

The Mayday Fund Annual Report

Letter from The Board of Directors

2020 The Long Hiatus from Life as Normal

2020 began as an exciting year for The Mayday Fund. Several grants were working well and there were important new proposals to explore. Then we all entered the world of Covid-19. The pace of inquiry, research, and brainstorming slowed, as we and our grantees shifted to the worlds of Zoom, social distancing, and caution.

Many of the Mayday funded research projects were suspended. Others became virtual laboratories and forums, or an amalgam of both. The adaptability and creativity of the Fund's grantees was admirable. So, also, was their commitment to finding solutions to keeping their work on target. As we think now from the vantage point of July 2021, it is remarkable how much was done during those months when it seemed difficult to know when life/work might return to normal.

The theme of resilience has been used in reference to research conduct but also for the ways that patients have responded to changes in clinical care. This might include: the move to video and telephone consultations; advances in self-assessment and report; the consideration that a medical visit requires communications skills; and the expansion of professional educational opportunities and knowledge sharing.

In the climate of the Pandemic, conditions of stress and loneliness have become more evident and complicate the already challenging environment of pain care. The process of adapting to the changes created by safety concerns, meant more restrictions on access to health care and more awareness of the risks. As some clinicians report, this mix of ambient anxiety and behavioral symptoms has created new vulnerabilities in those who suffer with chronic pain, especially those whose pain is considered as complex and high impact.

At the same time, there is an emerging emphasis on the social determinants of health. Pain, like many other conditions and symptoms, is now seen with an acknowledgement that context may be both part of the problem and the treatment. This trend has accelerated the development of public health strategies to address age, race, ethnicity, class, and geographical region, as they factor in the care of pain.

So, while some of the research and clinical Mayday grants slowed down during 2020, as was true with Federal initiatives, there were still many achievements. As the vaccinated population in many parts of the US and Canada has increased, Mayday funded projects are once again moving forward .

Among the Mayday Fund highlights of 2020 were:

- A collaborative of pediatric hospitals is now using Virtual Reality as a therapeutic tool to aid in Pediatric Pain Rehabilitation
- Research at several institutions is focusing on the role of genetic factors in understanding the effect and impact of genetics on pain
- Several initiatives supported by The Fund focus on communications skills and creating new opportunities for dissemination of research findings through Journals, Podcasts and Symposia
- Projects in the Emergency Department are targeting the better assessment and treatment of pain
- The move to virtual communications training and networking allowed us to continue to train a new cohort of Mayday Fellows, who have adapted to the shift from in-person training with eagerness and commitment

In the pain world more generally, one of the advances in recent years was the decision on the part of the United States Centers for Disease Control (CDC) to analyze data from the 2019 National Health Interview Survey to track levels of pain and to differentiate between chronic pain and high impact chronic pain. In the National Center for Health Statistics Data Brief, No 390, November 2020, chronic pain and high impact chronic pain are differentiated as follows:

- Chronic pain is based on responses of ‘most days’ or ‘every day’ to the survey question: “In the past 3 months, how often did you have pain? Would you say never, some days, most days, or every day?”
- High-impact chronic pain is defined as adults who have chronic pain and who responded ‘most days’ or ‘every day’ to the survey question, ‘Over the past 3 months, how often did your pain limit your life or work activities? Would you say never, some days, or every day?’¹

This differentiation will potentially allow more precision in both pain assessment and treatment. The summary data from 2019 showed that overall: 20.4 % of those surveyed reported chronic pain (19% men and 21.7% women) and 7.4% of those reported high impact chronic pain (6.3% men and 8.5% women).

While there is exciting good news in terms of greater support and work being done to address pain, there still remains the challenge of how pain is treated in the context of the ‘Opioid Epidemic.’ The social challenge of illicit drug use remains relentlessly complex, as the excessive distribution (both legal and illegal) of these drugs poses a threat to society as a whole. Throughout the year, the National Institutes of Health’s “Helping to End Addiction Long-term Initiative (HEAL)” targeted Federal resources to addressing research on both pain and addiction.

¹ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, <https://www.cdc.gov/ncj/hs/products/index.htm>

The double focus of the HEAL Initiative is “funding hundreds of projects nationwide, wherein researchers are taking a variety of approaches to tackle the opioid epidemic through understanding, managing, and treating pain, while improving treatment for opioid misuse and addiction.”² Research funded through this initiative is moving the agenda for a better understanding of what pain is and how it impacts both the persons in pain and the worlds they inhabit. It has created momentum for the fields of pain science and management.

While 2020 was, we hope, an anomaly, it also was a year where the clinicians and researchers who work on behalf of The Mayday Fund persevered, and in many instances found creative ways to adapt to the restrictions imposed by Covid-19. As may be true in many areas of life during this hiatus from the ‘normal,’ there was courage and good will, especially for those working on the front lines of the pain field.

Importantly, most of the Fund’s projects are now fully operating and new project proposals are accelerating. There is momentum in the research science and clinical care for pain and, as the Federal initiatives mentioned above indicate, the medical and social challenges of pain are gaining prominence as a priority for both individual and public health initiatives.

July 21, 2021

² <https://heal.nih.gov>