



Title **Multidisciplinary Pain Programs for Chronic Pain: Evidence From Systematic Reviews**

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Aim

To assess the efficacy/effectiveness and efficiency of multidisciplinary pain programs (MPPs) for treating patients with non-malignant chronic pain.

Conclusions and results

All of the reviewed clinical practice guidelines (CPGs) recommended a team approach for chronic pain patients, but the evidence for this was weak. Five systematic reviews met the inclusion criteria. Four were Cochrane reviews, and provided the best available evidence (Table 1).

Table 1: Summary of best available evidence for MPPs

Condition	Level of Evidence	Conclusion
Chronic low back pain	Strong	Effective
Chronic pelvic pain	Moderate	Likely to be effective
Fibromyalgia & widespread pain	Limited	Inconclusive
Neck and shoulder pain	Limited	Inconclusive

Caution should be used in generalizing these results. The MPPs were not standardized, and it is unknown whether the outcomes were due to a particular treatment or to interactions of multiple treatments. Also, patients in MPPs often do not represent all with chronic pain, and not all chronic pain patients should attend MPPs. The effects of other factors on outcomes are uncertain. One systematic review on economic effectiveness found the primary research to be flawed.

Recommendations

It is unclear which treatments are responsible for improvements in chronic pain patients in MPPs, or which patients do best under a particular individualized treatment plan. No conclusions can be drawn on the economic impact of MPPs.

Methods

This report is a tertiary, qualitative, systematic review. Published systematic reviews were analyzed for evidence on the efficacy, effectiveness, and economic aspects of MPPs for patients with non-malignant chronic pain. Information from Canadian CPGs was also included.

Further research/reviews required

A standardized operational definition of MPP is essential for future comparisons or evaluations. Research is needed on the various aspects of the multidisciplinary approach. Regional Health Authorities providing MPPs to manage chronic pain must establish appropriate data collection systems and conduct extensive evaluations to assess the efficiency and clinical effectiveness of intervention strategies. Hence, maintaining and monitoring outcome data should be a top priority of MPPs in Alberta.