

Disclosure

- Advisory Board Member:
 - -Bicycle Health
 - -Lumina Analytics: Mission LISA (Learning Indicators of Substance Addiction)









Conceptualizing Patient Treatment: Interdisciplinary Care

Treatment should focus on treating the whole person

-Optimization of medical care

-Physical rehabilitation

-Lifestyle factors

-Psychosocial variables



Clarification of Terminology to Help Inform Treatment

- Psychological Dependence (as applied to medication): perception that specific functionality is the direct result of a medication and could not otherwise be achieved
- Addiction: disease marked by continued engagement in a specific behavior despite the presence of adverse outcomes















Conceptualizing Patient Treatment: Interdisciplinary Care

Treatment should focus on treating the whole person

-Optimization of medical care

-Physical rehabilitation

-Lifestyle factors

-Psychosocial variables

Conceptualizing Patient Treatment: The Lack of Interdisciplinary Care

Treatment should fails to focus on treating the whole person

-Optimization of medical care

-Physical rehabilitation

-Lifestyle factors

-Psychosocial variables

Painweek.

Unimodal Care: The Evolution of a Problem

- Tolerance
- Physical Dependence
- Psychological Dependence
- Addiction





Mission LISA Estimates

- 13.8 million individuals (12 and older) misused prescription opioids and heroin in 2017
- 12.5% increase in drug OD deaths from 2016-2017
- ■89% of above increase secondary to opioids
- Highest numbers of individuals affected by opioid misuse (including abuse and death): Pennsylvania, Florida, California, Ohio, Texas
- Lumina Analytics: <u>https://luminaanalytics.com/mission-lisa</u> accessed October 2018.

Painweek.

Prescription Opioids

- Opioid crisis declared a public health emergency
- HHS 5-point strategy
 - -Better addiction prevention, treatment, and recovery
 - -Better data
 - -Better pain management (Crisis = opportunity)
 - -Better targeting of overdose reversing drugs
 - -Better research
- U.S. Department of Health and Human Services: https://www.hhs.gov/opioids/about-the-epidemic/index.html accessed March 2018.
- U.S. Department of Health and Human Services (2017). HHS opioid research portfolio brief: translating science into action.



Common Pain Psychology Curriculum Components

- Overview of pain
- Pacing of activities
- Pain & stress physiology
- Relaxation training
- Sleep hygiene

Painweek.

Common Pain Psychology Curriculum Components

- Identifying environmental stressors (work & home)
- Development of stress management techniques (e.g., cognitive restructuring)
- Assertiveness/communication skills development
- Flare contingency planning

















Multidisciplinary Approaches and Opioid Weaning

Painweek

- 705 (600 completed) outpatient interdisciplinary program participants
- Opioid group tapered with cocktail
- Opioid group improved same as non-opioid group (pain severity, catastrophizing, sleep, treatment satisfaction, pain-related functioning domains)

Murphy, JL, Clark, ME, Banou, E (2013). Opioid Cessation and Multidimensional Outcomes After Interdisciplinary Chronic Pain Treatment. Clin J Pain, 29(2): 109-17.







Unscheduled Activities

- Independent practice
- Walking
- Activity tracking log

Painweek.

Behaviors Reinforced • Consistent across all team members, including nursing • Application of self-management skills • Increased activity levels • Focus on functioning



SCIPP Outcomes n = 44 (19 male, 25 female) Minimum of 1 pain diagnosis Assessments: Center for Epidemiologic Study of Diseases – Depression Scale (CESD) McGill Pain Questionnaire (MPQ) McGill Pain Questionnaire-Visual-Analog Scale (MPQ-VAS) Profile of Mood States (POMS) Administered within 24 hours of admission and discharge









SCIPP Outcomes

Significant changes on

- CESD (p<.001) MPQ-VAS average pain (p<.001)
- MPQ summary score (p=.005)
- MPQ pain rating index (p=.007)
- MPQ affective score (p=.01) – POMS Tension-Anxiety (p=.005)
- POMS Depression-Dejection (p=.001)
- POMS Vigor-Activity (p=.005)
- POMS Fatigue-Intertia (p=.002)
- POMS Confusion-Bewilderment (p=.003)
- POMS Total Mood Disturbance (p=.01)
- No significant difference on - POMS Anger-Hostility

Painweek

Beyond CBT

- Acceptance and Commitment Therapy (ACT)
- Biofeedback Training
- Mindfulness-Based Interventions
- Emotional Awareness and Expression Therapy



Addressing Chronic Pain in the Context of Substance Use Disorders

Medication reduction can improve functional outcomes

 Interdisciplinary care enhances results and can lead to decreased medical utilization



Lambeek, Van Mechelen, Knol, Loisel, Anema (2010); Flor, Fydrich, Turk (1992) Buchner, Zahlten-Hinguranage, Schiltenwolf, Neubauer (2006); Linton & Ryberg (2001)

Addressing Chronic Pain in the Context of Substance Use Disorders

- Medication Assisted Treatment (MAT): Combination of pharmacologic treatment AND behavioral interventions
- Employ use of a biopsychosocial formulation of the patient's predicament versus focusing solely on a biomedical model
- Emphasize focus on function versus pain elimination: Set functional goals (resumption of normal activities, RTW) and use activity tracking sheets

