Chronic pain is a major public health challenge. That's not just because it is estimated to cost over half a trillion dollars annually in medical costs, disability programs, and lost productivity. Instead, the reason is because the treatment of chronic pain has become, in part, a hot-button political issue.

Pain patients often rely on powerful drugs such as opioids to cope. But the ongoing drug crisis, which claimed the lives of more than 72,000 Americans last year alone, has complicated the sacred doctor-patient relationship. Now, Uncle Sam wants to know what and how much the doctor is prescribing, lest opioids fall into the wrong hands. Even worse, politicians and the media have oversimplified and distorted the issue, placing blame on careless doctors and greedy pharmaceutical companies, when the lion's share of the blame lies with recreational drug users.

Caught in the crossfire are the millions of innocent people who are suffering from chronic pain who simply need some relief. Just how many of these people are there?

A lot. A new study by the CDC revealed that 50 million Americans (just under 20% of the age-adjusted adult population) suffered from chronic pain, which was defined as "pain on most days or every day in the past 6 months." Nearly 20 million (about 7.5%) experienced high-impact chronic pain, defined as "limiting life or work activities on most days or every day in the past 6 months."

The stratified data revealed some important insights. Obviously, as people get older, they are more likely to experience chronic pain. However, what may be less obvious is that more women (20.8%) than men (17.8%) suffer from chronic pain. The same gender gap exists for high-impact chronic pain (8.2% vs. 6.7%). There was also a noticeable divide between rural (9.8%) and urban
(7.0%) dwellers for high-impact chronic pain. Additionally, poorer or less educated people were far likelier to suffer chronic pain than richer or more educated people.

Who Are We Hurting?

This data should make us pause and consider the unintended consequences of our policies. While something needs to be done to rein in the opioid crisis, we must beware of overreach. The Seattle Times told a heart-rending story [3] of a severely injured man who committed suicide after he could no longer acquire the opioids he needed to survive.

By making it more difficult for chronic pain patients to get life-saving drugs, the data show that we are disproportionately harming women and poor people. Surely, that's an important part of the opioid story.