The scientific framework of SIP 2011 is designed under the responsibility of the European Federation of IASP® Chapters (EFIC®). The scientific programme is endorsed by a number of patient advocacy and scientific organisations. The pharmaceutical company Grünenthal is responsible for logistic support, preparation and organisation.
Societal Impact of Pain

In 2010, pain management experts from 84 countries issued a declaration directed at governments worldwide asserting that access to pain management is a fundamental human right¹.

Although acute pain may reasonably be considered a symptom of disease or injury, chronic and recurrent pain is a specific healthcare problem, a disease in its own right². Being a disease in its own right, pain is not just an indicator of an underlying disease or damaging process, but one which extracts a great toll on individuals and society³.

Pain is a major healthcare problem in Europe. According to a 2006-2007 survey commissioned by the European Commission’s Health and Consumer Protection Directorate General in the EU-25⁴, an average of 25% of citizens experienced pain affecting muscles, joints, neck or back lasting for 3 months or more which affected their ability to carry out the activities of daily living (range 13% EL - 35% AT)⁵. The prevalence of patients suffering from severe pain in Europe is approximately 5% (range: 1.5% IT – 6.7% UK).⁶ Painful states of the musculoskeletal system constitute more than 2/3 of painful states in primary care. Viewed from a primary care perspective, pain has a great impact on GPs' day-to-day activities and the health economy in general⁷.

The burden of suffering that pain imposes on individuals, and the enormous costs that society has to bear as a result, calls for policymakers and decision-makers alike to adopt a much wider, strategic perspective in their deliberations regarding service provision and resource allocation.

⁴ the EU-25 Member States of the European Union before enlargement are in 2007.
⁵ EU Barometer 272e; survey requested by Directorate General SANCO and coordinated by Directorate General communication
The cost of pain

Despite the high prevalence, the costs incurred and related to pain are sparsely documented. Nevertheless, in some countries data or research is available. In 2006, the Belgian Federal Knowledge Centre in Healthcare (KCE) estimated the direct cost of back pain in Belgium to be €272 million, representing a spending of as high as €1.6 billion\(^\text{8}\) for the global burden of lower back pain.

The very high economic relevance of back pain as a disease was also confirmed in a German study\(^\text{9}\). Extrapolating results to the German adult population between the ages of 18 and 75 years, led to an estimated €48.96 \text{billion} in direct and indirect back pain-related expenditures, which equates to 2.2% of the German GDP\(^\text{10}\). Although experts are discussing the exact numbers, they agree that the impact of pain-related costs on society is very high.

In the case of pain, policymakers must be made fully aware of the different aspects associated with the costs of pain and its management\(^\text{11}\). Notably:

1. The cost of interventions and therapies for treating pain and securing pain relief (e.g. drug costs and staff costs)
2. The costs that are incurred as a result of ineffective interventions being provided (e.g. costs of additional GP consultations)
3. The cost to health service and patients and their families due to a lack of appropriate facilities within locality (e.g. costs of accessing alternative therapies);
4. The costs resulting from inappropriate self-medication and treatment by patients (e.g. costs of treating overdoses)
5. The cost of treating and preventing adverse events that arise as a result of prescribing decisions (e.g. costs of GI bleeds)
6. The costs of disability claims resulting from people’s inability to work;
7. The cost to economy of reductions in productivity and absenteeism;
8. The cost of providing social care and support to people suffering with pain (e.g. costs of home care and respite care);

\(\text{8 Chronische lage rugpijn, KCE reports vol.48A, Federaal Kenniscentrum voor de gezondheidszorg, Centre fédéral d’expertise des soins de santé, 2006}\
\(\text{9 Wenig CM et al., Costs of back pain in Germany, Eur J Pain (2008), doi:10.1016/}\
\(\text{10 In 2007 the German GDP was €2428.20 bn – (source: Bruttoinlandsprodukt, Vierteljahres- und Jahresangaben - Statistisches Bundesamt). The total expenditure on health in 2007 was 10.4% of the gross domestic product (GDP) (source OECD Health Data;}\
\(\text{http://stats.oecd.org/Index.aspx?DatasetCode=HEALTH} )\
\(\text{11 Health Economics: an introduction for health professionals; Ceri J. Phillips; 2005} )\)
9. The cost of informal care provided by families (e.g. loss of earnings);
10. The cost of intangibles associated with the deterioration in the Quality of Life of patients and their families.

The magnitude of the chronic pain epidemic in terms of human suffering and costs to society are well known in the field of pain medicine. However, they are not widely appreciated within the larger biomedical community, among policy makers and the public at large.

It is vital that pain management is moved higher up the political agenda and features more prominently in government policies across all EU countries. It is also essential for best practice and quality care to adopt a monitoring approach, involving all those who have an interest in preventing ill-health at work, treating ill-health and rehabilitating those who have suffered from pain.

**Symposium “Societal Impact of Pain” 2010**

In May 2010, a high profile group of almost 200 health specialists and representatives from Europe’s highest ranking health authorities gathered in Brussels to discuss the "Societal Impact of Pain" (SIP). The objectives of the symposium were to discuss the key challenges, goals, and policy instruments with budget holders, strategic decision makers and representatives of stakeholder organisations to improve pain care in Europe.

The symposium saw a lively debate on interesting projects initiated in many countries to investigate the economic factors related to the burden of pain both on patients and the society and suggested future innovations. Unfortunately, the knowledge gained and management instruments developed locally developed are still too rarely shared amongst healthcare authorities and stakeholders throughout Europe. There was a broad consensus that treated pain patients cost national governments, economies and societies much less than untreated patients do.

With the SIP 2010 symposium, change has begun. Awareness was raised on the fact that the Societal Impact of Pain represents a huge social burden due to the high pain-related costs that governments are constantly called to deal with, including absenteeism, disability allowances, assisted care, informal and family care, amongst others. In this respect, much more still needs to be done.
2nd Symposium “Societal Impact of Pain”
Brussels, 3 and 4 May 2011

In 2001, EFIC presented its declaration on “Chronic Pain as a Major Healthcare Problem, a Disease in its Own Right”. The declaration was presented at the European Parliament after endorsement by the 25 European Chapters of the International Society for the Study of Pain.12

In 2011, 10 years later, EFIC and Grünenthal have committed to organise and support the 2nd SIP symposium to be held in Brussels on 3 and 4 May 2011. The event will provide an opportunity for key stakeholders to network, exchange best practice and create alliances for future collaborations on improving pain care. Representatives from national and European patient and health professional associations as well as academics will be able to put forward their ideas and experiences with leading EU and national policy makers, including representatives from national payers and ministries, European Commission officials and Members of the European Parliament.

Together with the support, input and advice by the host, Dr Jiří Maštálka MEP, the scientific framework of the symposium is designed under the responsibility of the European Federation of IASP® Chapters (EFIC®). Grünenthal is responsible for logistic support, preparation and organisation of SIP 2011.

The symposium is a two-day event with presentations, workshops, and panel discussions. The symposium will be structured in a way to give each participant some initial common scientific insight on the topic. In the two plenary sessions the international context of pain care will be outlined. In the workshops, we will work towards practice-oriented recommendations to increase the efficiency of policy measures for pain care. Subsequently, all participants are invited to take part in the workshops, where they can contribute with their personal knowledge and professional experiences.

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The format of the workshops will be interactive with different key note speakers representing various areas. In order to create an optimal environment for discussion, we have asked several persons to help in the following roles:

- **The chair** is expected to ensure the organisation of the workshop, including the reporting and time keeping

- **The secretary** ensures the briefing of the speakers and secures the reporting process

- **The moderator** is expected to monitor the length of the presentations and stimulate the discussion during the workshop

- **The rapporteur** will summarise the findings and produce an overview of the outcome of the discussion which will be presented at the final plenary session

- **The speakers** are requested to be as clear and concise as possible, while trying to leave some curiosity in the audience, and give as much input on the topic as possible, especially during the workshops.

Following the reports from the workshops, a facilitated discussion will take place, taking each topic in turn and inviting the audience to come up with more ideas and opinions on how to fill the gaps in knowledge and data.
Draft programme
SIP 2011 - future access to pain treatment

Tuesday, May 3rd
13:00 – 15:00 Setting the stage – Pain, an unmet societal need?
The first plenary session will be opened by Dr. Jiri Maštálka MEP and EFIC President, Prof. Giustino Varrassi. The following speakers will set the tone for the debate on the societal need of pain care.
15:00 – 18:00 Society’s perspective: painfully dealing with multiple interests
The second plenary session will focus on the requirements and motivations of different stakeholder groups involved in policies affecting pain care.
20:00 Keynote speaker: bridging health inequalities
In this keynote speech the EU context of health inequalities related to pain care in an aging society will be outlined.

Wednesday, May 4th
08:30 – 12:00 Parallel workshops
WS 1 Consumers, costs or patients: dealing with pain on a daily base
Workshop 1 will investigate the requirements and health inequalities in pain care from the consumer and patient perspective in an ageing society. We will further investigate the need to tackle injustice and inequalities in pain care at all policy levels. Issues discussed will include pain in health technology assessments, pain affecting the societal environment such as in (un-)employment and the identification of barriers to appropriate pain care.

WS 2 Pain policy; Ensuring access to pain treatment
This workshop intends to examine the efficiency of policy measures and regulations aimed at the elimination or reduction of health inequalities and barriers surrounding pain care. Statements will be used as a reflection of participants and panel members on how the regional and local level could move forward and build on what already exists. The outcome will be a consensus paper which will be presented at the plenum on day 2.

WS 3 Pain - Numbers, facts and figures
Workshop 3 will focus on evidence-based initiatives in pain care and the evaluation of their implementation. Proof is provided by examples of cross-sectoral initiatives and practical experiences. Epidemiology, economics and outcome measurements will play an important role. The outcome of the workshop will be a proposal for a minimal set of international outcome parameters to be used in the EU, as recommended by EFIC.

WS 4 Healthy aging; Pain, ethics and society
Key note presentations on palliative care, care for elderly, pain and healthy aging will open the debate on pain care across all stakeholder groups. The workshop will result in a White Paper on pain care and healthy ageing.

WS 5 What does best practice in pain management look like?
Key note presentations will be given on promising projects, initiatives and requirements from consumers and patients which reflect how the evidence base on effective ways to tackle pain related can be used for benchmarking pain care in the EU. The workshop will result in an overview of very inspiring light house projects.
WS 6  Pain care in the future, societal requirements
The possibilities and promises of evidence-based medicine versus personalised or stratified medicine in pain management will be the focus of this workshop. As a result, participants will have a clearer idea about the benefits of evidence-based medicine versus personalised or stratified medicine in pain management.

13:00  Workshop summaries
The rapporteurs of all workshops will summarise their discussions and findings in a short presentation.

14:00  Future outlook patient access to pain treatment
In this session, a paper prepared in advance by several stakeholder groups and in workshop 2 will be discussed and presented to EU policy makers.

15:30  Summary and closing remarks
The meeting will be closed by Dr. Jiri Maštálka MEP and EFIC President Prof. Giustino Varrassi.

16:00  End
Registration
We wish as many stakeholders as possible to be in a position to attend this symposium. However due to the limited amount of available places, registration is restricted to active healthcare budget holders, policymakers and strategic healthcare decision-makers in the area of pain and pain treatment. In order to secure participation, early registration is strongly advised.

Participant registration
For registration see: http://www.regonline.com/SIP-2011-registration
You will be contacted shortly after your registration submission to confirm your attendance and arrange payment options.
If you have any questions, please contact Randa Becker at randa@r-events.com or tel: +32 473 291 361.

Hotel Accommodation & Delegate Assistance
Please note that all costs incurred during your stay are your responsibility. We have negotiated special rates for a limited number of guest rooms different hotels in the City Centre for delegates wishing to stay the night before the Workshop (3 May). For assistance in travel arrangements or accommodation bookings please contact Randa Becker at randa@r-events.com or tel: +32 473 291 361.

Abstract submission
The scientific framework of the symposium is designed under the responsibility of the European Federation of the International Association for the Study of Pain (IASP®) Chapters (EFIC®).
Interested executives involved in strategic decision making on pain-related issues from the perspective of national healthcare systems, healthcare authorities, insurances, budget holders as well as healthcare professionals, patient and consumer representatives are invited to submit an abstract per email to the SIP 2011 secretariat at: randa@r-events.com.
The meeting language for presentations, workshops and discussions is English.

Speaker registration
Registration fee: No fee is required for participants who have an active role in the symposium (e.g. speakers, moderators, workshop reporters or poster presenters).
Online registration: http://www.regonline.com/SIP-2011-speaker
You will be contacted shortly after your registration submission to confirm your attendance. For further info, please contact Randa Becker at randa@r-events.com or tel: +32 473 291 361.

Speaker Information
All speakers are requested to deliver their presentation at least 15 minutes prior to the session start time to R-Events. All presentations submitted to R-Events by the specified advance deadline are pre-loaded onto the session room computer. If you
do not submit your presentation in advance, please bring your presentation on a USB/flash drive and R-Events staff will assist you with loading your presentation. The meeting language for presentations, workshops and discussions is English.

Sponsoring and support
Consumer, patient, scientific and physician organisations, healthcare authorities or representatives of national healthcare systems wishing to support the platform “Societal Impact of Pain” are invited to contact Norbert van Rooij - email: Norbert.vanRooij@grunenthal.com or tel: +49 241 569 1380.

Poster presentation Information
There will be a limited possibility to present posters. For more information please contact Randa Becker at randa@r-events.com or tel: +32 473 291 361.

Exhibitor Opportunities
There will be a limited possibility to present your organisation and services to a European representation of the top healthcare decision-makers from a variety of pain-related environments including clinical practice, government agencies, academia and managed care. For more information please contact Randa Becker at randa@r-events.com or tel: +32 473 291 361.

SIP 2011 Venue
European Parliament
Rue Wiertz / Wiertzstraat
B- 1047 Brussels
Belgium

Getting to from Midi Station (Eurostar or Thalys):

From Brussels National Airport

Parking

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The scientific framework of the symposium “Societal Impact of Pain” 2011 is designed under the responsibility of:

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With special thanks to our host, Dr. Jiří Maštálka MEP

It is with great honour and pleasure that the 2011 SIP symposium will be held in the European Parliament. Dr. Jiří Maštálka is a strong supporter of the initiative and has kindly accepted to host the symposium on the “Societal Impact of Pain” 2011.

Dr Maštálka is a European Parliament Quaestor and a member of the Committee on Legal Affairs, the Delegation to the EU-Moldova Parliamentary Cooperation Committee, the Delegation to the Euronest Parliamentary Assembly, and a substitute of the Committee on the Environment, Public Health and Food Safety.

Dr Maštálka is a medical doctor by profession, studying at the General Medical Faculty at Kiev Medical Institute.

From 1995 to 1999, he was a member of the executive board of the central committee of KSČM (Communist Party of Bohemia and Moravia) and, from 1993 to 2003, was the Chairman of the KSČM town committee for Plzeň City.

From 1994 to 1998, Dr Maštálka was a member of Plzeň City Council, a member of the Federal Assembly of the Czechoslovak Federal Republic (1990-1992), member of the Chamber of Deputies of the Parliament of the Czech Republic (since 1996), and Vice-Chairman of the Committee for Social Policy and Healthcare (2002-2004).

Between 2003 and 2004, Dr Maštálka was an Observer at the European Parliament and a member of the Chamber of Deputies’ delegation to the Council of Europe (since 2002).
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The scientific program of the symposium “Societal Impact of Pain” 2011 produced by EFIC®, is endorsed by:

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Further information at:

www.SIP-Meetings.org