

# ANNUAL REVIEW

## 2014

**“The ‘gamebreaker’ lies in the development of multidisciplinary teams of GPs, nurses, pharmacists and allied health professionals – all with training in pain management – capable of working in an interdisciplinary manner to assess and treat the complex physical, psychological and environmental factors in patients with chronic pain.”**

– Professor Michael Cousins AO,  
Chair National Pain Strategy,  
*Medical Journal of Australia October 2014.*

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## CHAIRMAN'S FOREWORD

As Painaustralia marks our fourth anniversary since formation in 2011, it is pleasing to see the growing awareness of pain and the gradual changes occurring in how chronic pain is understood and managed.

Chronic pain is a major issue for the whole community and spans all age groups. In many cases it is untreated or poorly treated, affecting quality of life, the ability to work and mental health.

As Principal Medical Adviser at the Department of Veteran's Affairs, Dr Graeme Killer AO recognised the serious impact of chronic pain on war veterans, and its links with post-traumatic stress disorder. We are honoured that Dr Killer, who retired from this role in December 2014, has now agreed to become an Ambassador for Painaustralia and continue his support for veterans living with pain.

The impact of Chronic pain on workplace productivity continues to be an important focus for us, since it is the major cause of disability among working age Australians, accounting for over 40 percent of forced retirements.

We know this is a major concern for government and our 2015-2016 Pre-Budget Submission recommends key steps and priorities to improve management of pain and prevent long term disability. Painaustralia Director Professor Deborah Schofield, Chair of Health Economics at the University of Sydney, is leading this work.

The National Pain Strategy has now been supported by all state governments and ACT Health however, the progress is fragmented, underfunded and in need of a strategic national approach. The support of Federal Government is critical to ensuring that pain services are equally available to Australians living in regional, rural and remote areas and indigenous communities.

My firm, Corrs Chambers Westgarth, is proud to have played a role in Painaustralia's formation and we remain committed to providing ongoing governance and legal support to this unique organisation which is providing hope and help to millions of Australians.

We welcome your support for this work – and any suggestions you may have to help address this massive health care problem.



**Robert Regan**  
**Chairman**

## CHIEF EXECUTIVE OFFICER'S MESSAGE

We are pleased to present this review of Painaustralia's activities and report on the developments occurring over the past year to advance the goals of the National Pain Strategy.

There is growing awareness of pain as a major health issue – not just in the scientific literature, but increasingly in mainstream and social media. We must hope this will take us a step closer towards the proper recognition of pain as a national – and indeed a global – health priority.

There are now numerous initiatives underway throughout Australia providing help for people with pain; however the lack of a coordinated national approach means we are losing opportunities to provide services more efficiently and cost-effectively.

Most state and territory governments have now provided funding to enhance pain services at the tertiary level – in metropolitan and regional areas – however there is a great deal that needs to be done at primary care and community levels.

As for all chronic conditions, the vast majority of people with chronic pain are best managed in the community or at primary care level with multidisciplinary pain management programs and ongoing support for self-care. Specialist pain clinics in public hospitals can then be freed up to treat more complex patients and also provide training resources for health professionals.

We are keen to demonstrate the benefits and savings that might be achieved with a chronic pain care plan which provides effective prevention and management in primary care and have put a proposal to the Federal Government to evaluate this. We hope to be able to implement the study once the new Primary Health Networks are operational later this year.

My sincere thanks to Painaustralia National Board Members and Ambassadors and to our team of part time staff – Karina Knight, Linda Baraciolii, Anastasia Glinatsis and Ian Atkin – for their continuing hard work and commitment.

We thank all of our members for your support and congratulate the many organisations that have committed resources and funds to help progress the goals of the National Pain Strategy.

We look forward to continuing to work with you.



**Lesley Brydon**  
**Chief Executive Officer**

# 1. PAINAUSTRALIA: WHO WE ARE AND WHERE WE HAVE COME FROM

## Background

**Painaustralia** was formed in 2011 as a not-for-profit body to work with state and federal health authorities, healthcare professional and consumer bodies, funders, educational and research institutions and other stakeholders, to facilitate implementation of the National Pain Strategy 2010.

We receive no government funding and rely on financial support from members and corporate partners, the generosity of pro-bono service providers and collaboration with key stakeholders to carry out our work.

**Our mission** is to improve the quality of life for people with pain and their families and to minimise the social and economic burden of pain on individuals and the community.

**The National Pain Strategy** was developed by more than 150 health professional and consumer bodies and approved by consensus at the National Pain Summit in 2010. It provides a plan for effective delivery of evidence-based strategies for prevention and management of acute, chronic and cancer pain.

A world-first, this comprehensive document is now being used as a blueprint for pain services in several other countries around the world.

A 2014 review of progress highlighted a wide range of initiatives being implemented across Australia in all states and territories. What is needed now is a commitment from the Federal Government to ensure a cost-efficient, coordinated national approach which will enable Australia to derive the potential economic and social benefits associated with the effective prevention and management of chronic pain.

### Goals of the National Pain Strategy

- Goal 1: People in pain as a national health priority
- Goal 2: Knowledgeable, empowered and supported consumers
- Goal 3: Skilled professionals and best-practice evidence-based care
- Goal 4: Access to interdisciplinary care at all levels of the health system
- Goal 5: Quality improvement and evaluation
- Goal 6: Research to improve the understanding and treatment of pain

## Why we need the National Pain Strategy

Chronic pain is our third most costly health problem – affecting one in five people including adolescents and children and one in three people over the age of 65. Five percent of people with chronic pain also report severe disability. Yet, it remains one of the most neglected and under-funded areas of healthcare.<sup>1,2</sup>

Studies in other western nations show a similar or higher prevalence.<sup>3</sup> This points to an escalating and increasingly costly health problem as Australia's population ages, with the prevalence of chronic pain projected to rise from around 3.2 million Australians in 2007 to 5.0 million by 2050.<sup>4</sup>

### **Impact of Chronic Pain on the Economy and Workplace Productivity**

In 2007, the total cost of chronic pain was estimated at \$34 billion a year, including \$7 billion in health care costs and \$11.7 billion in lost productivity.<sup>5</sup> It is reasonable to think that costs have escalated since then.

The 2010 Global Burden of Disease (GBD) Report revealed that back pain and other musculoskeletal problems are among the leading causes of years lived with disability and represent a major cause of lost productivity.<sup>6</sup>

In Australia, the most common reasons for people of working age to drop out of the workforce are back problems and arthritis – both associated with chronic pain – accounting for 40 percent of forced retirements. This significantly affects living standards, tax revenue and welfare dependence; for people with chronic pain forced onto the Disability Support Pension, there is an average drop in income of about 80 percent.<sup>7</sup>

There is good evidence to show that if treated appropriately, in a timely manner, chronic pain can be successfully prevented and managed with reduction in disability and improvement in return to work rates.<sup>8</sup>

### **Impact of Chronic Pain on Social and Mental Health**

As chronic pain is largely invisible, people with pain are often misunderstood and stigmatised by co-workers, friends, family and even the medical profession.

They can experience discrimination in a number of areas of their lives, such as access to health care, education and income support, however, most insidious of all is their loss of voice; they literally become the “unheard.”<sup>9</sup>

A 2006 Australian study found 21 percent of people who died by suicide experienced physical health problems, which may have contributed to their death, and there are high levels of suicide ideation, plans and attempts in people with chronic pain.<sup>10,11</sup>

Children with chronic pain often drop out of school or are home-schooled, and this can result in social isolation, failure to achieve academic potential, and ultimately impact job opportunities. Families are also affected, with parents missing work and siblings marginalised.<sup>12</sup>



**Sam de Forest** was a vibrant, intelligent young woman. Recently married and with a successful career as a lawyer, it seemed she had everything to live for. But in August 2014, the 38 year-old ended her life after a battle with pneumonia which led to a severe form of chronic neuropathic pain for which she could find no relief. In a display of her compassion and concern for others, Sam requested that friends and colleagues make donations to Painaustralia, in lieu of flowers at her funeral. We received more than \$3,000 in her memory.

### **Impact of Chronic Pain Among War Veterans**

There is serious and growing concern about the relationship between chronic pain and post-traumatic stress disorder (PTSD) among young war veterans with the Department of Veteran's Affairs now committed to develop more effective ways of supporting injured veterans.

The DVA recognises that training is vital to enable health professionals to provide appropriate support for such patients.

*"Patients with unresolved chronic pain are often angry, frustrated and very difficult for health care professionals to manage – especially if they have already seen other practitioners and tried a range of medications. They are desperate and feel they have lost all control."*

*"The situation is compounded if the pain is associated with a mental health problem such as post-traumatic stress disorder."*

**Dr Graeme Killer AO, Recently retired Principal Medical Adviser, Department of Veterans' Affairs**

### **Impact of Chronic Pain on Rural and Indigenous Australia**

A 2011 Australian study found that people living in rural and remote areas are 23 percent more likely to have back pain, and 30 percent more likely to have a long-term health condition as a result of injury. Excess body weight contributes to the risk of developing osteoarthritis, with people in country areas 13 percent more likely to be overweight or obese compared with those in major cities.

In Indigenous communities, lower back pain is a particular concern, impacting not just employment but cultural commitments.

Despite the higher prevalence of chronic pain in rural and remote Australia, timely and effective treatment is less accessible than in major cities.



## Painaustralia Board and Management

Painaustralia has an experienced Board, with skills in law, finance, business management, health economics, consumer advocacy and clinical excellence. This year we welcomed the appointment of David Ipp AO, following the retirement James Wood AO QC.



### **Chair – Robert Regan**

Robert is the Partner in Charge of the Sydney Office of Corrs Chambers Westgarth, Member of the Corrs Executive Leadership Team and leader of that firm's Corporate, Banking & Finance, Tax, and Energy & Resources divisions and a Director of the Australian Centre for International Commercial Arbitration. The Australian Financial Review lists Robert as one of Australia's 'Best Lawyers' for Infrastructure and Construction.



### **Treasurer – Geoffrey Applebee**

Geoffrey is a highly experienced Chartered Accountant and adviser to professional services firms and their partners. He is a director of a diverse group of companies in the public and private sectors, and an independent member of a government audit committee.



### **Director – Professor Deborah Schofield**

Deborah is Professor and Chair of Health Economics, Faculty of Pharmacy, Sydney Medical School, University of Sydney, Murdoch Children's Research Centre and Garvan Institute of Medical Research. Her career has spanned the Australian Government public service, academia and clinical practice and she has a national and international reputation for her work in economic modelling of the health system, health, and its impact on families and the economy.



### **Director – David Ipp AO QC**

Recently retired as Commissioner for the NSW Independent Commission Against Corruption (ICAC), David was formerly a Judge of the Supreme Court of Western Australia and of the Court of Appeal of NSW. He Chaired a Panel of Eminent Persons, which advised the commonwealth and state governments on legal reforms.



### **Community Director – Diana Aspinall**

The nominee of the Consumer Health Forum of Australia, Diana is an experienced consumer advocate, a retired Registered Nurse with a Masters in Health Promotion Planning, and is involved with several consumer engagement programs and health organisations.



### **Community Director – Elizabeth Carrigan**

Elizabeth is the nominee of the Australian Pain Management Association and has a background in education and a strong track record in health advocacy. Elizabeth is an invited member of the International Association for the Study of Pain's International Public Panel for the Special Interest Group-Education.



#### **Clinical Representative – Professor Michael Cousins AO**

A world-leading pain medicine specialist, Michael is Director of the Pain Management Research institute (University of Sydney/Royal North Shore Hospital). He was Chair of the National Pain Summit (Canberra, 2010) and the International Pain Summit (Montreal, 2010).



#### **Clinical Representative – Professor Milton Cohen**

Milton is a specialist pain medicine physician and rheumatologist on the St Vincent's Sydney Campus. He is a past Dean of the Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists and currently the Faculty's Director of Professional Affairs.



#### **Clinical Representative – Dr Tim Semple**

Tim is a senior specialist at the Pain Management Unit, Royal Adelaide Hospital, with clinical time shared equally between pain medicine and anaesthesia. He is also the immediate past President of the Australian Pain Society.



#### **Chief Executive Officer – Lesley Brydon**

A former pharmacist with experience in healthcare communications and advocacy. Lesley was Executive Director of the National Pain Summit (Canberra, 2010) and National Pain Strategy.

### **Painaustralia Members and Partners**

Painaustralia works collaboratively with a number of members and partners, including more than 150 organisations that contributed to the National Pain Strategy.

Founding partners (category A members) the Australian Pain Society (APS) and the Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists (FPM,ANZCA) continue to provide valuable financial support along with the Pain Management Research institute University of Sydney, Royal North Shore Hospital. We are fortunate to have a number of corporate partners, pro-bono service providers and donors (see acknowledgements).

Painaustralia's partnership with the Australian Medicare Local Alliance led to a range of valuable initiatives. We look forward to working with the new Primary Health Networks when they commence in July 2015, to maintain and build on these initiatives.

The National Pain Strategy has been supported by Australia's peak consumer body, the Consumer Health Forum of Australia, and key initiatives are being undertaken by leading medical colleges and specialities, universities and peak bodies including the Royal Australian College of General Practitioners, Royal Australian College of Physicians, Pharmacy Guild of Australia, Pharmaceutical Society of Australia, Australian Physiotherapy Association, Australian College of Nursing, Australian Practice Nurses Association, national and state Arthritis bodies as well as private sector health care providers.



## 2. POLICY AND ADVOCACY

**Painaustralia's Pre-Budget Submission<sup>15</sup>** submitted in February 2015 focuses on the health and economic benefits of applying community-based, best practice strategies to prevent and manage chronic pain – Australia's third most costly health burden, a leading cause of long-term disability and a major cause of forced retirement from the workforce and lost productivity.

It outlines a strong case for leadership by the Federal Government, aligned with its policy objectives to:

- Improve productivity and keep older Australians in the workforce (Federal Budget – Economic Action Plan).
- Ensure effective management of the social security portfolio budget including the Disability Support Pension.
- Create a more efficient Primary Health Care system which ensures improved health outcomes, more effective use and sustainability of the Medicare Benefits Scheme and the Pharmaceutical Benefits Scheme and better treatment for veterans.

Our submission recommends opportunities for service improvement and integration and potential budget savings in all of these areas. It can be downloaded from our website [www.painaustralia.org.au](http://www.painaustralia.org.au)



Painaustralia's online **Campaign for Pain** ([www.campaignforpain.org.au](http://www.campaignforpain.org.au)) has around 300 supporters who have contacted their local MP or Senator to call for chronic pain to be a national health priority. The site features personal testimonies ranging from parents of children with chronic pain, to adolescents and adults of all ages, from all kinds of backgrounds, who are advocating for a better outcome for people living with chronic pain.



The launch of the **Pelvic Pain Foundation**, led by Adelaide gynaecologist and pain medicine specialist, Dr Susan Evans, brings together health professional and consumer groups to promote research, education and improved clinical practices to manage pelvic pain, regardless of cause, age or gender. A landmark report in the *Australian Financial Review* put the spotlight on this silent and debilitating condition, affecting both men and women.

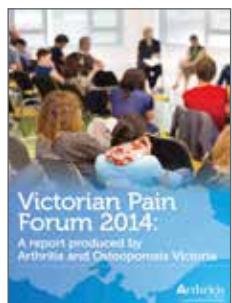


In a related initiative, pelvic pain advocate **Tracy Jones supported by Dr Evans**, is advocating for the benefits of botulinum toxin for pelvic muscle spasm to be recognised with a Medicare Item Number.



Our congratulations to **Lesley Freedman and her daughter Sylvia**, on their successful campaign that convinced Bayer to release Visanne in Australia to treat women with endometriosis.

**At state level, Painaustralia has:**



- Participated in the **Arthritis and Osteoporosis Victoria Pain Forum** in May and contributed to the resulting report. We also supported AoV's State Budget Submission 2014-2015 A Problem Worth Solving which highlighted the need to address escalating health and productivity costs associated with musculoskeletal pain and endorsed the subsequent advocacy campaign.



- Joined with the **Health Consumer's Council of WA** and State opposition to highlight concern about the proposed closure of the Fremantle Hospital Pain Medicine Unit which would affect more than 1100 patients and put the highly acclaimed Self Training Educative Pain Program (STEPS) in jeopardy. This led to an assurance from WA Health that an equal level of pain services would continue to be provided at the new Fiona Stanley Hospital in 2015.



- Continued our advocacy for a dedicated paediatric pain service in Queensland's new Lady Cilento Children's Hospital, supporting the efforts of Queensland's only paediatric pain physician, Dr Kathleen Cooke. This included the online campaign and petition "Jump for Joy."



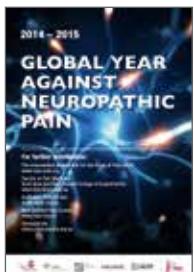
"Our eight year-old daughter Isabella was on crutches from the moment of her injury. The pain was so excruciating, she wanted her dad to blow off her leg with his shotgun, to take the pain away. Despite doctors telling us there was nothing wrong, and tests coming back clear, we continued to search for help. We were even prepared to travel interstate, as there was nowhere that catered for kids her age in Queensland."

**Shay, Isabella's mum**

### 3. RAISING AWARENESS AND CHANGING ATTITUDES

Awareness of chronic pain as a public health issue is growing steadily. **National Pain Week** is well supported by consumers and health professionals with Painaustralia members and stakeholders organising events during the week. The Pain is Ageless Rally held in Martin Place Sydney was a highlight, while the Big Red London Bus attracted attention as it cruised around Sydney.

Other events which contributed to the “noise” included:



- The ‘Global Year of Neuropathic Pain’ which commenced in October 2014 – an initiative of the International Association for the Study of Pain



- Painaustralia and the Australian Pain Society – ‘Annual Consumer Symposium,’ held in Hobart in March 2014



- The Pain Management Research Institute – ‘Walk Against Pain’ January 2014



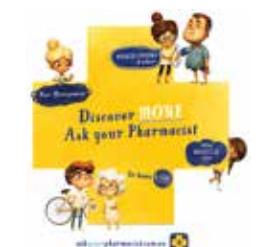
- Arthritis Australia – ‘Arthritis Awareness Week’ March 2014



- Palliative Care Australia – ‘National Palliative Care Week’ May 2014



- Arthritis & Osteoporosis NSW – ‘Don’t Turn Your Back on It’ campaign



- The Pharmacy Guild of Australia – ‘Discover More, Ask Your Pharmacist’ campaign

We congratulate a growing number of people who live with chronic pain who are creating opportunities to raise awareness:

**Shannon Harvey**, who directed *The Connection*, a film about the role of the mind in chronic health conditions.

**Soula Mantalvanos**, whose wonderful artistic work, media interviews and website [www.pudendalnerve.com.au](http://www.pudendalnerve.com.au), help keep chronic pain in the spotlight.



*The film, The Connection,  
directed by Shannon Harvey.*



*Soula at her exhibition, Intermission, at Penny Contemporary Hobart.  
Artist Colleen Burke.*

After living with pain relating to degenerative disc disease for the past seven years, **Amy Dallas** created a t-shirt label to help raise awareness of many young people's plight.



*Amy Dallas and her T-shirt label. Pic courtesy of The Courier Mail 27 Feb 15.*

## Media Highlights

Media interest in chronic pain is growing with features on new research, innovative treatments, expanding services, issues around opioid medication, advocacy for legalisation of medicinal cannabis as well as a variety of personal stories.



*"Chronic pain is different. Instead of being the subject of concern and empathy, it can make you something of a disappointment to all those who may have clustered around you at the beginning."*

*Don't ask me how I am*

*Sydney Morning Herald – February 2014*



*"People with chronic pain tend to suffer silently because they get the message other people don't want to hear about it. They might listen once but the second time, no it's too boring. They are relentlessly losing their lives – some of them do commit suicide because they become desperate."*

*Professor Michael Cousins AO*

*When pain persists*

*The Age – February 2014*



*"A significant proportion of my patients have chronic pain, and it's important to educate them, not just about how to use their medications effectively, but also about the benefits of a multidisciplinary approach to pain management."*

*Alex Page, Community Pharmacist*

*Broken Hill pharmacist tackles pain in Aboriginal communities  
Partyliner April 2014*



*"It completely controlled her life, she was not going to school, she withdrew from her friends and family and wanted to be by herself... It is frustratingly hard seeing a child who is clearly in pain and not being able to make it go away."*

*Donna, Mother of Lauren Cooper 14*

*ACI Pain Management Network website helps youngsters cope  
News.com.au – April 2014*



*"What about a population-based intervention for changing attitudes to back pain, in much the same way that campaigners are trying to tackle the idea that bad mental health is a taboo?"*

*Professor Rob Froud*

*Back pain: the spiralling effects of a problem no one can see  
The Conversation – May 2014*



## Adele Horin Coming of Age

*"What I wanted to tell you about was pain, and the need for pain management specialists to be accorded status like heart surgeons. I feel I've visited another country, where you don't want to go, but where a significant minority of Australians are stuck."*

**Adele Horin**

*Trapped in a world of pain - July 2014*



Comedian Wil Anderson has opened up about his prolonged battle with chronic back and hip pain. "There has not been one moment in seven years when I have been completely without pain," he revealed. "Sometimes my pain is so debilitating I can't walk, can't get out of bed."

**Wil Anderson**

*New hope for chronic pain sufferers  
3wnews - September 2014*



*"He (Michael Moskowitz) has helped patients with a wide range of chronic pain syndromes... patients who had either come off their medications or radically reduced them, so that they have far fewer side-effects..."*

*Training the brain to beat pain*

*The Australian - 31 January 2015*



*"People who undergo multidisciplinary pain programs learn firstly to understand their pain and the drivers and triggers of it, then learn techniques to manage it."*

**Lesley Brydon, Painaustralia CEO**

*Ouch! How much pain can you handle?  
SBS Insight - 17 February 2015*



For five years, Graham Smorgon was on a medical merry-go-round. He sought help everywhere but could find no relief for his pain. Eventually, he found it around the corner from his home in Melbourne.

*Graham Smorgon's battle with pelvic pain  
Australian Financial Review - March 2015*



*"The pain was all-consuming and felt like a ball of barbed wire scraping against the walls of my organs. The urgency and desperation to stop it was so strong, I just wanted to find an escape."*

**Eugenie Lee**

*Drastic treatment for endometriosis after 20 years of pain  
Australian Financial Review - March 2015*

## 4. COMMUNICATING WITH MEMBERS AND STAKEHOLDERS

Painaustralia's website is a one-stop-shop for information about chronic pain, with resources for healthcare professionals, consumers and media and links to other important sites.

It includes clinical guidelines, fact sheets and reading materials for healthcare professionals, up-to-date information about progress on the National Pain Strategy, an archive of media coverage on pain, and key events for healthcare professionals and consumers, across Australia.

It also offers evidence-based advice, video and reading materials and a current list of pain clinics for consumers.

Our new-look eNews publishes once a month and by the end of 2014 had more than 3000 subscribers, including healthcare professionals, consumers, government officers, health care and consumer organisations and media. A key vehicle to share information within the pain community, eNews is now well regarded with many of our stories submitted by subscribers and picked up by other media.

We maintained our social media presence throughout the year and now have 750 friends following us on Facebook and 1,750 on Twitter.



[www.painaustralia.org.au](http://www.painaustralia.org.au)

- For calendar year 2014 – 42,630 unique visitors
- On average 2 pages visited
- 89% from Australia
- Sessions about 2:19 minutes
- 71% of visitors were new



[www.campaignforpain.org.au](http://www.campaignforpain.org.au)

- For calendar year 2014 – 3,614 unique visitors
- On average 2.68 pages visited
- 56.34% from Australia
- Sessions about 2:20 minutes
- 81% of visitors were new



## 5. PROGRESS WITH THE NATIONAL PAIN STRATEGY

### Expanding Pain Services

All state governments and ACT Health are now implementing programs aligned with the National Pain Strategy.

The **NSW Agency for Clinical Innovation Pain Network** issued its first report to the NSW Minister for Health, Jillian Skinner. The report evaluates the impact achieved with the \$26 million investment in 2012 to develop integrated state-wide pain services and web based resources for health professionals and consumers. Achievements in strengthening tertiary services in metropolitan and regional areas are impressive, and an increased focus on developing better access at primary and community levels is now a priority.

During 2014, **South Australia Health** formed a steering group to develop a state-wide Chronic Pain Service Plan which will be integrated into the SA Transforming Health program. The plan focuses on the provision of best quality integrated multidisciplinary pain management services across the state, with an emphasis on access to primary and community level care, appropriate referrals to tertiary outpatients settings and quality use of medications.

We reported last year on the establishment of 14 new regional pain clinics in Queensland, New South Wales and Victoria. With chronic pain more prevalent in rural and regional Australia, and limited access to treatment, it is encouraging to see the gradual expansion of pain services into outlying areas including indigenous communities.

- The **North Queensland Persistent Pain Management Service** at Townsville Hospital now operates permanent satellite clinics in Cairns and Mackay, as well as Telehealth services and an outreach clinic in Mt Isa every six months. Townsville is also benefiting from its first private pain clinic, the Live Well Pain Management Centre.
- Also in Queensland, a team at the **Institute for Urban Indigenous Health (IUIH)** have led the development of “**Pain heroes**” – a small group chronic pain management program for urban Aboriginal and Torres Strait Islander people. Pain Heroes aims to facilitate health behaviour change by building knowledge and self-management skills through a culturally responsive framework which draws on the value of ‘yarning’ and storytelling, community and interpersonal connections inherent to many Aboriginal and Torres Strait Islander cultures.
- In Victoria, the **Lower Murray Medicare Local** began its Regional Pain Management Service in Mildura, providing multidisciplinary pain management services to people throughout the region, and outreach services to key towns on an as-needs basis.
- **Western Australia** now has its first paediatric complex pain service at Princess Margaret Hospital in Perth. A multidisciplinary clinic, it offers individual and group therapy, as well as education for parents. It also offers PACE (Pain Activity and Coping Education) – a Telehealth-based pain program for families for whom travel is a barrier to treatment.
- The lack of pain services in **Tasmania’s North-West** is being addressed by a steering group led by Bernie pain nurse Paula Hyland. The group is contributing to a state-wide plan which is addressing musculoskeletal health issues, Chaired by Dr Hilton Francis Director of Hobart Hospital Pain Clinic.
- In **New South Wales**, GP and Pain Specialist Dr Ian Thong, brings his expertise to a population of almost one million, across the central west towns of Bathurst, Dubbo, Mudgee, Orange, Lithgow, Katoomba, Parkes, Forbes and Cowra. Clinics are held once a month in each town with Dr Thong travelling thousands of kilometres to see patients, many of whom are pensioners or people with disabilities.

## **Education for Healthcare Professionals**

Healthcare professional bodies are increasingly aware of the need to advance knowledge and skills in chronic pain management and a number of programs have been developed for this purpose.

- The **Painaustralia – Australian Medicare Local Alliance partnership** in collaboration with the **Pain Management Research Institute (PMRI)**, delivered a series of pain education symposia for primary healthcare professionals, in Sydney, Brisbane, Melbourne and Perth. Attendance fees were subsidised by the Federal Department of Health.
- The **PMRI** held its annual two-week **Pain Management Multidisciplinary Workshop**, and expanded its series of training webinars for healthcare professionals. Webinars were also delivered by the Australian College of Nursing.
- The **Royal Australian College of General Practitioners (RACGP)** in collaboration with the Faculty of Pain Medicine (ANZCA) developed the online Pain Management Active Learning Module, which is delivered by gplearning.
- The **Faculty of Pain Medicine (ANZCA)** adapted the GP online program to offer pain education for nurses, pharmacists and allied health professionals.
- **PainAdelaide**, a collaboration between the three South Australian universities, expanded in 2014. It brings together students and experts, to hear about the latest in pain research and discuss ways to improve clinical practice.
- The **Australian Physiotherapy Association** has formed a Pain Network which now has 345 members. It provides a platform for clinicians, researchers and scholars with expertise in pain to share ideas, knowledge and skills.

## **New Resources for Healthcare Professionals and Consumers**

- **Painaustralia partnered with Healthshare** to develop a new resource for GPs, Managing Chronic Pain. Now available on Healthshare's Fact Sheets web-based application, it can be provided to patients with chronic pain at the time of consultation, to help them understand and manage their condition.
- The **NSW Agency for Clinical Innovation (ACI)** launched its award-winning website for healthcare professionals and consumers in March 2014. The ACI Pain Management Network provides evidence-based information on how to manage chronic pain and where to find help in New South Wales. It also has a section dedicated to pain after spinal cord injury and Pain Bytes – a chronic pain website for children.
- **Western Australia Health** partnered with **Curtin University and Fremantle Hospital** to produce another award-winning website **painHEALTH**, which provides information and strategies for people with chronic musculoskeletal pain.
- The **eCentreClinic** ([www.ecentreclinic.org](http://www.ecentreclinic.org)) at Macquarie University has developed an online pain management program, the Pain Course, for people with chronic pain and associated mood disorders. The program is free of charge to people who participate in clinical trials. Since it was launched 2012 more than 700 Australians have participated in the Pain Course and more than 90 percent say it was worth their time and that they would recommend it to others with chronic pain. The Pain Course represents one innovative option for increasing access to pain management programs alongside traditional face-to-face programs.
- **Arthritis & Osteoporosis WA** has been working to develop the Bones and Joints School, a website for families, teachers and students.

- **Painaustralia assisted Beyond Blue** to produce the fact sheet Chronic Physical Illness, Anxiety and Depression, a resource for healthcare professionals and consumers that explains the link between chronic physical illness and mental and emotional wellbeing.
- **The Department of Veterans' Affairs (DVA)** produced a set of resources about multidisciplinary pain management through VeteransMATES ('Veterans' Medicines Advice and Therapeutics Education Services). The DVA also developed a comprehensive health assessment tool to assist GPs identify and assess early onset of physical and/or mental health problems, including body pain.
- Two new **Brainman** videos available on YouTube, were developed by the Hunter Integrated Pain Service and Hunter Medicare Local, in collaboration with the University of Washington and The University of SA. These aim to educate consumers about alternatives to opioids for the treatment of chronic pain.
- The **NSW Cancer Council** developed another YouTube educational video, Overcoming Cancer Pain.
- The **Spinal Cord Injury Pain Book**, released this year by the pain team at Hammondcare as a follow-up to the successful The Pain Book, is the first book to focus on management of chronic pain after spinal cord injury.

## Support for Consumers



Painaustralia hosted the second annual **Living Well With Pain Consumer Symposium and Forum** in Hobart in March, in conjunction with the Australian Pain Society's Annual Scientific Meeting. The event gives participants the opportunity to hear from leading Australian and international experts on pain, and provides them with a voice through the forum.

The **Australian Pain Management Association (APMA)** under the leadership of CEO Elizabeth Carrigan now has 20 support groups for people with chronic pain in Queensland, Western Australia, New South Wales, Victoria and the Australian Capital Territory. A new APMA group called SNAP was established for young adults 18-35 in Brisbane, and another for people with Pudendal Neuralgia at the Women's Health Research Institute in Sydney. APMA urgently needs funding to maintain, and expand, these groups to meet the need and continue to operate its community Help Line.

There is no shortage of people seeking the peer support and comfort offered by **Chronic Pain Australia's Online Forum** which attracted as many as 4000 guests during National Pain Week. Throughout the year, around 300 people will be talking on line at any time of the day, reflecting the universal need for validation and companionship for people living with pain. The forum is becoming a very large archive of personal stories and referenced information.

Working from Adelaide, **consumer advocate Mary Wing** is a Forum Moderator and also delivers Stanford accredited self-management education programs to consumer groups in South Australia.

## **Under-graduate Education**

The **University of Notre Dame Australia** became the first university to establish a Chair of Chronic Pain to enable the teaching of chronic pain medicine as a core part of the undergraduate curriculum for medical students.

Professor Eric Viser was appointed the inaugural Churack Chair of Chronic Pain Education and Research, at the University's School of Medicine, Fremantle, taking up the position in April 2015. The Chair was made possible through the generosity of Perth philanthropists, Geoff and Moira Churack and several other major donors.

## **Quality Improvement and Evaluation**

The **Electronic Persistent Pain Outcomes Collaboration (ePPOC)** managed by Wollongong University is now collecting, evaluating and reporting on data collected from almost 30 tertiary pain clinics in Australia. The data will be used to measure outcomes, identify best practice protocols, set benchmarks for performance and identify variation in treatment and outcomes across the participating services. At present however, funding for this important initiative is time-limited, provided by a small number of state governments (primarily NSW) and only available to specialist tertiary pain management services.

A proposal requesting funding to allow all Australian publicly-funded tertiary pain services to participate in ePPOC has been presented to the Standing Council on Health and the previous Minister for Health, the Hon Peter Dutton. This proposal recommended that the cost of national implementation of ePPOC (\$780,000 p.a.) be shared between federal and state health departments according to the AHMAC cost sharing formula.

## **Research**

The **National Health and Medical Research Council** (NHMRC) allocated \$13 million in grants for pain research during 2014, just two percent of the total of \$651 million awarded across all disciplines.

The **PMRI**, a joint initiative between the University of Sydney and Royal North Shore Hospital, continued to carry out basic, clinical, translational and epidemiological research relevant to the mechanisms and treatment of chronic and cancer pain.

Other projects reported during the year include:

- The **University of Queensland** was awarded \$48 million to progress clinical trials of EMA401, a new oral treatment for neuropathic and inflammatory pain.
- The **National Breast Cancer Foundation** awarded \$1 million to the team that developed the new cancer pain guidelines for a four-year trial of strategies to overcome barriers to get them into practice.
- **Griffith University** launched a new app for use in studies to record daily ratings of head pain, as well as CliniHelp, an app for patients with conditions like Multiple Sclerosis and Rheumatoid Arthritis, to help them record symptoms.
- **Curtin University** is developing the Electronic Pain Assessment Tool (ePAT), which uses facial recognition software to provide an automatic assessment of pain, to detect pain in people with communication difficulties like dementia.

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Painaustralia Limited  
PO Box 3277 Tamarama NSW 2026  
t: 02 9130 6086  
f: 02 9130 6045  
e: [lesley.brydon@painaustralia.org.au](mailto:lesley.brydon@painaustralia.org.au)  
[www.painaustralia.org.au](http://www.painaustralia.org.au)  
ACN 147 676 926  
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