

## Wait Time Benchmarks for Patients with Chronic Pain Position of the Canadian Anesthesiologists' Society

1. Many patients with chronic pain can be treated effectively by their family doctors using treatments that include medications available in the community. Unfortunately, many family doctors are reluctant to prescribe medications with proven efficacy in alleviating chronic pain (e.g., they may be concerned about the risk of addiction associated with the use of opioids). Some of the necessary information can be obtained from accessing best practice guidelines such as the Canadian Opioid Guideline, which has been approved by the regulatory Colleges. If family doctors were provided with proper training in the treatment of chronic pain and if they were adequately remunerated for the extra time that is often required to care for patients with chronic pain, the burden on pain clinics would be reduced and many patients would have a better quality of life.
  
2. The Canadian Pain Society reviewed the evidence concerning acceptable wait times for the treatment of chronic pain at multidisciplinary pain centers.<sup>1</sup> The Canadian Anesthesiologists' Society examined their findings and held informal consultations with anesthesiologists who are directors of pain clinics. It is apparent that there may be a marked decline in function in patients who suffer chronic pain for more than six months. The Society recommends that patients wait no longer than six months from the time of referral by their primary physician to their first assessment by a subspecialist in chronic pain management, with the proviso that shorter wait times should be targeted for certain conditions for which early intervention may be particularly beneficial (see Table). Because of lack of resources, many chronic pain subspecialists currently have long wait lists and may not be able to provide services within the recommended time intervals.

Recommended Benchmarks	
Condition	Wait time for first assessment by pain subspecialist after referral by primary physician <sup>a</sup>
Nerve Damage After surgery or Trauma <sup>b</sup>	30 days
Pain Related to Disc Problems <sup>b</sup>	3 months
Cancer pain <sup>b,c</sup>	14 days
Exacerbations or Flare Ups of Chronic Pain <sup>b</sup>	3 months
Other types of chronic pain	6 months
<p><sup>a</sup>These wait times do not include subsequent waits for rehabilitation programs, psychology-based programs, or interventional procedures that may be deemed appropriate after the initial consultation with a pain subspecialist.</p> <p><sup>b</sup>These are conditions for which early intervention may provide particular benefits for the patient. They may be considered to be "sentinels": if services for these conditions can be consistently provided within the benchmarked time interval, then care is probably being provided in an appropriate timeframe for similar chronic pain conditions.</p> <p><sup>c</sup>Service within 14 days is recommended for patients who do not have access to a palliative service or in cases in which a palliative care team has asked for a specific procedure.</p>	

### Reference

1. Lynch ME, Campbell F, Clark AJ, Goldstein D, Dunbar M, Peng P, et al; a Canadian Pain Society Task Force. Toward establishing evidence based benchmarks for acceptable waiting times for treatment of pain. Whitby (ON): Canadian Pain Society; 2006. Available: [www.canadianpainsociety.ca/WaitTimes\\_ForPainTreatment.pdf](http://www.canadianpainsociety.ca/WaitTimes_ForPainTreatment.pdf) (accessed 2007 Sept 19).

## **Definitions to Better Understand Chronic Pain Conditions as Outlined in the Table**

Dr. John Clark, Professor of Anesthesia at Dalhousie University and Medical Director of Pain Services at Capital Health (Halifax, Nova Scotia) provides explanations about the following types of pain so that they can be better understood and appreciated by the public. He has written a number of chapters in the pain management textbooks *Managing Pain: The Canadian Healthcare Professional's Reference* and *Clinical Pain Management: A Practical Guide*.

### **Nerve Damage After surgery or Trauma**

Neuropathic pain happens when nerves have been damaged. This can occur when one suffers trauma, has surgery or after some types of infection (i.e. shingles). If a nerve is damaged, this could lead to pain. When the word “acute” is used, it just means that something happened recently. If a pain lasts more than three or six months, then it is considered to be chronic.

Neuropathic pain can occur anywhere – it just depends on which part of the body has been injured. As an example, if you have a hernia repair in the groin you might have pain in the area of the upper leg or down to the pelvic area. Sometimes the pain will go away on its own and sometimes it can continue forever. After a person has a thoracotomy (an incision into the chest cavity) or a mastectomy (removal of the breast) pain can continue to be present up to 50 percent of the time. If someone has had his/her leg amputated, then there is about a 70 percent chance of having neuropathic pain after surgery.

### **Pain Related to Disc Problems**

When a disc protrudes in your lower back, it can press on a nerve and give a person pain in your low back and down your leg. This is what people typically call sciatica. Basically it means you have a disc pushing into the area where the nerve leaves the spine. This leads to pain that will be typically felt in the back, the buttock and down the leg.

Anytime that you put pressure on a nerve you can cause damage, which can then result in pain that can become permanent. Pain might also be associated with numbness, pins and needles, loss of sensation or weakness.

### **Cancer pain\*\***

There are many different types of cancers so there are many causes of pain associated with cancer.

As examples, a tumor mass can create pain by pushing on various types of tissue. If you have cancer in the bone and it is eroding the bone, you can get pain. If nerves are stretched by the tumor or are damaged by the tumor pain can occur. Pain can also occur because of the treatment for cancer; some drugs used to treat cancer can cause neuropathic pain and sometimes surgeries to cure a cancer can result in pain.

### **Exacerbations or Flare Ups of Chronic Pain**

Those who suffer from chronic pain can experience situations where their pain may be increased for a period of time. This could be brought on by over-exerting oneself on a single day or via activities over several days. These are called flare ups or flares of pain, and to have a flare up or increase in chronic pain is not unusual.

There are some circumstances when providing interventions (i.e. nerve blocks or injections) can be helpful to persons with chronic pain. In this situation it would be reasonable that persons with chronic pain should not have to wait too long for these interventions so that missing activities or work is limited and maximum function is maintained.

## **Other types of chronic pain**

There are three types of pain:

- Neuropathic pain– pain that results from damage to the nerves.
- Nociceptive pain – pain that arises from tissue damage, which includes bones, joints and muscles. Arthritis would be a good example of this type of pain.
- Combinations of neuropathic and nociceptive pain – this would include conditions such as fibromyalgia and chronic abdominal pain.

### **Useful links**

For more information concerning chronic pain, please click on the following links:

[http://www.waittimealliance.ca/waittimes/chronic\\_pain.htm](http://www.waittimealliance.ca/waittimes/chronic_pain.htm)

<http://www.canadianpainsummit2012.ca/media/11445/final%20nat%20pain%20strategy%20for%20can%2012%201511%20eng.pdf>

For more information concerning care, please click on the following link:

[http://www.waittimealliance.ca/waittimes/cancer\\_care.htm](http://www.waittimealliance.ca/waittimes/cancer_care.htm)

For more information concerning cardiac care, please click on the following link:

[http://www.waittimealliance.ca/waittimes/cardiac\\_care.htm](http://www.waittimealliance.ca/waittimes/cardiac_care.htm)

To access the Canadian Opioid Guideline, please click on the following link:

<http://nationalpaincentre.mcmaster.ca/opioid/index.html>