

Perceived Health and Impact of Pain Among Veterans Prescribed Long Term Opioids

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Background

The Prescription Opioid Safety Trial (POST) is an ongoing research trial exploring the use of an intervention to increase opioid safety in Veterans at the Ann Arbor VA primary care clinic

- 44% of the US military population reports chronic pain compared to 26% of the general population¹
- Veterans are more frequently prescribed opioids (15% versus 4% of the general population)¹
- Patients prescribed >20 morphine equivalent milligrams (MEM) are at an increased risk of falling, injury, accidental overdose, addiction, withdrawal, etc.²

Therefore, it is critical to address pain management in this unique population

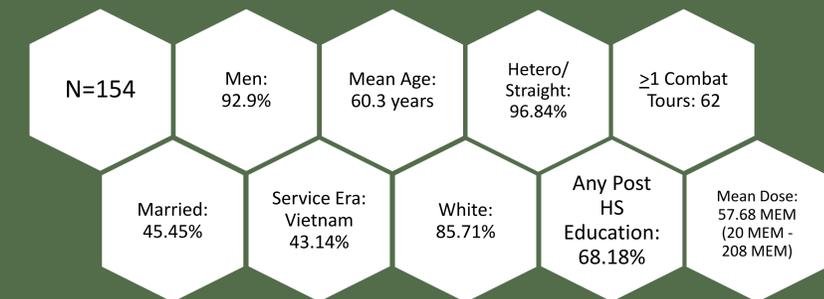
Objectives

- Examine the relationship of the impact of pain and participants' perceived health
- Examine this relationship in connection to service era and combat tours served



Methods

- Collected cross-sectional survey data from 154 participants with 20MEM or more
- Veterans rated their overall health as Excellent, Very Good, Good, Fair, and Poor using a question from the Veterans RAND 12-Item Health Survey (VR-12)
- Participants completed the Brief Pain Inventory (BPI) to assess pain's impact on their daily activities in seven categories (general activity, mood, walking ability, normal work, relations with other people, sleep, and enjoyment of life)
- VR-12 scores were analyzed individually and grouped as Excellent, Very Good, Good versus Fair and Poor
- Demographics, as well as the association between perceived health and impact of pain, were analyzed:



Results

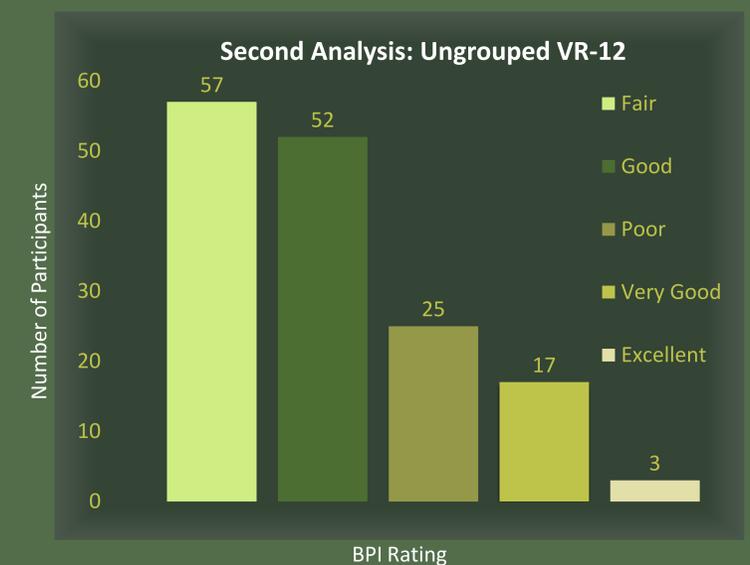
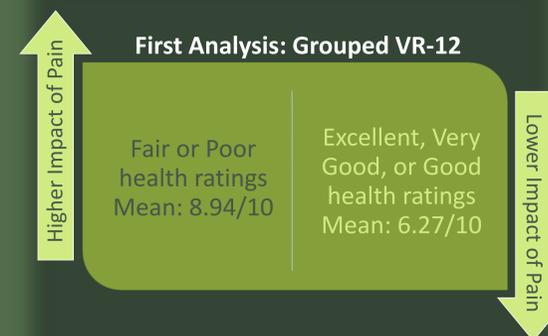
First analysis: Grouped VR-12 Answers (p=0.0002)

- VR-12 ratings of perceived good health were associated with lower pain interference scores on the BPI
- Conversely, VR-12 ratings of perceived poor health were associated with higher pain interference scores

Second analysis: Ungrouped VR-12 Answers ($\chi^2 < 0.0001$)

- A poor health rating is associated with the greatest mean BPI score (7.30/10, SD 1.73)
- An excellent health rating is associated with the lowest mean BPI score (3.05/10, SD 3.68)

No significant association was found when comparing pain to service era or number of combat tours



Conclusions

- Those who rated their health to be of a higher quality on the VR-12 report experiencing less of an interference and impact of pain on their daily life
- Veterans who rated a lower quality of health on the VR-12 reported a higher level of interference from pain in daily activities
- Veterans in this study most commonly reported their health as Fair (n=57), with Excellent as the least common (n=3)
- The above findings highlight the centrality of pain interference to perceived health
- There was no significant relationship between the impact of pain and the service era or number of combat tours served
- Since Veterans report such elevated levels of pain compared to the general population, it may be useful to explore what factors influence their perception of pain and more direct links to improve their health

Limitations

- This study population is a very specific subset of Veterans in the AAVA primary care clinic, selected based on prior opioid pain research
- Overall sample size is not statistically representative of Veterans

References

1. Toblin RL, Quartana PJ, Riviere LA, Walper K, Hoge CW. Chronic pain and opioid use in US soldiers after combat deployment. JAMA Intern Med. 2014;174:1400-1.
2. Bohnert ASB, et al., (2011). Association between opioid prescribing patterns and opioid overdose-related deaths. JAMA, 305(13), 1315-1321.

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