



CHRONIC PAIN MANAGEMENT RESEARCH PROGRAM

STRATEGIC ENCOURAGEMENTS

- **Multi-Tiered Stakeholder Engagement**, including patients, caregivers, advocates, community leaders, hospital/health system administrators, and health care policy makers
- **Use of Biopsychosocial Assessments** of the patient experience, including measures of physical and emotional functioning and satisfaction with treatment in addition to pain levels
- **Utilization of Real-World and Pragmatic Approaches** that better replicate actual treatment environments and patient populations
- **Studies with Military Relevance** that can improve pain management care for Service Members, Veterans, and Military Health System (MHS) beneficiaries

PROGRAM HISTORY

In fiscal year 2019 (FY19), a congressional appropriation of \$10M established the Chronic Pain Management Research Program (CPMRP). Chronic pain research was previously supported by the the U.S. Army Medical Research and Development Command's Broad Agency Announcement and other CDMRP programs. From FY06 through FY22, the CDMRP managed projects \$420 million (M) in research with relevance to chronic pain within other programs. The CDMRP also participates in the Pain Management Collaboratory, an interagency effort between the U.S. Department of Defense, National Institutes of Health, and the U.S. Department of Veterans Affairs supporting pragmatic clinical trials for non-pharmacological approaches to pain management. Through FY22, the congressional appropriation for the CPMRP totaled \$55M. The congressional language for the CPMRP emphasizes a focus on issues related to military populations.

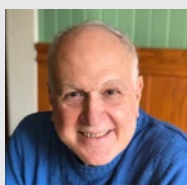
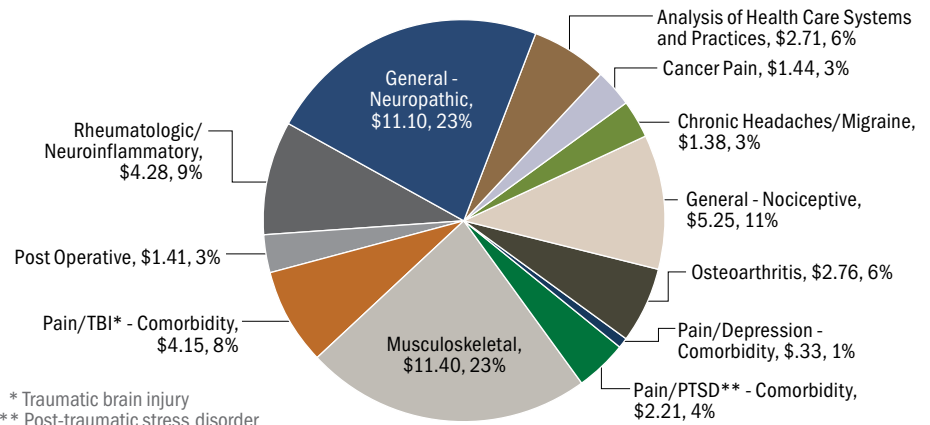
VISION: Improving the medical readiness of Service Members, as well as the quality of life and level of function of all Americans, with or at risk for developing chronic pain.

MISSION: To support and promote innovative, high-impact research to prevent the development and improve the management of chronic pain in Service Members, Veterans, and beneficiaries.

RESEARCH INVESTMENT / PORTFOLIO:

The CPMRP supports research into many chronic pain conditions as well as investigations into the management of chronic pain in the context of common comorbidities. The program seeks to continue investments in existing areas and broadening its reach to help additional communities touched by chronic pain.

FY19-FY22 CPMRP Research Investment (\$M) by Pain Condition



"I have been very privileged to participate in several of the CPMRP's reviews. I always look forward to the intellectual challenge of reading and determining the impact of research proposals for the military and for the entire pain community. The panel situation is very supportive, where the scientists and other specialists go out of their way to ensure the consumer understands the technical aspects of the proposals. These reviews allow the voice of a person with pain to be recognized and heard as part of the review and funding process, as well as determine the future of research on chronic pain management."

Lt. Col. Joseph "Tom" Norris, U.S. Air Force Retired, American Chronic Pain Association member

FY23 AWARD MECHANISMS AND FOCUS AREAS:

Clinical Exploration Award

- Chronification of pain
- Effectiveness or observational studies to advance or refine techniques/approaches/pathways to chronic pain management, including the novel or untested

Clinical Outcomes Research Award

- Comparative effectiveness (for evidence-based, efficacious interventions to manage or prevent chronic pain)
- Implementation science (for evidence-based, efficacious interventions to manage or prevent chronic pain)
- Observational studies related to chronic pain
- Relationships between comorbidities and pain

Investigator-Initiated Research Award

- Chronification of pain
- Development of non-opioid therapies and methods for the treatment of chronic pain

Pain Management Clinical Collaboration Research Award

- Comparative effectiveness (for evidence-based, efficacious interventions to manage or prevent chronic pain)
- Implementation science (for evidence-based, efficacious interventions to manage or prevent chronic pain)

RESEARCH ACCOMPLISHMENTS/OUTCOMES:



Dr. Alan Peterson (left), of the University of Texas Health Science Center at San Antonio, and Dr. Kate Comtois (right), of the University of Washington, are funded to conduct

an implementation science study of the Functional Occupational Rehabilitation for Troops (FORT) program for musculoskeletal pain. Functional restoration programs (FRPs), such as FORT, are shown to be the most cost-effective and efficacious evidence-based treatment strategy for chronic musculoskeletal pain. Under previous funding from the CDMRP's Peer Reviewed Medical Research Program, this FRP was previously evaluated in Service Members; however, clinical implementation of FRPs in MTFs is not well established. The current funded effort seeks to evaluate the clinical and implementation effectiveness outcomes of FORT in MTFs to create a standardized framework for training and implementation of FORT in military health care settings. The study seeks to inform decisions related to health care delivery on health care delivery policies and practices related to chronic musculoskeletal pain and quality of life for Service Members and their beneficiaries. (W81XWH-22-2-0041 and W81XWH-22-2-0042)

ONGOING RESEARCH:

<p>Research Foundation for Mental Hygiene, Inc.; Principal Investigator (PI): Dr. Diana Martinez (W81XWH-22-1-0416)</p> <ul style="list-style-type: none"> • Investigation of Nonconvulsive Electrotherapy (NET) for Chronic Pain 	<p>University of Texas Medical Branch, Galveston; PI: Dr. Jun-Ho La (W81XWH-21-1-0752)</p> <ul style="list-style-type: none"> • Non-opioid Chronic Pain Treatment by Erasing Spinal Pain Memory
<p>Rush University Medical Center; PI: Dr. John Burns (W81XWH-22-1-0739)</p> <ul style="list-style-type: none"> • Preventing the Development of Chronic Pain: Treating PTSD at Acute Pain Onset 	<p>Palo Alto Veterans Institute for Research; PI: Dr. David Clark (W81XWH-20-1-0911)</p> <ul style="list-style-type: none"> • Immunological Contributions to the Chronification of Pain
<p>Veterans Medical Research Foundation; PI: Dr. Albert Leung (W81XWH-21-1-0831)</p> <ul style="list-style-type: none"> • Combined Nonpharmacological Therapies for MTBI-Related Headaches 	<p>New York University School of Medicine; PI: Dr. Marco Campello (W81XWH-20-2-0036)</p> <ul style="list-style-type: none"> • The Implementation of Psychologically Informed Physical Therapy to Prevent Chronification in Service Members with Musculoskeletal Disorders

Chronic Pain Conditions and Impact on Warfighter and Beneficiaries

Chronic pain syndromes of Service Members can be complex due to comorbidities arising from deployment-related physical and psychological traumas

- Common comorbidities include:

- TBI
- PTSD
- Polytrauma triad
- Depression
- Anxiety
- Substance Use Disorders



- 7.1% of active-duty Soldiers experience headache/migraine pain
- Most prevalent pain primary diagnoses of active-duty Soldiers:
 - Back and neck pain (22%)
 - Non-traumatic joint disorders (28%)
 - Other musculoskeletal pain (30%)
- Active-duty Service Members with fibromyalgia are projected to have ~ 57 MHS medical encounters/year
- Risk of developing painful neurological conditions from tick/vector-borne transmission and tropical diseases is elevated due to deployments
- Osteoarthritis affects over 1/3 of Veterans

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