What is chronic pain?
Chronic, persistent or long-term pain is pain continuing beyond 3 months or after healing is complete. Affecting adults and children, it may arise from tissue damage or inflammation or have no identified cause. It can affect a specific body area (e.g., Complex Regional Pain Syndrome, low back pain (LBP), pelvic pain) or be widespread (e.g., fibromyalgia). Chronic pain is a complex condition with physical, social and psychological components, which can lead to disability, loss of independence and poor quality of life (QoL).

Physiotherapy
Physiotherapy in hospitals, clinics and the community aims to achieve healthy levels of activity and self-management for people with chronic pain. Clinical and cost-effectiveness evidence supports using a cognitive behavioural approach addressing both physical limitations and people’s beliefs about, and understanding of, their condition. People with multiple health issues or whose pain is causing significant physical, psychological or social problems may require management by a multidisciplinary pain service. Specialist physiotherapists identify reasons for lack of progress in rehabilitation, such as fear avoidance of movement or unhelpful patterns of over- and under-activity.

25% of people with chronic pain lose their jobs.
GP referral to services for advice and exercise improves outcomes and is cost-effective. Using a risk stratification tool and providing risk-matched treatment improves the condition, shortens time off work, reduces sickness certification and healthcare costs.

Manual therapy or acupuncture may produce short term benefit, but evidence supports the use of active treatments such as therapeutic exercise. Multidisciplinary pain management programmes (PMP) including physiotherapy are an effective intervention for people with chronic pain and cost-saving compared to physiotherapy alone. Physiotherapy supports and enables people with chronic pain to remain in or return to work. Mindfulness and acceptance & commitment therapy (ACT) have been shown to be as effective as cognitive behavioural therapy (CBT) and are used in some centres. Physiotherapists signpost people to online and community resources to support ongoing self-management. Increasingly physiotherapists use prescribing skills to optimise medication use.

**Conclusion**

Chronic pain can impact significantly upon physical, emotional and social wellbeing. Physiotherapy utilising a broad scope of practice can safely and cost-effectively support and guide people with long term pain towards the best possible quality of life.

**Significant impact**

- Chronic back pain affects 1.6 million adults per year.
- 7.8 million people in the UK live with chronic pain.
- Chronic pain accounts for 4.6 million GP appointments per year.

**Cost of chronic pain**

- Pain is the second most common reason for claiming incapacity benefit, costing £3.8 billion annually.
- £584 million a year is spent on prescriptions for pain.
- Annual healthcare costs for patients with chronic LBP are double those of matched controls (£1,074 vs. £516).

**Case study**

The Best multi-centre randomised controlled trial, involving 56 general practices across seven English regions, compared active management (AM) of patients with sub-acute or chronic LBP against AM plus CBT. Outcomes measured included physical and mental QoL, fear avoidance beliefs and pain self-efficacy. Cost utility was evaluated using £38 costs. AM plus CBT had higher per-person costs (£176) and higher QoL. AM is highly cost-effective at currently accepted thresholds. Cost per quality-adjusted life-years (QALY) is about half that of competing LBP interventions.

**Further information**

CSP Enquiry Handling Unit

Tel: 0207 306 6666
Email: enquiries@csp.org.uk
Web: www.csp.org.uk

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**References**