

ANNUAL REPORT 2008
MAY 1, 2009

LETTER FROM THE TRUSTEES

2008 was a challenging year for The Mayday Fund. We take seriously the charge we are given to be ‘nimble’ in our grant making, and this helped us to choose among the many projects that we review. We see the Fund’s grants as catalysts to increase awareness about pain and to develop better programs of care.

Grants were made to leaders in the pain care professions who wish to ‘close the gap’ between knowledge and practice. Others were made to discover new patterns of symptoms and relationships between biology and the environment to know more about what causes pain. We maintained our interest in networks that enable pain care practitioners to work across the borders of institutions and geography, especially as they provide new evidence to document the extent of the suffering caused by pain and the barriers to its treatment.

In our review of the grants made, it is clear that the Fund has become a ‘target of opportunity’ for those who treat pain in children. Indeed, the range of grants made in pediatric pain offers a window into how much is going on within this group. For example, the Fund supported research that explores the genetic profiles of families where a child suffers from chronic pain. It also made a modest contribution to enable pediatric hospice and palliative care professionals to meet in conference. We helped researchers explore non-pharmacological ways of treating pain including the potential role for acupuncture in mitigating the effects of painful tests in newborns. And, to help crystallize some of this momentum, we commissioned a lecture on the ‘future’ of pediatric pain to be delivered at the International Symposium on Pediatric Pain in June 2009.

Our grants in emergency medicine overlap those in pediatric pain. We helped to document the barriers to the use of pain medications in rural hospitals, and made it possible for a children’s hospital to design and implement a quality improvement project as a model of how emergency departments may better treat pain in that intense and fast action environment. A network of emergency departments in Chicago also uses a quality improvement strategy to better design and assure quick treatment of adults suffering with sickle cell disease when they present to the emergency department as a last resort. The goal in all of these projects is to create a culture where pain will be treated quickly, responsibly and effectively.

As in past years, we struggled to identify projects to address the needs of those unable to communicate their pain using language or the subjective rating scales, which are the standard of practice in the medicine. The Nurse Leaders Task Force on Nursing Home Pain works to provide web-based resources that are both useful in practice and educational -- so nursing home staffs will improve their practice of pain care. Biofeedback is being used with children with intellectual disabilities, as part of a Canadian research project, to address the special needs of this population.

The newborn acupuncture study, mentioned above, is another attempt at contributing to the science of serving those who cannot report their pain directly.

To address our goal of improving pain care at the bedside, the Fund supports meetings that enable leaders in the field to work together to explore new ideas and to articulate evidence-based standards of care. In 2008, the Fund supported pharmacists in planning a major consensus conference to be held in 2009. It also worked with the Milbank Memorial Fund to develop a research guideline, "Towards a definitive evidence base for opioid management of chronic non-cancer pain," that is nearing completion. And, Mayday contributed to an international study targeted to improve the care of youth with arthritis and persistent musculoskeletal pain.

While consensus meetings represent one avenue of raising awareness about pain and improving professional practice, it is direct research that helps to answer some of the questions for which there is not yet sufficient evidence. The Fund supported two projects in 2008 designed to chart new territory.

An analysis of the General Practice Research Database (GPRD), a United Kingdom database of patient records, tracks how patients present and are treated for chronic non-cancer pain with the goal of understanding how often opioid medications lose their effectiveness with long-term use. The Mayday study is designed to identify how extensive a problem this may be. The analysis of large electronic medical record databases holds great promise for more accurately gauging how extensive the burden of pain is and may inform clinicians' needs to better respond to the important and recurring question of whether people are undertreated. As new technologies become more part of the general practice of medicine, the opportunities for epidemiological research will grow and may provide the evidence for how extensive a factor pain is, and for how treatments work.

The second research project targets post-amputation or phantom limb pain. Using biofeedback, the goal of this research is to show that new treatments are emerging to address this complex and difficult to understand pain condition.

Among the appeals of Mayday is the way that projects we support often become trend setters. In 2007, we made a grant for a consensus project to help develop ChildKind, an international designation that would affirm that pediatric pain is responsibly treated in children's hospitals. The leaders of this project were able to leverage the Mayday grant to obtain one from the Rockefeller Foundation for the use of its conference facilities at Bellagio in Italy. With participants representing 15 countries and the World Health Organization, the meeting tackled both intellectual and organizational issues to create a set of protocols that might be adopted in a wide range of medical settings. Plans are to formally launch ChildKind in June 2009 – the speed and coordination with which this initiative has progressed are both amazing and heart-warming!

While this is the most dramatic of the Fund's 'value added' grants, there are many others that are moving systematically and judiciously to change the landscape of pain care. The work that grantees do is compelling and we hope of help to the field. The same is true for the Mayday Pain & Society Fellows, who continue to refine their messages about the prevalence of pain and its burden of suffering, and who have become an effective network of experts willing to speak up for those in pain.

Finally, as the year came to an end and 2009 began, we in philanthropy -- as well as our partners in medicine and science -- have had to reconsider how to best target our efforts in the face of a double challenge: financial market losses and the exciting advances made in the field of pain care.

The Mayday Fund is committed to all of its multiyear grants and to remaining nimble. While our grant portfolio is affected by the changes we experience, we hope to use this year to learn more about the advances being made and to use this knowledge to better target our selection of new grants as we move forward. We are deeply appreciative of the work our grantees do and hope they will make great inroads for the better care of pain in the changing map of medicine that may emerge with current health care and economic changes.

TRUSTEES

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A THOUGHT ABOUT PAIN AND ITS IMPACT OF THOSE WHO SUFFER

This is excerpted from an article by Raina K. Plowright, a Veterinary Surgeon, about her experiences after a life threatening accident in Antarctica. It speaks to many of the issues that the Trustees of The Mayday Fund care about.

MY CARE TEAM

The next seven days were a blur of unbearable suffering, surrounded by the extraordinary compassion and dedication of Madeleine Wilcock, my doctor, who understood my suffering as if she were going through it too. This was complemented by the diligence and kindness of my three dedicated (bearded) nurses, who were there 24 hours a day and would do anything for me. Their combined love and concern enveloped and helped me during those awful days.

During long sleepless nights in the care of the nurses my veterinary skills were often useful, in ways such as guiding them in fixing blocked intravenous lines or giving injections. At first I was nervous about a diesel mechanic or a carpenter trying to give me intramuscular injections, but then I noticed that they were even more terrified than I. I learned how stressful it is having to endure and anticipate multiple painful procedures each day, and would have preferred all dressing changes, catheter changes, injections and other painful events to be finished in one go. I appreciated Madeleine's efforts to relieve my pain, such as administering local anesthetic before inserting a cannula. I decided that I would take great care to avoid inflicting pain on my patients in the future.

FOR THE WHOLE STORY, PLEASE SEE:

http://www.mja.com.au/public/issues/173_11_041200/plowright/plowright.html

GRANTS 2008

PEDIATRIC PAIN

- **Buzzy – the Boo Boo Bee: Two Pilot Studies** – Georgia State University, Atlanta, GA. A grant to clinically test a hand held vibrating and cold device placed on the skin to mechanically decrease or eliminate intravenous needle pain in two studies, one involving immunizations, the other venupuncture. Contacts: Amy Baxter and Lindsey Cohen
<http://www2.gsu.edu/~wwwpsy/faculty/cohen.htm>
 Grant: \$64,662.50 – Final payment of \$129,325 grant
- **Non-Pharmacological Pain Treatments for Children with Intellectual Disabilities** – IWK Health Centre, Halifax, Nova Scotia, Canada. A grant to supplement the training budget of a Canadian Institutes of Health Research Project on pediatric chronic pain. Contact: Lynn Breau
<http://nursing.dal.ca/Faculty/lynn.breau.php>
 Grant: \$18,683
- **Genetics and Chronic Pain** – UCLA Pediatric Pain Program, Los Angeles, CA. A research grant to study genetic patterns in children who suffer from chronic pain and their parents. Contacts: Lonnie Zeltzer and Jennie Tsao
<http://www.mattel.medsch.ucla.edu/pedspain/home.php>
 Grant: \$103,222 -- First payment of two-year grant of \$208,597
- **Quality of Life for the Children, DC Children’s Palliative Care Conference** – DC Cancer Consortium, Washington, DC. A grant to support the annual conference. Contact: Susan Rogers
<http://www.dcppcc.org/>
 Grant: \$10,000
- **Acupuncture for Relieving Pain in Newborns** – Arkansas Children’s Hospital Foundation, Little Rock, AR. A grant to study the effect of electrode simulated acupuncture to relieve the pain of heel sticks in newborns. Conducted in conjunction with the Stanford University Lucille Packard Children’s Hospital. Contacts: K.J.S Anand, R. Whit Hall and Brenda Golianu
<http://www.archildrens.org/foundation/about/>
 Grant: \$200,942 – First payment of two-year grant of \$401,884
- **SUPERKIDZ – Pediatric Arthritis Project** – The Hospital for Sick Children, Toronto, Ontario, Canada. A grant to support ‘SUPER-KIDZ: Ask Me Where It Hurts? Pain Assessment in Youth with Arthritis and Persistent Musculoskeletal Pain,’ conducted in cooperation with the Childhood Arthritis and Rheumatology Research Alliance (CARRA). The grant matches Canadian Institutes for Health Research funding and includes data collection across several sites in the United States and Canada with the goal to develop clinical guidelines. Contacts: Jennifer Stinson and Gary Walco
<http://www.carragroup.org/>, <http://www.sickkids.ca/Research/index.html>
 Grant: \$61,831
- **Trends Lecture on Pediatric Pain** – International Association for the Study of Pain, Seattle, WA for The 8th International Symposium on Pediatric Pain. A grant to support

The Mayday Fund Distinguished Lecture on the Future of Pediatric Pain to be delivered by Patrick McGrath in 2009.

<http://childpain.org/2009acapulco.shtml>, <http://childpain.org/>

Grant: \$8,500

PAIN & EMERGENCY MEDICINE

- ***Improving Pain Management in the Pediatric Emergency Department -- Quality Improvement Initiative***– Cincinnati Children’s Hospital Medical Center, Cincinnati, OH. A grant to design and monitor quality improvement projects for pain in the pediatric emergency department. Contacts: Srikant Iyer and Charlotte Anderson
<http://www.cincinnatichildrens.org/>
Grant: \$93,470 – First payment of two-year grant of \$197,695
- ***Iowa Pediatric Rural Emergency Department Network***– College of Nursing, The University of Iowa, Iowa City, IA. A grant to further pediatric pain assessment and management in rural emergency departments. Contact: Charmaine Kleiber
http://www.nursing.uiowa.edu/faculty_staff/facultyprofile/kleiber.htm
Grant: \$30,814 – Final payment of \$120,814 grant
- ***Illinois Emergency Department Pain Management Collaborative***—Department of Emergency Medicine and the Institute for Healthcare Studies, Northwestern University, Chicago, IL. A grant to support the project, “Improving Pain Management Through Surveillance and Quality Improvement – The Illinois Emergency Department Pain Management Collaborative: Project 1: Sickle Cell Disease, Acute Pain Episodes.”
Contact: Paula Tanabe
Grant: \$110,690 – Second payment of three-year grant of \$302,035

CHANGING PRACTICE

- ***Task Force on Nursing Home Pain*** – American Academy of Nursing and The Sigma Theta Tau International Foundation for Nursing, Washington, D.C. and Indianapolis, IN. A collaboration with the John A. Hartford Foundation and The Atlantic Philanthropies to create educational resources for nurses who provide care in nursing homes. Contact: Keela Herr
<http://www.geriatricnursing.org/hcgne/nhc.asp>
Grant: \$68,293 – Final payment of \$153,594 grant
- ***National Consensus Project on Pain and Palliative Care Education for Pharmacists*** – Southern Illinois University at Edwardsville, Edwardsville, IL. A grant to support a pharmacy specific pain and palliative care consensus summit of leaders in the field of pain and palliative care pharmacology. Contact: Chris Herndon
Grant: \$57,314 – Second payment of three-year grant of \$152,490

INFORMATION & RESOURCES

- ***The John C. Liebeskind History of Pain Collection*** – University of California, Los Angeles, Darling Biomedical Library, Los Angeles, CA. Contact: Marcia Meldrum
<http://unitproj.library.ucla.edu/biomed/his/pain.html>
Grant: \$5,250
- ***Opioid Research Guideline Project*** – Pain Research Center, University of Utah, Salt Lake City, UT. In partnership with The Milbank Memorial Fund, a grant to support the preparation of a research guideline, “Towards a definitive evidence base for opioid management of chronic non-cancer pain.” Contact: C. Richard Chapman
Grant: \$10,500

RESEARCH

- ***Incidence and risk factors for loss of opioid effectiveness with chronic use*** – Pain Research Center, The University of Utah, Salt Lake City, UT. The goals of this project are to: 1) Estimate the incidence of loss of opioid effectiveness in patients chronically exposed to opioids; and 2) Determine the risk factors for loss of opioid effectiveness with chronic use, including age, gender, pain syndrome and specific medication used. This investigation is a cohort study conducted with the United Kingdom's General Practice Research Database (GPRD). Contacts: C. Richard Chapman, David Bradshaw and Gary Donaldson
<http://www.painresearch.utah.edu/>
Grant: \$201,297 authorized in 2007 of which \$9,256 was paid from the 2008 grant budget
- ***Analysis of Biofeedback as a Therapeutic Intervention for Post Amputation Pain*** – Center for Pain Studies, Rehabilitation Institute of Chicago, Chicago, Ill. A research project to test the effectiveness of new treatments for post amputation pain. Contact: R. Norman Harden
<http://www.ric.org/research/centers/pain/index.aspx>
Grant: \$92,653.79 -- First payment of three-year grant of \$251,669.63

FOUNDATION CITIZENSHIP

- ***New York Regional Association of Grantmakers***
New York, NY. -- \$650
- ***The Council on Foundations***
Arlington, VA. -- \$2,730

PROGRAM RELATED PROJECT

The Mayday Pain & Society Fellowship: A Media & Policy Initiative was 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 Fellowship is steered by an advisory committee made up of some of the nation's leading experts in the pain management field. Contacts: Carol Schadelbauer, Burness Communications

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

TOTAL GRANTS PAID IN 2008: \$943,856.56 net of refunds or repayments

FINANCIALS

The Mayday Fund Financial Statements are published on the website: <http://www.maydayfund.org>

May 1, 2009