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Pain hurts our economy and is debilitating productivity in the Canadian workplace

New study shows impact of pain on economy, strain on our healthcare system and inadequate pain management training of medical professionals

QUEBEC CITY, May 28 /CNW/ - Pain is hurting our economy and debilitating productivity in the Canadian workplace, says a recent survey conducted by Nanos Research on behalf of painexplained.ca, an advocacy and awareness campaign committed to raising awareness of the issue of under-treated pain in Canada. A debilitating struggle for individuals, recent research shows pain is hurting our healthcare system through increased utilization of health care services. A severe shortage of treatment resources and a stingy approach to funding pain research is compounding this aching public health crisis.

According to the painexplained.ca surveys of 4,000 Canadians conducted in 2007 and 2008, over 18% of adults suffer from chronic pain. Of the 600 moderate to severe chronic pain sufferers given a more detailed survey, almost 60% had lost their job, suffered loss of income or had a reduction in responsibilities as a result of their pain. Among those who were still employed, pain significantly affected absenteeism rates, with a mean number of 28.5 lost work days per year. Pain is negatively impacting our workforce, causing a throbbing issue that must be addressed.

Previous studies have shown that waiting for pain treatment longer than 6 months increases the risk of permanent pain-related disability.(1) "Our growing pain crisis will only intensify if we don't provide appropriate treatment to people on a timely basis. Pain is hurting Canada - on both an individual and societal level - and it is a national embarrassment that our medical system pays so little attention to a problem that is so common and costly," said Dr. Roman Jovey, painexplained.ca Steering Committee Member and Past President of the Canadian Pain Society. "Our medical system is so focused on finding the cure for the underlying disease that we are ignoring the on-going suffering of people with pain. Veterinary students receive five times the amount of training in pain management than doctors do. This means that your dog will likely receive better pain treatment than your mother, partner, child - or you."

Health care costs for treating individuals suffering from chronic pain are skyrocketing. Estimates place direct health care costs for Canada to be more than \$6 billion per year (in year 2000 dollars) for individuals suffering from chronic pain. By 2025, with the aging population, these costs can be expected to rise to more than \$10 billion per year (Phillips & Schopflicher, 2008)(2). According to the painexplained.ca survey, 70.5% of moderate to severe chronic pain sufferers are currently being treated by a physician for their pain - and this number will only increase.

"Unrelenting, never ending, pain affects every aspect of my life including my financial security," said Lynn Cooper, a person who lives with pain, President of the Canadian Pain Coalition and painexplained.ca Steering Committee Member. "I would function at work in unbearable pain that drastically reduced my productivity."

Chronic pain sufferers also experience mental health issues. According to the painexplained.ca survey, almost 30% of chronic pain sufferers reported being diagnosed with depression, while more than 20% were diagnosed with an anxiety disorder. Almost 12% of chronic pain sufferers reported having both diagnoses. The survey also reported that when compared to people with depression, emphysema, kidney failure and heart disease, chronic pain sufferers report the lowest health related quality of life.

According to another recent Canadian Pain Society (CPS) survey(3) less than 1% of total funding from the Canadian Institutes of Health Research (CIHR) is allocated to pain related research. This survey also revealed that of 79 active researchers doing pain related studies in Canada, 65 had received

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funding in the past five years amounting to a total of \$80.9 million. Statistics Canada reported that the total spending on research and development in the health field amounted to \$6.3 billion for 2007 (Statistics Canada, 2008). This means that a mere 0.25% of the total funding for health research(4) is allotted to a condition that affects at least 18% of the population. According to figures obtained by personal communication with CIHR, only six randomized controlled trials examining treatments for pain have been funded since 1999 and only two of these involved chronic pain.

[painexplained.ca Survey Methodology](#)

The survey was conducted in 2007 and repeated in 2008 by Nanos Research. In each administration, 2,000 employed adults over the age of 18 with chronic pain were given a short questionnaire and 300 with moderate to severe chronic pain were administered a longer survey.

[About painexplained.ca](#)

[painexplained.ca](#) is an awareness and advocacy campaign founded by the Canadian Pain Society, Canadian Pain Coalition, and the Canadian Pain Foundation. The www.painexplained.ca initiative seeks to promote awareness of the issue of under treated pain in Canada through a long-term, coordinated public awareness campaign with the goal of addressing the vital need to achieve better understanding, prevention and management of all types of pain in Canada.

[Canadian Pain Society Annual Conference](#)

Interview opportunities are available May 27-30, 2009 in Room No.2105 of the Quebec City Convention Centre, 2nd floor.

- (1) Lynch ME, Campbell F, Clark AJ, Dunbar MJ, Goldstein D, Peng P, Stinson J, Tupper H. A systematic review of the effect of waiting for treatment for chronic pain. *Pain*. 2008 May;136(1-2):97-116.
- (2) The economics of Chronic Pain CJ Phillips D Schopflocher (2008). In S Rashiq D Schopflocher, P Taenzer E Jonsson (Eds) *Chronic Pain: A Health Policy Perspective*. Weinham, Germany: Wiley-Blackwell.
- (3) Research funding for Pain in Canada. Lynch ME, Schopflocher D, Taenzer P, Sinclair C. *Pain Res and Manag*. 2009 March/April:14:113-115. Caitlin Sinclair BSc, Dalhousie University, Halifax, Nova Scotia
- (4) IBID

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