

painaustralia

**SUBMISSION TO DEPARTMENT OF HEALTH
NATIONAL ACTION PLAN FOR ENDOMETRIOSIS**

MAY 2018

RECOMMENDATION

While Painaustralia strongly welcomes the Australian Government's commitment to improve awareness, education, diagnosis and treatment of endometriosis which is a key cause of debilitating and persistent pain, efforts to improve the quality of life for women and girls living with endometriosis would be best underpinned by the full implementation of the National Pain Strategy (NPS).

ABOUT PAINAUSTRALIA

Painaustralia is the national peak body working to improve the quality of life of people living with pain, their families and carers, and to minimise the social and economic burden of pain. Members include pain and other specialists, health practitioners, health groups, consumers and researchers. Painaustralia works with our network to inform practical and strategic solutions to address this complex and widespread issue.

CONSULTATION RESPONSE

Painaustralia welcomes the Australian Government's commitment to improve awareness, education, diagnosis and treatment of endometriosis, which is a key cause of debilitating and persistent pain.

However, we believe that efforts to improve the quality of life for women and girls living with endometriosis would be best underpinned by the full implementation of the National Pain Strategy (NPS).

We welcome the recent announcement by the Federal Health Minister to support the development of a national pain action plan that aligns with the priorities of the National Strategic Framework for Chronic Conditions.

We look forward to supporting the development of the action plan that we anticipate will build on the foundation of the NPS.

The NPS was developed in 2010 by 200 delegates at the National Pain Summit from a range of disciplines and provides a blueprint for the prevention and best practice multidisciplinary treatment and management of acute, chronic and cancer pain. It recognises the broad range of conditions that cause chronic pain and outlines priority goals to improve access to services, empower consumers, skill health practitioners and prioritise research.

Importantly, the NPS offers systemic guidance to bring about change in the wider and medical community to address the three priority areas of the draft Endometriosis Action Plan including awareness and education, clinical management and care and research.

This includes widening access to best practice interdisciplinary treatment and management strategies, that not only involves specialists as identified in the draft Action Plan for endometriosis, but includes all relevant health practitioners.

The NPS also seeks to bring about a whole-of-community response to address pain as a national health challenge. This is critical to address stigma by increasing knowledge of pain and its treatment options for consumers, families and in the community.

We are currently refreshing the priorities of the 2010 NPS and we will continue to ensure the broadest group of stakeholders are involved including endometriosis specialists and members of the Department of Health Executive.

We acknowledge the need to address the specific challenges faced by those living with endometriosis. However, we remain optimistic that a national plan pain that improves the quality of life for the millions of Australian living with pain will be prioritised by all governments to underpin condition-specific strategies.

Our specific feedback on the draft Endometriosis Action Plan is as follows:

- **Key implementation partners** to deliver the Endometriosis Action Plan have been omitted including the Faculty of Pain Medicine, the Australian Pain Society, the Pain Management Research Institute and Painaustralia. Each of these organisations offer specific expertise, the latest evidence on pain management including clinical best practice, new research and linkages to a broad range of key health practitioners and consumers.
- The following **additional research topics** could also be included:
 - Quality service improvement and evaluation;
 - increase understandings of unmet need; and
 - the role of pain services and best practice pain management in treating endometriosis.
- **The clinical guidelines and clinical care standards brought forward by the Action Plan for Endometriosis should align with the National Pain Strategy** which is regarded as a blueprint for the prevention and best practice multidisciplinary treatment and management of acute, chronic and cancer pain. This should include consulting with pain specialists. The Strategy can be found at: <http://www.painaustralia.org.au/improving-policy/national-pain-strategy>.
- **Enhanced understandings of best practice interdisciplinary must occur at the primary care level** and involve allied health and other health practitioners, not only between and by specialists.
- **Best practice pain management is defined as an interdisciplinary approach** (not multidisciplinary). This is multimodal treatment provided by a multidisciplinary team collaborating in assessment and treatment using a shared biopsychosocial model and goals. For example: the prescription of an anti-depressant by a physician alongside exercise treatment from a physiotherapist, and cognitive behavioural treatment by a psychologist, all working closely together with regular team meetings (face to face or online), agreement on diagnosis, therapeutic aims and plans for treatment and review.
- **Resources for families, carers and partners of women and girls living with endometriosis** should be provided as part of awareness and education.
- **Access to consumer resources on pain management** including treatment options, the role of interdisciplinary care and self-management strategies, as well as support networks would also be helpful to include.

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