

Abstract

Introduction: The purpose of this study was to describe knowledge, experience, and beliefs about pain among Texas residents as part of a statewide effort to improve pain management.

Methods: These data were obtained from a 2006 statewide telephone survey of adult full-time Texas residents designed to collect information about individuals' knowledge, experience, and beliefs regarding pain and pain management.

Results: Of the 503 adults who participated in this study, half were female, 53% were white, 28% were Latino, 12% were black, and 39% were 31-50 years of age. Fifty-one percent of respondents indicated that they experience pain monthly, and of these people, 43% have pain everyday, 55% have had pain for at least three years, and 63% have moderate to severe pain. Consequences of pain included sometimes feeling anxious, irritable or depressed (66%), loss of sleep (61%), negative effect on relationships with loved ones and friends (35%), inability to dress myself, drive a car, or go shopping (34%), and feeling hopeless and alone (29%). The most common sources of pain among study participants were arthritis (30%), back pain (23%), and muscle pain (10%). While 57% of persons with pain had sought care, common reasons for not seeking pain included a lack of understanding that untreated pain could worsen (75%) or that pain should be treated as a separate condition (71%), fear of the underlying cause (67%), belief that pain is just a normal part of life (59%), did not know where to go for help (58%), and fear of addiction, embarrassment, or did not want to complain (57%). Furthermore, only 60% of study participants were very confident that their pain would be properly assessed and promptly treated.

Conclusions: These data provide insight into the epidemiology, economics, and consequences of pain among Texas adults, and indicate opportunities to improve care for persons with pain.

Background & Objective

Ensuring outstanding pain management is an important goal in healthcare. For many people in the United States (US), however, optimal pain relief remains a goal, rather than a reality. In 2007, the Wisconsin Pain and Policy Studies Group progress report card rated Texas' state pain policy as a C, unchanged from 2000. The purpose of this study was to describe the knowledge, experience, and beliefs about pain among a sample of Texas residents as part of a statewide effort to improve pain management.

Methods

- In 2006, this cross-sectional cohort study of adult Texas residents was conducted.
- To frame the sample, US Census data and the 2005 American Community Survey were used, controlling for geography and sex.
- Random digit dialing was used to contact enough persons to provide a sample of 503 individuals.

Table 1. Demographics (%)

Age (y)	
18-25	12
26-35	14
36-45	22
46-55	19
56-65	15
66 or older	15
Did not answer	2
Race or ethnicity	
African-American	12
Asian or pacific islander	1
Hispanic or Latino	28
Native American	1
White	53
More than one	2
Female	50

Table 2. Prevalence & Severity of Pain (%)

Prevalence of pain on a monthly basis	49
Frequency of pain	
Every day	43
Almost every day	14
Several times a week	16
Several times a month	25
No opinion	2
Duration of pain	
More than 3 years	55
1-3 years	24
6-12 months	7
3-5 months	6
1-2 months	7
No opinion	1
Severity of pain	
Severe	13
Moderate to severe	28
Moderate	35
Mild	23
No opinion	1

Table 3. Causes and Effects of Pain (%)

Primary causes of pain	
Arthritis or joint pain	30
Back	23
Musculoskeletal	10
Headache or migraine	6
Cancer	2
How pain affects daily life	
Feel anxious, irritable, or depressed	66
Lose sleep	61
Negatively affects relationships	35
Loss of functioning	34
Feel hopeless and alone	29

Table 4. Treatment Issues (%)

Aware of a pain treatment specialist in my community	39
Have sought pain treatment	57
From family physician	39
Specialist	25
Hospital, clinic, or specialty clinic	30
County, city, or state agency	2
Other	3
Did not answer	1
Have seen more than 1 healthcare providers for pain	61
Reasons Texans do not seek care	
Do not realize untreated pain can worsen	75
Do not recognize pain can be a separate condition	71
Fear of underlying cause	67
Believe pain is a normal part of life and aging	59
Do not know where to go for help	58
Fear of addiction	57
Embarrassment; don't want to be seen as a complainer	57

Conclusions

- These estimates indicate that about 11 million Texas have noteworthy pain at least monthly.
 - Equivalent to 20% of 2006 Texas population
- These data provide insight into the epidemiology, economics, and consequences of pain among Texas adults, and indicate opportunities to improve care for persons with pain.