

Round Table Discussion II: What did the COVID-19 Pandemic teach us?

What pandemic teaches us about the patient of a pain center

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Although pain treatment has been described as a fundamental human right, the Coronavirus disease 2019 (COVID-19) pandemic forced healthcare systems worldwide to redistribute healthcare resources toward intensive care units and other COVID-19 dedicated sites. As most chronic pain services were subsequently deemed non-urgent, all outpatient and elective interventional procedures have been reduced or interrupted during the COVID-19 pandemic in order to reduce the risk of viral spread. The shutdown of pain services jointly to the home lockdown imposed by governments has affected chronic pain management worldwide with additional impact on patients' psychological health.

Chronic pain is a complex multidimensional experience severely compromising the QoL, often limited ability to work, sleep, and affected social interactions with friends and family. Because of compromised health care services and their limited accessibility during the pandemic, socioeconomic disadvantages, and exposure to enhanced psychological stressors, patients with chronic pain may experience an exacerbation of symptoms.

Telehealth and telemedicine have been suggested as a means for treating chronic pain patients at home in nonemergent conditions, as well as to assure continuity of care of patients after hospital discharge. Many technical solutions, with different costs and benefits, have been utilized for remote assessment and treatment of chronic pain. Telephone consultation is the first and low-cost example of telemedicine for remote treatment of pain.

As a matter of fact, the evidence on telemedicine efficacy in chronic pain is lacking according to some published systematic reviews [MartorellaG, 2017 and SlatteryBW, 2019], including a Cochrane review [EcclestonC, 2014]. The effects of psychological therapies delivered via the Internet on pain, disability, depression, and anxiety are promising but come from a small number of trials so that the estimate of the effects remains to be assessed.

References

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