



SUPPORT S.5041

The Advancing Research for Chronic Pain Act (ARCPA) Introduced into the 119th Congress



WHAT YOU NEED TO KNOW

This bill would require the Centers for Disease Control and Prevention (CDC) to analyze and publish population health data on chronic pain.

Chronic pain and high-impact chronic pain are a tremendous disease burden on the United States population in terms of patient suffering, loss of productivity, and the costs of health care and disability. Despite patients' and researchers' desperate need for information, the CDC does not regularly collect, analyze, or publish comprehensive population research data on pain like it does for other major diseases.

High-quality data is necessary to identify trends, risks, and consequences of pain, and to inform interventions aimed at improving care and patient outcomes while reducing costs to the U.S. health care system.

WHY WE NEED TO COUNT PAIN

Chronic pain is an enormous public health problem.

The number of Americans impacted by chronic pain is staggering:

- Approximately **60 million** Americans, or **24.3%** of U.S. adults, experience chronic pain, according to a 2023 CDC report.
- Of that number, **approximately 20 million** experience high-impact chronic pain that interferes with the ability to function on a daily basis.
- Musculoskeletal pain is the **leading cause** of disability in the United States.
- Chronic pain has been linked to depression, anxiety, substance use and misuse, and **double the risk** of suicide.
- New cases of chronic pain now **outpace** those of diabetes, depression, and high blood pressure in the United States.
- **Two-thirds** of military veterans report living with chronic pain.
- **78%** of Medicare beneficiaries, and **89%** of Medicare beneficiaries under age 65, live with chronic pain.

Chronic pain costs the American economy hundreds of billions of dollars every year.

- The most-recent estimate (from 2010) of chronic pain's annual cost in the U.S. was **\$560 to \$635 billion**.
- In 2016, Americans spent an estimated **\$380 billion** on back, neck, and other musculoskeletal pain. This number did not include cancer pain, neuropathy, headache and migraine, pain from serious injuries such as battlefield, industrial, and motor vehicle accidents, or other types of chronic pain.
- We desperately need more-recent data on the **enormous direct and indirect costs** of chronic pain.

There is a tremendous need for regular, high-quality data to better understand the problem of pain, and to inform interventions to improve care and reduce associated costs.

We lack data on:

- The incidence and prevalence of known pain conditions.
- Demographics such as age, race, gender, socioeconomic status, and geographic location.
- Effectiveness of evidence-based approaches.
- Utilization of medical and social services.
- Indirect and direct costs.
- Risk factors, comorbidities, and health consequences

S.5041 would provide this data and more, aggregated on a public website.

References, citations, and sources found in this resource can be viewed at:

uspainfoundation.org/advocacy/advancingresearchact