

# Persistent facial pain costs economy £3,000 per year

Researchers have calculated that patients who experience facial pain cost the economy around £3,000 per year due to prescription charges, travel and absenteeism.

However, effective diagnosis and treatment could benefit patients and save money, said the research team from Newcastle University in a study published in the *Journal of Dental Research* on 16 July 2018 that looked at the hidden costs of people suffering from long-term face and mouth pain.<sup>1</sup>

An estimated 7% of the population have persistent orofacial pain (POFP), including temporomandibular disorders, phantom tooth pain, burning mouth syndrome, trigeminal neuralgia and atypical facial pain.

Previous research has highlighted the problems for patients with this condition and the resulting high costs to healthcare providers, but the financial impact on patients and employers is less clear.

Therefore a team of researchers set out to investigate the patient (out-of-pocket) and employer (indirect) costs of POFP and identify whether a well-established graded pain scale was predictive of costs.

The researchers asked 200 patients with long-term face and/or mouth pain to complete questionnaires every six months for two years to assess how individuals used the NHS for their pain.

The team collected information on the costs of the care patients received, such as what the NHS paid to provide medication, surgery or other treatments, how much patients paid out of their own pockets and how their condition affected their ability to work.

Within a six month period, participants reported an average of nine healthcare appointments, and those employed reported missing almost two days off work. This absenteeism equated to an average employer cost of £174 per person per six-months.

While the findings suggested that most study participants were unlikely to have a large number of days off work because of their pain, they did report experiencing pain while working for nearly 35 days in a six-month period, during which they noted a decrease in their productivity at work that could cost employers more than £1,000.

Overall, patients' costs were more than £650 a year, including prescription charges and travel expenses to and from appointments, while the cost to employers was almost £2,500 every 12 months, due to absenteeism and workers' loss of productivity as a result of dealing with pain.

A previous study, by the same team at Newcastle University, showed that a well-established graded pain scale could help reduce costs by providing a better structured system of care.

Their new research added weight to growing evidence that there was a need to screen patients with the Graded Chronic Pain Scale (GCPS) to ensure those most severely affected receive specialist care quickly.

Justin Durham, Professor of Orofacial Pain and Deputy Dean of Clinical Medicine at Newcastle University, led the two-year study, funded by the National Institute for Health Research.

'Our research shows that people have to go around the proverbial "mulberry bush", visiting lots of different healthcare professionals to even get close to obtaining a diagnosis never mind beginning treatment for their condition,' said Professor Durham.

'A better and more defined care pathway would improve care for those with persistent facial pain and help reduce their costs and those to the economy.'

**'Persistent facial pain is like having toothache every day of the week'**  
– Professor Justin Durham

The research also revealed patients attend many appointments with different healthcare professionals but failed to obtain effective diagnosis or treatment plan quickly.

Professor Durham added: 'Persistent facial pain is like having toothache every day of the week and, therefore, understandably has a profound and debilitating impact on people's lives, and our research has highlighted the hidden costs of this condition.'

'We're calling for the introduction of an electronic referral system which uses a Graded Chronic Pain Scale – a simple seven item questionnaire.'

'This scale would be a reliable way to determine who to fast-track to specialists and who should begin care immediately at their dentists or GP, meaning direct referrals would be made electronically to the best service local to the patient rather than relying on healthcare professionals' knowledge of who manages persistent facial pain in their locality.'

In partnership with the British Dental Association (BDA), the Newcastle University team said it was going to help dentists and GPs manage persistent facial pain by setting up study days for next year.

Peter Dyer, Chair of the BDA's Central Committee for Hospital Dental Staff, said: 'Dentists working in hospitals will have seen patients who have failed to get priority, some on the verge of suicide in the face of unmanageable pain.'

'This important research is a timely reminder that facial pain carries a huge personal and financial cost, and patients need not face barriers securing care. When so many people have been laid low by this condition GPs and high street dentists need a clear pathway to ensure patients can get the right treatment, when they need it.'

1. Breckons M, Shen J, Bunga J, Vale L, Durham J. DEEP study: Indirect and out-of-pocket costs of persistent orofacial pain. *J Dent Res* 2018; DOI: 10.1177/0022034518773310. <http://journals.sagepub.com/doi/full/10.1177/0022034518773310> (accessed 17 July 2018).

