



FOR IMMEDIATE RELEASE

**The Canadian Pain Coalition States Urgency to Improve
Chronic Pain Awareness and Access to Multidisciplinary Treatment Options**

**The Painful Truth Survey Reveals 72% of Chronic Pain Sufferers who have sought
treatment are still in pain for 12 hours or more each day, even after many have tried several
treatments**

TORONTO, ON - October 14, 2014 – The Canadian Pain Coalition today released results of a survey of more than 1,000 chronic pain sufferers across Canada that suggest millions of people living with pain continue to suffer on a daily basis even after trying several treatment options. “The Painful Truth – The State of Pain Management in Canada,” sponsored by Boston Scientific Corporation (NYSE:BSX), found that more than a third of sufferers still struggle with routine daily tasks affecting their work and personal lives, their relationships and the ability to care for their children. The survey results point to the vital need for greater awareness about and access to chronic pain management and alternatives to current treatment to help relieve and inspire hope among people living with pain.

Chronic pain can be attributed to a variety of physical factors that can be difficult to assess and treat. The path to diagnosis often takes years, and for many, chronic pain can be a lifelong condition. It is estimated that more than one in five Canadians suffers from chronic pain, and the survey found that on average, respondents have lived with chronic pain for around six years, and one in eight have lived with the condition for more than 15 years.

“Chronic pain is often misunderstood and therefore underdiagnosed and grossly undermanaged, leaving many Canadians unequipped to cope with the debilitating and disabling effects of constant pain on a daily basis, lasting months and often years,” said Lynn Cooper, President, Canadian Pain Coalition. “The Painful Truth Report points sharply to the inadequate management of this condition. Greater awareness and

education about chronic pain, as well as access to a much broader range of care options is urgently needed to improve diagnosis and pain management in this country.”

The Painful Truth survey revealed that 72 per cent of chronic pain sufferers are still in pain for more than 12 hours each day despite having tried an average 2.4 different treatments. This outcome is compounded by having waited for nearly 18 months for a diagnosis, after which only 1 in 5 reported coming away from their first conversation with a healthcare professional with a feeling of hope.

“My pain first started when I was in my early 20s. One day I woke up with pain in my left hand and it wouldn’t go away. I saw doctor after doctor as they tried to figure out what was going on and went through a lot of trial and error. I’ve been through multiple rounds of different treatments, all in the hopes of finding some relief, especially as the pain spread throughout my body,” says Bill Woodward. “After 20 years of misdiagnoses I managed to find a great neurologist who suspected Reflex Sympathetic Dystrophy (RSD) and referred me to a pain clinic. They helped me manage my pain in a more holistic way. Now, in my mid-50s, although the condition has worsened, I am able to control my pain through a spinal cord stimulator, which has really turned my life around.”

According to the Canadian Pain Coalition, up to 30 per cent of pain may be reduced with medication, leaving room for a well-rounded pain management plan, including multidisciplinary pain management techniques and self-help strategies. Non-pharmaceutical therapies, although considered effective by specialists, are not commonly accessible for many patients.

Dr. Michel Prudhomme, President of The Canadian Neuromodulation Society, who authored the report’s foreword, says there are so many types of chronic pain that it can be challenging to understand, identify and manage them all. With more than half of patients unsatisfied by medication alone, healthcare professionals and patients must explore alternative, innovative and cost-effective technologies and treatments.

“Greater awareness and discussion among patients, their families, and healthcare professionals about the effects of chronic pain and the range of non-conventional therapeutic options, such as Spinal Cord Stimulation (SCS), Trans Epidermal Neurostimulation (TENS), and physical and psychological therapy may reduce the need for daily medicinal therapy – benefiting the patient greatly - and relieving some of the pressure on Canada’s healthcare system,” said Dr. Prudhomme.

The Burden of Chronic Pain

- Chronic pain has been associated with worse quality of life than either chronic lung or heart disease¹, it affects one in five adults in Canada², and is one of the most common conditions for which people seek medical attention³.
- The burden of chronic pain on individual sufferers is significant; with almost a third (30.4%) of respondents indicating that their chronic pain affects their ability to work. Respondents further reported that in the last year they had missed an average of eight days of work due to their condition.
- This pressure extends to the Canadian healthcare system, as research indicates that up to 78 per cent of visits to emergency rooms are due to both acute and chronic pain.³ Chronic pain specifically has been estimated to cost the Canadian taxpayers \$62 billion each year.⁴ Alarmingly, this condition costs our country more than cancer, AIDS, and heart disease combined.⁵

About the Canadian Pain Coalition

The Canadian Pain Coalition (CPC), incorporated as a not-for-profit in 2004, is a partnership of pain consumer organizations, individuals living with pain, health professionals treating pain and scientists studying more effective ways of managing pain. The goals of the CPC are to: (i) promote sustained improvement in the understanding, treatment, management and prevention of all types of pain in Canada; (ii) promote awareness of pain issues among the general public; (iii) provide educational information about pain conditions and management to people living with pain; and, (iv) to be the “National Voice of People with Pain” in discussions with government and policy makers.

CPC accomplishes these goals through its education and awareness programs in conjunction with advocating for improved access to multi-disciplinary pain management within Canada’s health systems and participating in research that improves the lives of all Canadians living with pain. For more information about the Canadian Pain Coalition visit www.canadianpaincoalition.ca.

The Canadian Pain Coalition (CPC) does not endorse or recommend any product, course of action or person related to chronic pain management. CPC recognizes that informed choice of pain management options is important.

About Boston Scientific

Boston Scientific transforms lives through innovative medical solutions that improve the health of patients around the world. As a global medical technology leader for more than 30 years, we advance science for life by providing a broad range of high performance solutions that address unmet patient needs and reduce the cost of healthcare. For more information, visit us at <http://www.bostonscientific-international.com>.

CONTACTS:

Julie Holroyde

Weber Shandwick

T: 416.642.7886

E: jholroyde@webershandwick.com

References

¹ Schopflocher, D., R. Jovey, et al. (2010). "The Burden of Pain in Canada, results of a Nanos Survey." *Pain Res Manage*: In Press. (pulled from http://prc.canadianpaincoalition.ca/en/canadian_pain_fact_sheet.html)

² Moulin, D. E., Clark, Alexander J., Speechley, M., Morley-Forster, P. K. "Chronic pain in Canada--Prevalence, treatment, impact and the role of opioid analgesia." *Pain Research & Management*. Vol 7(4), 2002, 179-184. (pulled from http://www.canadianpainsociety.ca/pdf/pain_fact_sheet_en.pdf)

³ Todd, K. H., J. Ducharme, et al. (2007). "Pain in the emergency department: results of the Pain and Emergency Medicine Initiative (PEMI) Multicentre Study." *J Pain* 8: 460-466 (pulled from http://www.canadianpaincoalition.ca/media/canadian_pain_fact_sheet_22_10_10_en.pdf)

⁴ Von Baeyer, C. (2011). "Interpreting the high prevalence of pediatric chronic pain revealed in the community surveys." *Pain*. 152:2683-2684.

⁵ Phillips, C. J. and D. Schopflocher (2008). *The Economics of Chronic Pain. Health Policy Perspectives on Chronic Pain*. S. Rashedi, P. Taenzer and D. Schopflocher. UK, Wiley Press.