



THE  
AUSTRALIAN  
PAIN SOCIETY

## **MEDIA RELEASE**

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# **Waiting in Pain: Promising improvements but ways to go**

*The Waiting in Pain project (WIP1) was first conducted between 2008 and 2010 by the Australian Pain Society and surveyed Australian pain services providing outpatient care to adult and paediatric clients. Results from this inaugural study in Australia showed significant disparities between wait times in publicly funded outpatient adult pain management service compared to privately funded services. Further differences were seen in the level of service provision for those who live in rural areas compared to urban adult client constituents. Eight years later, a repeated survey, Waiting in Pain 2 (WIP2) was conducted. Read on for the summary of the changes in pain management services.*

### **Pain remains a great burden on our healthcare system**

Persistent or chronic pain remains one of Australia's largest (and arguably undertreated) health problem. It is also the country's third most costly health condition, estimated to have an economic impact of A\$139 million each year.

Timely and coordinated multidisciplinary treatment, which includes both physical and psychological methods have been shown to be the best-practice care for individuals, and estimated to halve the economic impact of this condition, yet current funding models are not supporting primary health care and great reliance remains on the tertiary centres.

The Australian Pain Society (APS) embarked on the inaugural Waiting in Pain (WIP) project in 2008 and surveyed services providing outpatient care, to better understand the service structures and treatment access issues, in particular, WIP sought to examine the wait times, clinical activity and funding sources of Australian persistent pain services.

Results from the original WIP project showed prolonged wait times of >18 months for some clinics, suggesting that pain services were unable to meet the level of clinical demand. This was significantly more pronounced within the public sector compared with private services, with wait times within public services 5 times more than private sectors. Such unacceptably long wait times have been shown to result in physical and psychological deterioration for individuals awaiting specialist care pointing to the importance for access to care.

### **The vulnerable are left waiting**

Commencing in 2016 the APS repeated this survey and whilst paediatric and adult pain services had increased overall, resulting in a >15% increase in the number of people who are able to access a new appointment with a specialist pain service each year, this was only in line with population growth.

Allied health-led multidisciplinary pain management programs have become more common over time which is a promising move towards more integrated multidisciplinary care. However, despite these improvements, wait times ranged from 6 months to 3 years, suggesting that the vulnerable and disadvantaged individuals continue to be left waiting.

“The key priority should be to build easily accessible pain services within primary healthcare so that the burdens on tertiary services are reduced”, says Joyce McSwan, President of the Australian Pain Society, who is also a pioneer in innovating and implementing models of care in pain management within the primary care sector.

“Not only is it cost effective, but it is efficient and sustainable. Primary Health Network collaborations are an important part of the solution and standardised models of care ought to be scaled for better access to meet the growing need.” reflects Joyce.

The Australian Prevention Partnership Centre has produced some helpful resource to support Primary Health Network to reduce the burden of pain.

<https://preventioncentre.org.au/resources/supporting-phns-to-reduce-the-burden-of-chronic-pain/>

### **About the Australian Pain Society**

The Australian Pain Society is a multidisciplinary association whose purpose is to advance pain management through education, research, and advocacy for transformational improvements in clinical care. Our national membership is drawn from over 40 health disciplines covering a variety of medical, nursing, and allied health perspectives. The APS Pain in Childhood Special Interest Group aims to share and improve professional and scientific knowledge regarding pain through all phases of development from birth to transition into adulthood.

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