

The Mayday Fund
Annual Report 2006
March 30, 2007

Letter from The Trustees

From the beginning, one of the goals of the Mayday Fund has been to ‘close the gap between knowledge and practice.’ As we review the grants made in 2006, we observe a growing trend: the creation of networks of information and people to better distribute knowledge about the treatment of pain. We see this not only in Mayday’s grantee pool but in the pain field as well. The momentum towards networking takes the idea of ‘closing the gap’ one step further – nurses and doctors have successfully implemented changes in their areas of practice and now want to share their results with a national audience. When distributed via the web, resources such as teaching tools for medical school curriculums and more accessible databases, will serve a much larger community.

Another trend we see in our grants is an increase in multi-year proposals. The challenge to design a project to amass evidence for new models of treatment is complex, and our grantees have shown us that a two or three year timeline is the most realistic way to proceed. Also, the Fund is receiving more requests for educational materials. We hope to create resources for future health care providers, and realize that the investments we make in education and curriculum will yield slow but important progress. Moving knowledge into practice requires a steady commitment to implementing change in institutional environments and within professional communities.

The lack of reliable statistics, regarding the prevalence of pain in its many forms and the burden it creates, is a challenge for those who argue that pain must be more carefully assessed and managed. However, last year we saw progress when the National Center for Health Statistics at the Centers for Disease Control and Prevention (CDC) included a special feature section on pain in their 2006 report on the health status of the nation.¹ Their findings include: in 2004, more than one quarter of American adults experienced lower back pain within the past three months; headache pain is the most common neurological ailment in the US; and only half of emergency room patients who report severe pain receive any relief through medication. Furthermore, in a posting to Medscape, Argoff cited a study that estimated 50 million people in the US experience chronic pain, which costs the economy \$85-\$90 billion.’²

To take the pulse of the current state of pain research and information, Mayday called a summit that included several of the leading specialists in the field.³ Charmaine Kleiber and Lonnie Zeltzer spoke to the challenges of treating pain in children. We learned that, in the emergency room, more than 40% of children who arrive are not given any sort of pain assessment and only half of children in moderate to severe pain are offered pain medication. Both Kleiber and Zeltzer emphasized the necessity for teamwork as well as cooperating groups of pain centers, which reinforced the call for more effective networking. Rollin Gallagher spoke to the Department of Defense and the Veterans Administration Health Systems with their potential to set a standard for public pain care in the areas of patient controlled pain relief after severe injury and the management of aberrant behavior and co-morbid addiction. Finally, David Borsook reminded us that we are still very far from finding the ‘antibiotic’ for pain, and discussed changing the model for how pain is studied, specifically through making better use of the brain as a tool. In 2006 Mayday made a total of thirteen grants.

¹ National Center for Health Statistics, *Health, United States, 2006 with Chartbook on Trends in the Health of Americans*.

² Argoff, C. (2007, March 26). Tailoring Chronic Pain Treatment to the Patient: Long-Acting, Short-Acting and Rapid-Onset Opioids. Posted to www.medscape.com. Cited: Carter, C., Goldfarb, N.I., Hartmann, C.W., et al. (2003). Chronic Pain Management in Managed Care Organizations: A National Survey of Medical Directors. *Pharmacology & Therapeutics*, 28: 179-215

³ David Borsook, MD, PhD, Rollin M. Gallagher, MD, MPH, Charmaine Kleiber, RN, PhD, and Lonnie K. Zeltzer, MD. Moderated by Fenella Rouse, JD

Many of the grants created information databases. At Beth Israel in New York, *EM Painline* combined existing pain research literature related to emergency medicine into one web-based bibliography. At the University of Texas, Galveston, the grant funded a monitored database of all improvements in treatments for children with burn pain and anxiety. Another grant, at the University of Wisconsin, Madison, focused on developing the *PRN Manual*, a pain management tool designed specifically for nurses. Also, an unrestricted grant was made to the Liebeskind History of Pain Collection, the only archive in the country dedicated completely to pain. In addition to information databases, other grants, like the pediatric pain training program in Canada (PICH), sought to build international networks.

Two grants targeted medical education. One, at the Johns Hopkins Medical School, funded materials and tools to support the new curriculum on pain. Medical school, historically lacking pain education, is a critical starting point for ensuring that future practitioners make assessing and managing pain as much a part of their routine as diagnosis and treatment.

Three more grants focused on drug administration effectiveness on the part of the parent, caregiver, nurse, or patient. One of these addressed pain relief in pediatric patients with developmental delay, who are at risk for sub-optimal pain control due to communication difficulties.

The Fund, in 2006, opened two new areas of inquiry. To study the connection between sleep disruptions and chronic headache pain in adolescents, a grant was made to the Children's Hospital Boston. And, to better understand the burden of pain in cancer survivors, the Memorial Sloane Kettering Cancer Center will map its prevalence.

Complementing our grants, the Mayday Pain & Society Fellows are beginning to capture a larger audience for pain care in both the media and policy communities. The Fellows program has been extended for another two years – we shall, at the end of five years, have contributed 30 new spokespersons to the national scene. We view the Fellow's program as one whose yield will be seen in the work of a new generation of leaders.

Finally, in order to respond to the growing need for support of research and program development, we are actively seeking partners in the foundation community interested in tackling pain as a health care issue. In 2006, we were fortunate to be joined by The Milbank Memorial Fund, The Milbank Rehabilitation Foundation, The John A. Hartford Foundation and The Atlantic Philanthropies.

We are excited by Mayday's contributions to new evidence and to more easily accessible information resources. At each meeting we are impressed by how much the field of pain medicine is growing and by the quality of the requests we receive. Our decisions are difficult – there is so much good work being done.

As the grant selections for 2007 begin, Mayday remains committed to a nimble pursuit of grants and to 'closing the gap between knowledge and practice.'

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GRANTS 2006

Projects Addressing Pain in Children

“Imagine being the parent of a child with cancer who won’t even let you hug her because it hurts too much. Imagine being a teenager with chronic pain who nobody believes. Imagine being too young to find the words to say when it hurts.”ⁱ

- G. Allen Finley, MD

Children’s Hospital Boston, Massachusetts, “Characterization of Sleep Disruption in Adolescents with Chronic Daily Headache”

A pilot project to address a gap in research about the interaction of pain and sleep problems. It targets chronic headache pain and will examine how ‘insufficient sleep and feelings of fatigue may increase pain sensitivity and interfere with an individual’s ability to cope with pain and perform daily tasks.’

Grant: \$61,502 – First payment of a two-year grant of \$125,591

Contacts: Navil F. Sethna, Jennifer Scott-Sutherland

<http://www.childrenshospital.org/about/Site1394/mainpageS1394P0.html>

Children’s Hospital of Wisconsin, Milwaukee, “Outcomes and Parent Satisfaction Associated with Parent/Nurse Controlled Analgesia (PNCA) in Pediatric Patients with Developmental Delay”

The study addresses the challenge that children, who are unable to clearly communicate their pain experience, are at risk for sub-optimal pain control. It will provide recommendations regarding optimal pain management for this very high-risk pediatric patient population.

Grant: \$158,686 – Second payment of a three-year grant of \$344,528

Contacts: Steven J. Weisman, Michelle Czarnecki, Antonella Ferrise, Lynn Rusy, Jaya Varadarajan, Yvonne Anderson

<http://www.chw.org/display/PPF/DocID/12082/router.asp>

Dalhousie University Foundation, Halifax, Nova Scotia, for the Canadian Institutes of Health Research (CIHR) “Strategic Training Initiative in Health Research Devoted to Pain in Child Health (PICH)”

A grant to create the “Mayday Pain in Child Health” network of international trainees. They participate in the Canadian Strategic Training Initiative, which is the only known training network in pediatric pain worldwide. The strategy is to create a network of pediatric pain researchers and practitioners that will extend beyond the limits of any particular institution.

Grant: \$39,900 (US) – Third payment of a three-year grant of \$119,700

Contacts: Patrick McGrath, Bonnie Stevens, Allen Finley, Kenneth Craig, Celeste Johnson, Carol von Baeyer

<http://www.dal.ca/~pich/>

University of Texas Medical Branch, Galveston, “Development of Systems for Evidenced Based Management of Pain, Anxiety and Itch in Children with Burn Injury”

A project dedicated to the creation of a database with on-going monitoring to allow for more timely review and speed improvements in pain and anxiety treatments to injured children.

Grant: \$60,000 – Second payment of a three-year grant of \$180,000

Contact: Walter J. Meyer

<http://www.utmb.edu/>

“Emergency departments in the United States receive over 110 million patient visits annually. Pain is the presenting complaint for 60% to 70% of these patients.”ⁱⁱ
- EMPainline.org

Pain and Emergency Medicine

Beth Israel Medical Center, New York, New York, Pain and Emergency Medicine Institute, “EM Painline: A Web-based Bibliographic Resource for Emergency Medicine Clinicians, Researchers and Policy Makers”

A grant to support an educational initiative, a web-based resource, to promote and support reforms in emergency medicine pain management practice. *EM Painline* will be a critically appraised bibliography of existing pain research literature pertinent to emergency medicine practice, including summary abstracts, critical commentary provided by emergency medicine experts, standardized grading of study quality, and specific recommendations resulting from the synthesis of this literature, ranked by the strength of supporting evidence.

Grant: \$115,000 – Second payment of a two-year grant of \$238,625

Contact: Knox Todd

<http://www.empainline.org>

University of Rochester, New York, School of Medicine and Dentistry, “Parenteral Opioid Effectiveness Assessment”

A grant to measure the effectiveness of existing intravenous opioid dosing in a busy emergency department. The results of the study will be used to create an educational initiative supported by electronic prompting to try to improve opioid prescribing practices at the hospital.

Grant: \$80,500 – Second payment of a two-year grant of \$161,000

Contacts: Alec B. O’Connor, Frank Zwemer, Daniel Hays

<http://www.urmc.rochester.edu/>

Improving Care at the Bedside – Clinical Interventions

Beth Israel Medical Center, New York, New York, Department of Pain Medicine and Palliative Care, “Caregivers and Prescription Medicine Adherence”

A one-year grant to support the development of the study. The Mayday Fund shares this project with The Milbank Rehabilitation Foundation.

Grant: \$50,188

Contacts: Russell K. Portenoy, Myra Glajchen

<http://www.stoppain.org/>

University of California at San Francisco, UCSF Pain Management Center, PainCARE

A matching unrestricted grant to the UCSF Pain Management Center for UCSF PainCARE, which began in 2004. Two of PainCARE’s most important programs are: UCSF Challenges of Managing Pain Symposia (ChaMPS) – a free grand rounds series; and UCSF Postgraduate Certificate in Pain Management – an online program based on the IASP’s Core Curriculum for Professional Education in Pain.

Grant: \$59,800 – Second year of a three-year grant of \$179,400

Contacts: Pamela P. Palmer, Laurie E. Snyder

http://mountzion.ucsfmedicalcenter.org/pain_management/index.html

“Again and again one hears patients wish, even demand, that their ‘voice be heard.’”ⁱⁱⁱ
- Daniel Carr, MD

- *Understand the difference between spontaneous and evoked pain*
- *Demonstrate the ability to obtain detailed information about the pain condition*
- *Demonstrate the ability to collaborate with a patient in obtaining pain ratings*

- Draft from the Hopkins Pain Curriculum

Changing Practice and Closing the Gap between Knowledge and Practice – Education and Pain

Johns Hopkins School of Medicine, Baltimore, Maryland, “Extension of Funding for the Curriculum Development Project supported by Mayday in 2004”

A grant to create educational materials to enhance the impact of a curriculum initiative and promote dissemination of this curriculum to other medical schools. The emphasis of this curriculum will be to provide young physicians with the knowledge, skills and abilities they need to act at the bedside to reduce pain, eliminate barriers to treating pain, diagnose common pain syndromes and anticipate pain-related complications.

Grant: \$81,650

Contact: Beth Murinson

<http://www.hopkinsneuro.org/>

American Academy of Nursing, Washington, DC, The Building Academic Geriatric Nursing Capacity Coordinating Center

A grant in support of the project, “Mayday Fund Scholarships for Research on Pain.” This project represents collaboration with The John A. Hartford Foundation and The Atlantic Philanthropies to increase interest in scholarship among nurses who work on pain in geriatric medicine.

Grant: \$60,000 for two years

Contact: Patricia Franklin

<http://www.geriatricnursing.org/applications/>

University of California, Los Angeles, Louise M. Darling Biomedical Library

A grant of \$5,000 for the general use of The John C. Liebeskind History of Pain Collection.

Contact: Marcia Meldrum

<http://www.library.ucla.edu/libraries/biomed/his/pain.html>

University of Wisconsin, Madison, Department of Pharmacology, “The Pain Resource Nurse Program Manual: A Toolkit to Advance Quality Pain Management”

A one-year grant to develop a comprehensive Pain Resource Nurse (PRN) Program Manual for pain management.

Grant: \$79,721

Contact: June Dahl

<http://www.med.wisc.edu/>

Capital Hospice

A grant of \$3,000 to support the transcribing of the conference, “The Many Faces of Pain in Palliative Care.”

Contact: Mary Beth Campbell

<http://www.capitalhospice.org/>

“The fact that cancer survivors experience pain, sometimes severe pain, every single day is lost on many people. Such pain can make it hard to live the life that has been saved. Research and then intervention are the only remedies for this vulnerable group.”

- Steven Passik, PhD

The Prevalence of Pain in Cancer Survivors

Memorial Sloan Kettering Cancer Center, New York, New York, Department of Psychiatry and Behavioral Sciences, “Pain in Cancer Survivors”

A study to identify the prevalence of pain in adult cancer survivors and to examine the characteristics of their pain. A second aim is to compare health-related quality and psychological distress in adult cancer survivors with and without pain, when controlling for the effects of medical and sociodemographic variables, distressing physical symptoms other than pain, hopelessness, social support, and stressful life events.

Grant: \$95,058 – First year of a two-year grant of \$194,286

Contacts: Steven D. Passik, William S. Breitbart, Lara K. Dhingra

http://www.mskcc.org/prg/prg/departments_and_services/PSYC00000.cfm
- PSYC-00000

Grants in Lieu of Honorariums

University of Iowa Foundation, Iowa City – \$1,000

<http://www.uifoundation.org/>

University of Wisconsin, Madison – \$400

Foundation Citizenship

NYRAG (New York Regional Association of Grantmakers) – \$550

<http://www.nyrag.org/>

The Council on Foundations – \$2,530

<http://www.cof.org>

Program Related Project

“We are building the next generation of pain experts and leaders who have bravely chosen to step beyond their comfort zone to become advocates for people in pain.”

- Carol Schadelbauer

The Mayday Pain & Society Fellowship: A Media & Policy Initiative designed to equip physicians, nurses, social workers, scientists, and ethical and legal scholars with the skills to become effective advocates and spokespeople about pain issues in the United States. The Fellowship was established to build a community of experts in the pain management field that can effectively communicate to the public and policymakers.

The Mayday Fund’s Trustees first approved the new fellowship program in September 2003. Eighteen fellows were chosen over a three-year period.

In 2006, The Trustee agreed to extend the program for an additional 2 years. The Fellowship is steered by an advisory committee made up of some of the nation’s leading experts in the pain management field.

Contact: Carol Schadelbauer, Burness Communications

<http://www.burnesscommunications.com/>

ⁱ Finley, Allen G. (2005, December 28). Suffer the little Children. *The Globe and Mail*, pp A21

ⁱⁱ www.empainline.org/bi_painline/about.do

ⁱⁱⁱ Carr, D. B. (2005). Memoir of a Meta-Analyst: On the Silent “L” in “Qualitative.” In, *Narrative, Pain, and Suffering* (pp325-354). Seattle, WA: IASP Press