

PRESS RELEASE

European Positioning Statement: Chronic Pain fundamental for European health

International multi-stakeholder platform acknowledges chronic pain as a disease in its own right – European policy-makers challenged to respond

Copenhagen, 31 May, 2012. On occasion of the 3rd international symposium on the “Societal Impact of Pain” (SIP 2012) in Copenhagen, Denmark on 29-31 May, a European multi-stakeholder expert group finalised their positioning paper demanding acknowledgement of chronic pain as a disease in its own right by EU governmental institutions and member state governments. During the Danish EU Presidency, more than 400 stakeholders from more than 30 countries came together to raise awareness on the societal impact of pain, exchange national best practices and foster European and national pain care policy projects. The symposium took place under the high patronage of the Italian Presidency of the Council of Ministers and the Italian Ministry of Health. The scientific aims of SIP 2012 were endorsed by more than 160 international organisations.

Following the report “Reflection process on chronic diseases in the EU – the role of chronic pain”¹, which has been published during the symposium on 30th May, the overall impact of pain measured in terms of prevalence and cost is high; frequently chronic pain is prevalent in those patients who already have one or more than one chronic disease; in particular with the elderly population a strong link between the increase of age and the prevalence of chronic pain could be shown. The costs which arise from this high prevalent condition for our health care system are significant.

Anna Rosbach, Danish Member of the European Parliament, supports the findings of the report: “Chronic pain is a burden to millions of people in Europe. Because the pain is chronic it is often not considered a disease by society and health care systems. This must be changed. Chronic pain should no longer be given less attention and care than temporary pain.”

Pain care for healthy ageing

With regard to an ageing population and the increased prevalence of pain, another report on “Healthy ageing in relation to chronic pain in the European Union”² has been published: Key findings show that the quality of life increases significantly with the reduction of pain. Respecting the strong link between increasing age and chronic pain, the adequate management of chronic pain may lead to an improved quality of life and thus a more healthy and active ageing.

The challenges of an ageing society are described by Orsi Nagy, policy analyst from the EU Commission (DG Sanco) and responsible for the European Innovation Partnership on Active and Healthy Ageing: “The ageing of society is not only one of the greatest achievements of the 21st century, but also a social and economic challenge for the European society. We have to commit ourselves to providing care to those in need, whilst giving ample opportunities to those that are active and healthy to continue to contribute to society.”

Costs of chronic pain

Health Policy Manager Martin K. Pedersen from the Danish Chamber of Commerce describes his view from an economic perspective: "In a situation where everyone is talking about work force retention, chronic pain is an obvious place to start: The economic impact of pain is greater than most other health conditions; in Denmark it has been estimated that 1 million working days are lost annually as a result of chronic pain¹ and in Sweden it has been suggested that the loss of productivity due to sick leave resulting from chronic pain constituted 91 per cent of the socioeconomic cost of 9.2 billion Euros associated with the problem². The odds of quitting one's job because of ill health have been shown to be seven times higher among people with chronic pain problems than 'normals'³. Looking solely at the social compensations, retirement pensions and other so-called indirect costs associated with chronic pain, there is much to gain from a targeted effort."

Pain care by law

An example of a successful implementation of pain care policy in form of "Law 38" (Legge 38) is given by Dr Marco Spizzichino, Head of Office Palliative Care and Pain Therapy Uff. XI, Italian Ministry of Health, which gave its patronage for SIP 2012: "To treat pain properly is a must for any doctor; not to suffer is a right for each patient: the Law 38 of March 2010 protects Italian citizens by ensuring a reasonable access to proper care and treatment. Now, two years after the issue of the law, the outcome is encouraging. However, it still needs a strong commitment by all involved actors so that every citizen, wherever resident in Italy, could benefit from a qualified assistance."

Visible progress in implementing the Road Map for Action

One of the key results of the 2nd SIP symposium in Brussels in May 2011 is the "[Road Map for Action](#)" describing seven main policy dimensions for the improvement of chronic pain in Europe. "The reports given from the EFIC member societies and from the different EU countries representing these during this 3rd SIP symposium have already shown some progress in translating the seven strategic goals of the Road Map for Action into local and national activities" says Professor Hans Georg Kress, President of EFIC®. "These strategic goals will be on the radar screen of EFIC in the future using the [Road Map Monitor](#) to monitor the progress."

Broad response by stakeholders

The scientific aims of this year's Sip 2012 symposium was endorsed by more than 160 international organisations: "Their outstanding support and contribution strongly demonstrates the societal impact of pain and illustrates the broad relevance the topic of chronic pain has for such a variety of stakeholders", thus explains Alberto Grua, Executive Vice President of Grünenthal Europe & Australia. "Grünenthal is highly committed to support the improvement of access to pain management for patients in the European Union. In doing so we closely follow the seven dimensions of the "Road Map for Action", the key result from SIP 2011 and action plan for European and national health care policy on pain management."

The SIP 2012 symposium took place under the high patronage of the Italian Presidency of the Council of Ministers and the Italian Ministry of Health. The symposium was hosted by the Danish Association for Chronic Pain Patients (FAKS). The scientific framework of SIP 2012 was under the responsibility of the European Federation of IASP® Chapters (EFIC®). The pharmaceutical company Grünenthal GmbH was responsible for funding and non-financial support (e.g. logistical support). The scientific aims of the SIP 2012 symposium have been endorsed by more than 160 pain advocacy groups and scientific organisations.

¹ Eriksen J. et al. Critical issues on opioids in chronic non-cancer pain: an epidemiology study. Pain 2006;125:172-9.

² Swedish Council on Technology Assessment in Health Care. Methods of Treating Chronic Pain. Report No: 177/1+2; 2006

³ Jonsson E. Back pain, neck pain. Swedish Council on Technology Assessment in Health Care Report No: 145: Stockholm, 2000

The Ethical Committee for the Pharmaceutical Industry in Denmark (ENLI) has been notified of the Symposium. The SIP 2012 Symposium has been pre-approved by ENLI with the current format and content.

More information on SIP available at www.sip-platform.eu

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Notes to Editors:

About FAKS

FAKS - the Danish Association of Chronic Pain Patients was founded in 1990. A group of pain patients, brought together in an interdisciplinary pain unit, came up with the idea. The vision was to bring pain patients together in order to inspire and activate each other in various positive ways. Thus, one of the main objectives was to deal with common problems such as physical, mental, and social inactivity.

In FAKS we come together doing various activities physical as well as mental in order to divert our attention from the pain. We have lectures, photography yoga, and mindfulness courses, excursions to the cinema, theater and amusement parks, just to name a few.

FAKS sets itself aside from other patient groups by being a non-specific- diagnosis-dependent- association. The fact that in many cases pain becomes a disease of its own right - no matter the initial cause - calls for a different approach. Even though there exists universal problems to chronic pain patients, people and their pain issues are in many ways as different and unique as themselves. For more information, please visit www.faks.dk

About the Societal Impact of Pain (SIP)

The "Societal Impact of Pain" (SIP) is an international, multi-stakeholder platform created in 2010 as a joint initiative of EFIC® and the pharmaceutical company Grünenthal GmbH and aims to raise awareness of the relevance of the impact that pain has on our societies, health and economic systems, exchanging information and sharing best-practices across all member states of the European Union, and developing and fostering European-wide policy strategies & activities for improved pain management in Europe. The platform provides opportunities for discussion for health care professionals, pain advocacy groups, politicians, insurances, representatives of health authorities, regulators and budget holders.

The scientific framework of the SIP platform is under the responsibility of the European Federation of IASP® Chapters (EFIC®). The pharmaceutical company Grünenthal GmbH is responsible for funding and non-financial support (e.g. logistical support). For more information, please visit www.sip-platform.eu

About EFIC

The European Federation of IASP® Chapters (EFIC®) is a multidisciplinary professional organisation in the field of pain research and medicine, consisting of the 36 chapters of the International Association for the Study of Pain (IASP®), which are the IASP accredited official National Pain Societies in each country. EFIC's constituent chapters represent pain societies from 36 European countries and close to 20,000 physicians, basic researchers, nurses, physiotherapists, psychologists and other healthcare professionals across Europe, who are involved in pain management and pain research. For more information, please visit www.efic.org.

About Grünenthal

The Grünenthal Group is an independent, family-owned, international research-based pharmaceutical company headquartered in Aachen, Germany. Building on its unique position in pain, its objective is to become the most patient-centric company and thus to be a leader in therapy innovation. Grünenthal is one of the last five research-oriented pharmaceutical corporations with headquarters in Germany which sustainably invests in research and development. These investments amounted to about 25 percent of revenues in 2011. Grünenthal's research and development strategy concentrates on select fields of therapy and state-of-the-art technologies. We focus on the intensive search for new ways to treat pain better, more effectively and with fewer side-effects than before. Altogether, the Grünenthal Group has affiliates in 26 countries worldwide. Grünenthal products are sold in more than 155 countries and today approx. 4,200 employees are working for the Grünenthal Group worldwide. In 2011, Grünenthal achieved revenues of €947 mn. More information: www.grunenthal.com

For further information, please contact

Societal Impact of Pain (SIP) Platform

Tel: +49 241 569 1878

Fax: +49 241 569 5 1878

Email: sip-platform@grunenthal.com

www.sip-platform.eu

or

European Federation of IASP® Chapters

Medialaan 24

1800 Vilvoorde – Belgium

Tel: +32 2 251 55 10

Fax: +32 2 251 48 10

Email: secretary@efic.org

www.efic.org

¹ N. Armstrong, J. Kleijnen: "Reflection process on chronic diseases in the EU – the role of chronic pain", Kleijnen Systematic Review Ltd., 2012. www.sip-platform.eu

² N. Armstrong, J. Kleijnen: "Healthy ageing in relation to chronic pain in the European Union", Kleijnen Systematic Review Ltd., 2012. www.sip-platform.eu