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Should we Increase Interventional Pain Management Diffusion with Studies on Patient Satisfaction and Cost Effectiveness?

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Abstract

Background

Shortage of economic resources in public health systems, lack of a well-established evidence bases for several interventional procedures, shift of the need of anesthesiologists and other operators to face the recent burden of pandemics have reduced the availability of chronic pain clinics worldwide. Patients need of chronic pain management continue to remain unattended even in developed West Countries. Awareness of benefits and cost effectiveness of pain medicine may help administrators to allocate finances and resources in this field of patient care. Anyway, patient satisfaction combined with cost effectiveness is not constantly evaluated in interventional pain management outcome studies [1].

Methods

We performed a PubMed search of the terms: "chronic pain AND patient satisfaction AND interventional pain management AND cost-effectiveness". After selection of pertinent studies, we counted the number of papers reporting patient satisfaction and cost-effectiveness.

Results

The search showed 48 results. Of these, 21 were pertinent with evaluation of a pain procedure.

In 15 studies an outcome measure of patient satisfaction was actually declared. 4 of them were concerning an organization item, 11 were related to a pain procedure. In 6 studies a favorable cost-effectiveness analysis had been performed.

Discussion

Combination of patient satisfaction analysis and cost effectiveness of a pain management item is still scarcely studied. A systematic assessment of these fundamental elements of health care evaluation may improve resources allocation and humanization of Medicine. This approach should be diffusely followed in other fields of care, including the most expensive and demanding for patient cooperation.

References

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