Integrated Care Approach to Chronic Pain

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Disclosure of Interests

Research Support

1. Allergan
2. General Clinical Research Center
3. Ipsen
4. Medtronic
5. Vanderbilt University
6. Robert Whitson
7. Jeff Martin

Consultant

Consultant
– Allergan, Ipsen, Revance

Clinical Trials
– Allergan, Intec

Stocks or Equity
– None
AfPA Mission

The Alliance for Patient Access (AfPA) is a national network of physicians whose mission is to ensure patients access to approved therapies and appropriate clinical care.

AfPA accomplishes its mission through educating Health Care Providers on policy priorities and training them to be effective advocates for their patients.
Physicians Advocating for Patient Access

AfPA in Action

To promote a better understanding of the benefits of patient access to approved therapies and appropriate clinical care, the Alliance for Patient Access, and the affiliated Institute for Patient Access, sponsor physician working groups, health policy initiatives, workshops, conferences, stakeholder coalitions, and the production of educational materials. To view the AfPA in action visit one of the web pages highlighted below.

- National Physicians Biologics Working Group
- Pain Therapy Access Physicians Working Group
- Oncology Therapy Access Physicians Working Group
- Physicians Neurological Disease Working Group
- Respiratory Therapy Access Working Group
- Hepatitis Therapy Access Physicians Working Group
Alliance for Patient Access

- Founded in 2006
- 501(c)(4) nonprofit
- Advocating for patient access
- Over 1000 physicians and healthcare providers
- Over a dozen specialties
- 35 states
- Policy-minded physicians and healthcare providers
- Active in societies and professional organizations
Institute for Patient Access

- Founded in 2012
- 501(c)(3) non-profit
- Policy research organization
- Quasi Think-Tank (“as if almost”)
- Offer the physician’s perspective to promote informed policymaking
- Produces educational resources
  - Blog, white papers, policy briefs, videos, etc.
AfPA Working Groups

**Purpose:** Bring together healthcare providers who share a common therapeutic interest and/or access policy challenge

**Objective #1:** Develop educational resources that can be used to encourage informed policymaking

**Objective #2:** Facilitate advocacy in order to lend the healthcare provider’s perspective to policy discussions
Pain Therapy Access Issues

• Balanced policies that protect access for patients with legitimate medical need
• Abuse Deterrent Therapy Parity
• Access to Integrative Care
• Prescribing guidelines
WHY DOCTORS NEED TO KNOW WHEN PHARMACISTS SUBSTITUTE BIOLOGICAL MEDICINES

At least 50% of all medications dispensed in hospital pharmacies are biological drugs. Physicians are often unaware of these substitutions because they are not always documented in the patient’s medical record. In addition, substitution of biologicals by pharmacists can lead to significant patient safety risks.

BIOPHARMACOLOGY OF BIOMEDICINES

Biological medicines are complex and highly specific compounds that are produced in living organisms and act by interacting with specific receptors in the body. Unlike small-molecule drugs, which are typically synthesized using chemical reactions, biological medicines are manufactured using living cells, which have the ability to replicate and produce large quantities of specific proteins.

PHYSICIAN NOTICE PROMOTES PATIENT SAFETY

Physicians are encouraged to provide patients with explicit information about the differences between biological and small-molecule drugs. This can be done through patient education materials, during consultation, or through electronic prescribing systems that alert the physician to potential substitutions.

Prescription Pain Medication: Preserving Patient Access While Curbing Abuse

As physicians, it is our duty to ensure that our patients’ pain is adequately treated. In light of the opioid crisis, it is crucial to have clear guidelines for the appropriate use of prescription pain medications.

Information From The Pain Therapy Access Physicians Working Group

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The Physician’s Perspective: A Health Policy Brief from the Institute for Patient Access

Prescription pain medications can be safely and effectively used to manage pain and improve quality of life, but the widespread misuse and abuse of opioids have led to increasing concern about their misuse and abuse.

Why Doctors Need to Know When Pharmacists Substitute Biological Medicines

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What are Biologics?
by Jasueca Terman • 1 year ago • 445 views
What are biologics? What are biosimilars?

The Challenges in Manufacturing Biologics
by Amgen • 11 months ago • 5,322 views
Biologic therapies are typically derived from living organisms. They are made by:

AfPA Chairman Dr. David Charles on Biologics
by AfPApatientaccess • 1 year ago • 21,863 views
Neurologist Dr. David Charles, Chairman of the Alliance for Patient Access,

Qhemet Biologics Products Review & Twist Take Down
by Candace Shepard • 2 months ago • 678 views
Read Me—— Been gone for a few weeks - dealing with a cold, family, work...
Capitol Day Fly-in

2011 LEGISLATIVE DAY FLY-IN
Biotechnology INDUSTRY ORGANIZATION
MAY 3-4, 2011

health
intellectual property
food & agriculture
industrial & environmental

AfPA Alliance for Patient Access
Comment & Testimony

- FDA & CMS
- Letters to state legislators
- Meeting with state and federal policymakers
- Hearing testimony
Conferences & Panels
Commentary: Physician: Stop the attack on pain pills

By KELLY ERLICA, M.D.

As awareness of opioid misuse and addiction increases, both police and public perception have come to view pain medications as a desirable and lucrative trend.

Few can deny the problem of addiction. But we must make room in Georgia’s addiction and public dialogue for the legitimate, physician-directed use of opioids. In limiting access for addicts, lets not also impede access for patients who need those drugs for justifiable medical purposes.

Greets, we often hear about those patients. Instead, news headlines focus on the grim and often-gruesome details of people who obtain, consume, distribute or sell these drugs—legally—with unfortunate outcomes. These stories reflect the reality of pain medication addiction, but they do not legitimize the misconception that only addicts use opioids.

Consider those patients, cancer patients undergoing chemotherapy or patients with serious injuries who wish to reduce the recovery period in comfortable ways. These patients often suffer from chronic, intense pain. Pain control like ours even helps those with...
Biosimilars Need Distinguishable Names

By Robert Yapundich, M.D.

Biosimilars are the fastest growing segment of new medical breakthroughs. The hope is for biosimilars to be brought to market through a newly developed pathway for U.S. approval, ultimately bringing down the costs associated with these medications.

In the Name of Patient Safety: Why Biosimilars Need Distinct Identifiers

By David Charles, M.D. and Amanda Corgiachetti, Blog Editor

An opponent to distinct names for biosimilar medications has petitioned the Food and Drug Administration with a new argument. Same old, same old works just fine. The National Council for Prescription Drug Programs (NCPDP) recently told the FDA that assigning distinct names to biosimilars will require adjusting the code in some pharmaceutical and drug compendia databases. The process would be burdensome, the organization claims, so it's better to maintain the status quo.
Social Media Networks
Want quality care? Keep physicians informed

Mar 27, 2014, 4:20pm EDT

[Image: Twitter]

Dr. Brad Klein of Abingdon, PA looks at #biosimilars and #physician notification in bizjournals.com/philadelphia/b ... #PAleg #biologics #SB405

[Image: Twitter]
Integrated Care Approach to Chronic Pain

David Charles, MD
Overview

• Integrated Care for Chronic Pain
  – Access Challenges

• Multi-modal Analgesia
  – Post-operative Pain

• Curbing Abuse Without Impeding Legitimate Access
  – Misuse, Abuse, & Diversion
  – Prescription Monitoring Programs
  – Pain Management Clinics
  – Beyond Opioid Monotherapy
The Experience of Chronic Pain

- Physical sensation of pain
- Daily lifestyle challenges
- Occupational challenges
- Depression
- Anxiety
- Sleep disturbances
Treatment Options

• Sensation of pain
• Lifestyle challenges
• Occupational challenges
• Depression
• Anxiety
• Sleep disturbances

• Medication; local injection
• Occupational therapy, physical therapy
• Occupational therapy, physical therapy
• Antidepressants; psychological therapy
• Psychological therapy
• Exercise; medication
Multiple Symptoms  
Multiple Treatments

Integrated Care Addresses the Multiple Features of Chronic Pain

Pain is multifaceted. So is its treatment.

- Occupational therapy
- Physical therapy
- Local injections
- Anti-depressant medications
- Psychological therapies
- Medications
- Exercise
- Sleep disturbances
- Anxiety
- Depression
- Occupational challenges
- Physical pain sensation
- Daily lifestyle challenges
Access Barriers

• Fee-for-service reimbursement
  – Integrated care is time-consuming
  – Pressured to see as many patients as possible

• Insurers’ short-term perspective
  – Opioid-only regimen: $
  – Integrated care regimen: $$$
  – Mayo Clinic comprehensive outpatient program
    • Reduced medical costs by 90% over 18 month

• Need for immediate relief

• Primary care limitations
Post-operative Care

• Opioid side effects can complicate recovery
  – Nausea/vomiting
  – Respiratory depression and Ileus
  – Sedation
  – Falls
Multi-modal Analgesia

• The combination of two or more analgesics
• Treat pain through different pathways
  – Local anesthesia
  – Regional anesthesia
  – Nonsteroidal anti-inflammatory drugs
  – Opioids
Multi-modal Analgesia

Pain Treatment Strategy

Mild
• Acetaminophen
• NSAIDs
• Local anesthetics
• Cyclooxygenase-2 inhibitors

Moderate
• Intermittent opioid injections

Severe
• Neve blocks
• Additional opioids

Access Challenges

• Provider Habit
• Local anesthetic are short term
• Supplementation needed with pumps
• Monotherapy: $
• Multi-modal Therapy: $$$
• Plan designs favor low-cost generics
Curbing Abuse Without Impeding Legitimate Access
Misuse, Abuse & Diversion

• ~50 people die each day from prescription opioid overdose

• Leading cause of injury death in 2013.

• Overdose caused more deaths than traffic accidents.

• 2.5 million emergency department visits per year

Centers for Disease Control and Prevention
Effective Policy Solutions

Intended Effects
• Reduce misuse, abuse, & aversion
• Reduce overdoses

Unintended Consequences
• Legitimate patients feel stigmatized
• Legitimate pain centers close
• Providers stop prescribing
• Patients struggle
Abuse-deterrent Pills

• One component of a policy solution that targets abuse without impeding patient access
Beyond Opioid Therapy

• Effective, comprehensive alternatives
• Access and insurance coverage for:
  – Integrated care for chronic pain
  – Multi-modal analgesia for post-operative pain
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Men 'become more accident prone in front of beautiful women'

By Daily Mail Reporter
Last updated at 10:15 AM on 04th March 2010

Men become accident prone at the sight of a beautiful woman, scientists said yesterday.

Research shows that just looking at an attractive female makes them more likely to indulge in 'physical risk-taking' which results in embarrassing failure or even injury.

The change in behaviour is triggered by a surge in the male hormone testosterone which makes men 'throw caution to the wind', according to psychologists at the University of Queensland, Brisbane, Australia.

The results were found by researchers who observed the behaviour of male skateboarders as they were watched by attractive women.