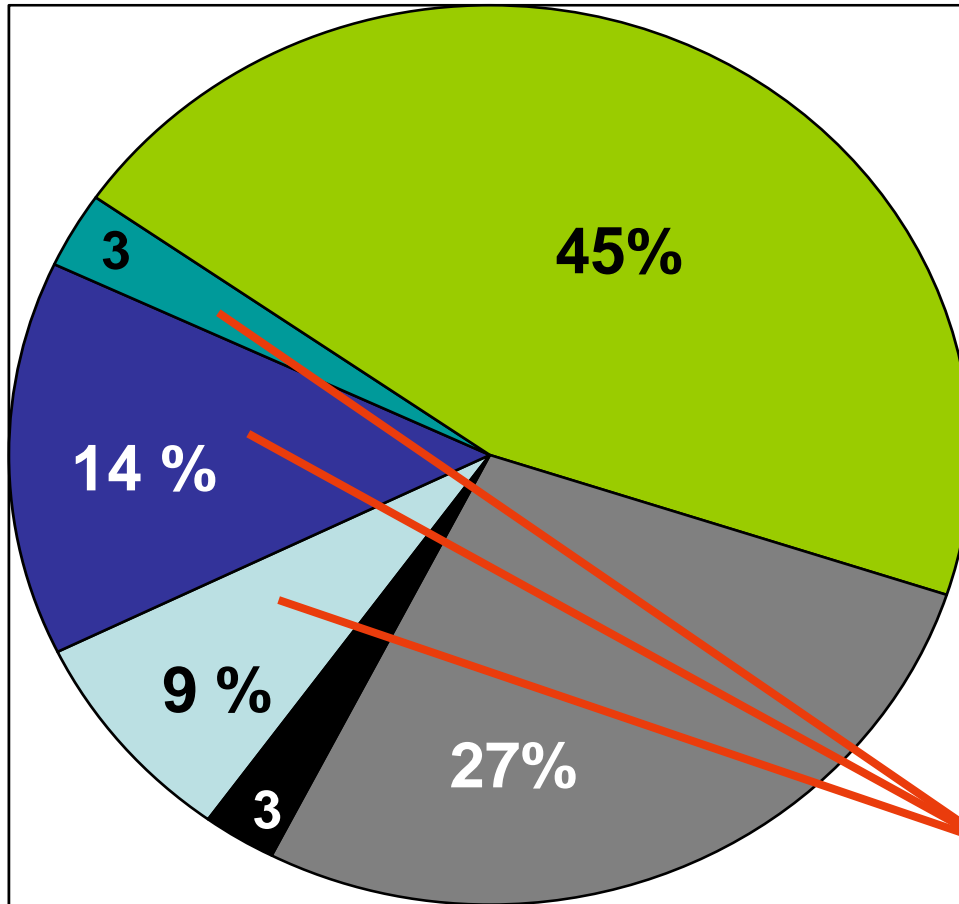
# Unclarified at baseline. N=77



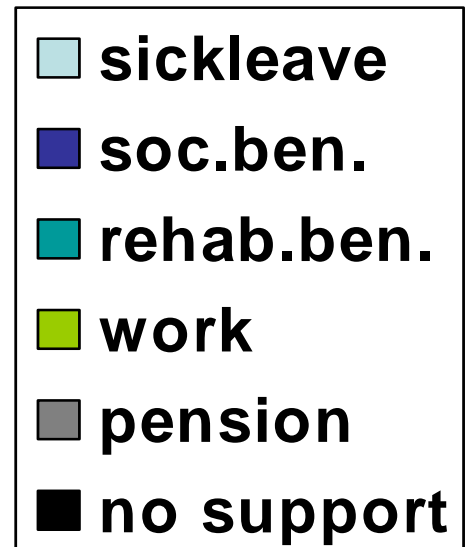
6 months later:



# Unclarified at baseline. N=77



6 months later:



**Unclarified" N=19**



# **Results: clarification and work**

**At 6 months:**

**Clarification of economical situation:**

**74%**

**Adherence to the labour market:**

**45 %**

# Danish Social Security System.

Transfer income per year (1000' Euro)

<b>Transfer income</b>	<b>county</b>	<b>state</b>	<b>total</b>
<b>Sick leave &gt; 1 yr</b>	<b>25</b>	<b>0</b>	<b>25</b>
<b>Part-time jobs</b>	<b>7</b>	<b>12</b>	<b>19</b>
<b>Rehab. benefit</b>	<b>13</b>	<b>13</b>	<b>26</b>
<b>Sick pension</b>	<b>17</b>	<b>10</b>	<b>27</b>
<b>Social benefit</b>	<b>12</b>	<b>6</b>	<b>18</b>

# Results: County and state

(1.000 Euro)

	N	County	State	Society
SL → part time-job	21	18	12	6
SL → sick pension	18	8	10	2
SL → social benefit	7	13	6	7
SL → no support	1	25	----	25
SL → rehab.benefit	1	12	13	1

# Results: County and state

(1.000 Euro)

<b>RB → part time-job</b>	<b>5</b>	<b>6</b>	<b>1</b>	<b>7</b>
<b>SB → part time-job</b>	<b>7</b>	<b>5</b>	<b>6</b>	<b>1</b>
<b>SB → sick pension</b>	<b>1</b>	<b>5</b>	<b>4</b>	<b>9</b>
<b>Job → Sick leave</b>	<b>1</b>	<b>18</b>	<b>12</b>	<b>6</b>
<b>Job → Pension</b>	<b>2</b>	<b>10</b>	<b>2</b>	<b>8</b>
<b>Job → Rehab. Ben.</b>	<b>1</b>	<b>6</b>	<b>1</b>	<b>7</b>

# Results: County and state

(1.000 Euro)

		County	State	Society
<b>Sum of changes</b>		<b>666</b>	<b>513</b>	<b>153</b>

# **Results: cost-benefit**

**Costs for the program (N=117)**

**468.000 Euro**

**Annual cut in expenses**

**153.000 Euro**

**'Break even' → 3 years**

**Average time to age pension: 25 years**

**Potential acc. savings: 28750. E / person**

# Conclusions (1)

**74% of patients on long-term sick leave  
or social benefit were economically  
clarified**

**21% to sick pension**

**45% to work or rehabilitation**

# Conclusions (2)

**Expenses balanced savings after 3 years**

**Potential accumulated savings amounted to  
25.000 Euro / participant**

**Costs distribution between county and state  
changed dramatically**



# The challenge from the social security system...

Danish legislation favours socio-economic clarification within 12 months sick leave..

Waiting times on public multidisciplinary pain clinics exceeds 12 months...

**Chronic pain patients face insufficient evaluation, treatment and 'clarification'...**

# Take home message..

	<b>PPC</b>	<b>Pub p.c</b>
<b>Waiting time in months</b>	<b>1</b>	<b>11–22</b>
<b>Sick pension</b>	<b>20%</b>	<b>56%</b>
<b>Work income</b>	<b>35%</b>	<b>14%</b>

# Take home message..

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**Waiting time is not 'stand-by'..**

# Take home message..

	PPC	Pub p.c
Waiting time in months	1	11-22
Sick pension	20%	56%
Work income	35%	14%

Waiting time is not 'stand-by'..

**'Window of opportunity  
for treatment'**

**Still in job...**

**Still married...**

**Still socializing...**

**Yet not depressed...**

**Yet not 'clarified'  
insufficiently...**

# Thank you for your attention

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