



Precise medical terminology and definitions – Evidence that supports the implementation of ICD-11

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Chronic pain: Why is it important?

Definition (Treede et al., 2015, 2019)

- Pain that persists or recurs for > 3 months
- Always bio-psycho-social



Prevalence

- Europe: ca. 19 % (Breivik et al., 2006)
- LMIC: ca. 18 % (Nunes Sá et al., 2019)

Consequences

- Inability to work (z. B. Breivik et al., 2006)
- Disability in daily live and decreased participation, e.g., social life (Froud et al., 2014)
- Emotional distress, e.g., depressed mood, decreased quality of life (Häuser et al., 2014; Wang et al., 2018)
- High societal and economic costs (Häuser et al., 2013; James et al., 2018; Deutscher Bundestag, 2003)

Chronic pain in the ICD-10

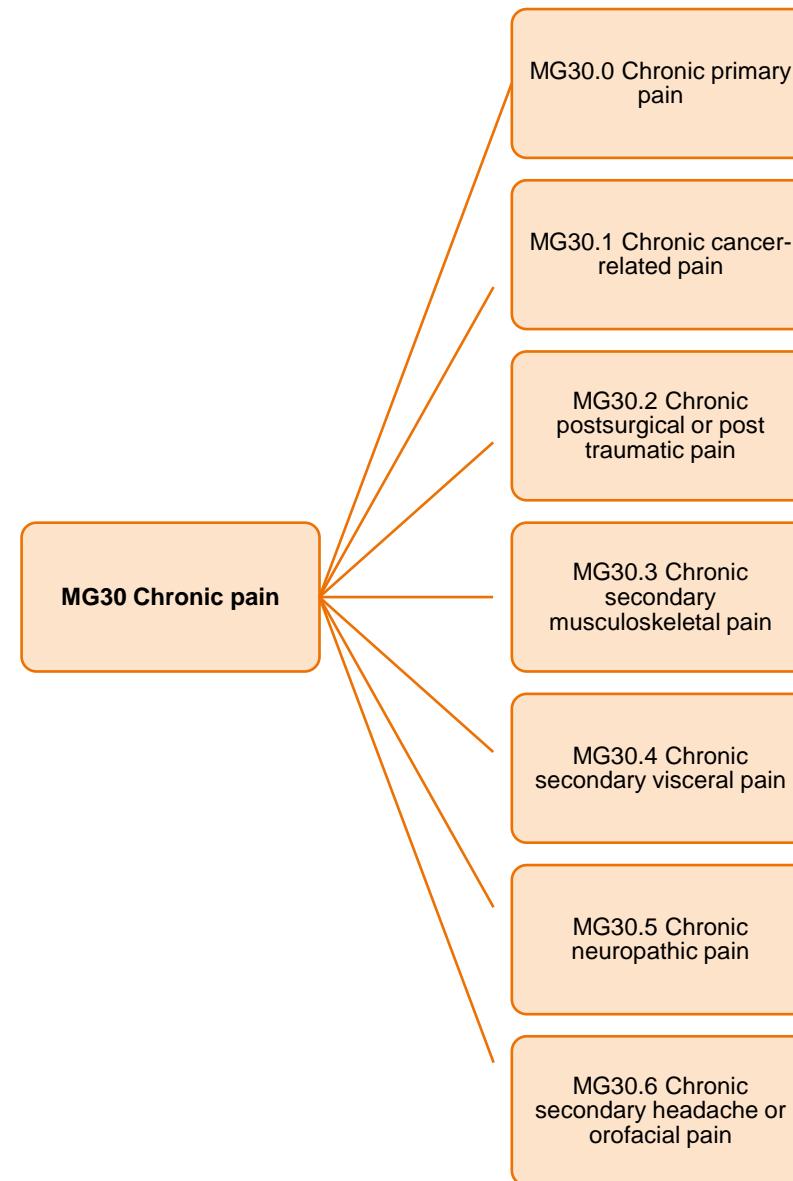
Inadequate representation of chronic pain in the ICD-10 (Rief et al., 2008, 2010, 2012)

- Codes scattered among many different chapters (e.g., M, R, F)
- Codes do not reflect the biopsychosocial nature of chronic pain
- Missing diagnoses (e.g., chronic neuropathic pain)
- Ambiguous diagnoses (e.g., R52.1 Chronic intractable pain)

Consequences (Rief et al., 2008, 2010, 2012; Treede et al., 2019)

- Inadequate access to pain treatment
- Underestimation of the prevalence of chronic pain
- Underestimation of the true burden of chronic pain

Chronic pain in the ICD-11

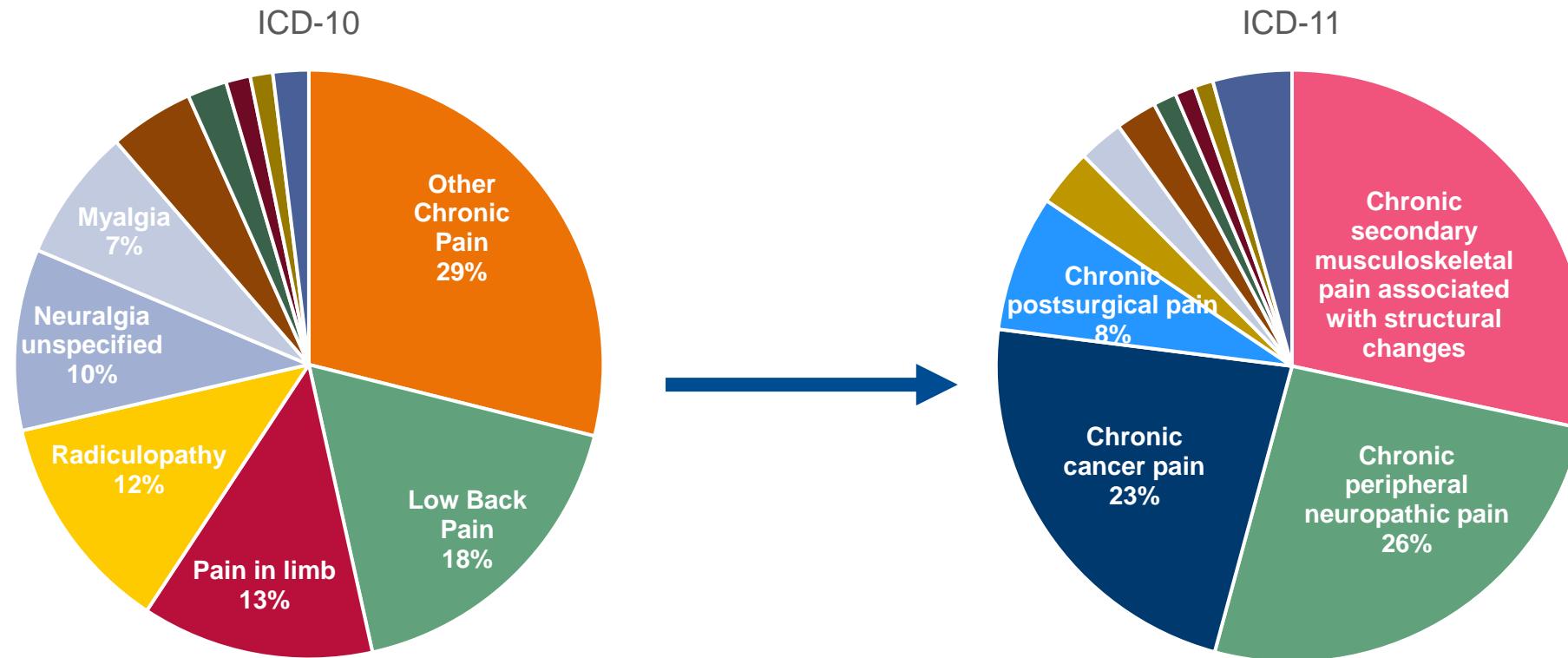


How does ICD-11 change chronic pain diagnoses?

Results of retrospective coding of patient records:

(Zinboonyahgoon et al., 2021)

- Sample: 8714 Chronic pain cases



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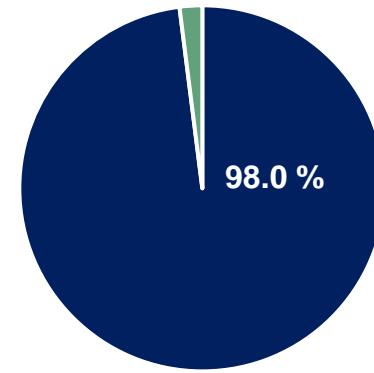
- Sample: 8714 Chronic pain cases

ICD-11 can

- Provide more accurate epidemiological data
 - Estimate disease burden
 - Inform treatment decisions (e.g., DRG)

Does ICD-11 meet classification criteria? Part 1

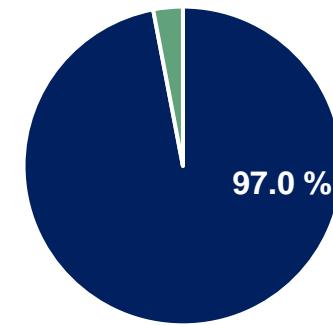
Amount of patients who fall within one chronic pain category:



- One category
- > 1 categories

→ The categories are mutually exclusive

Amount of patients who can be assigned to one of the seven main categories

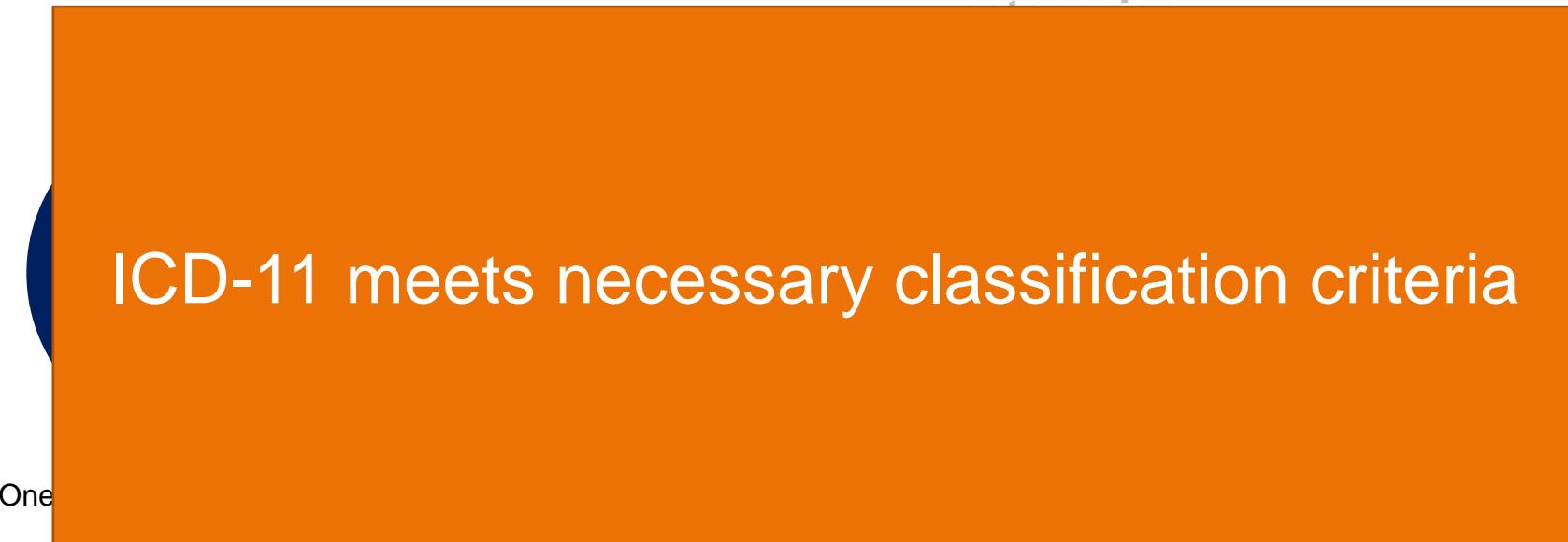


- Can be assigned to main category
- Cannot be assigned to main category

→ The categories are exhaustive

Does ICD-11 meet classification criteria? Part 1

Amount of patients who fall within one chronic pain category:



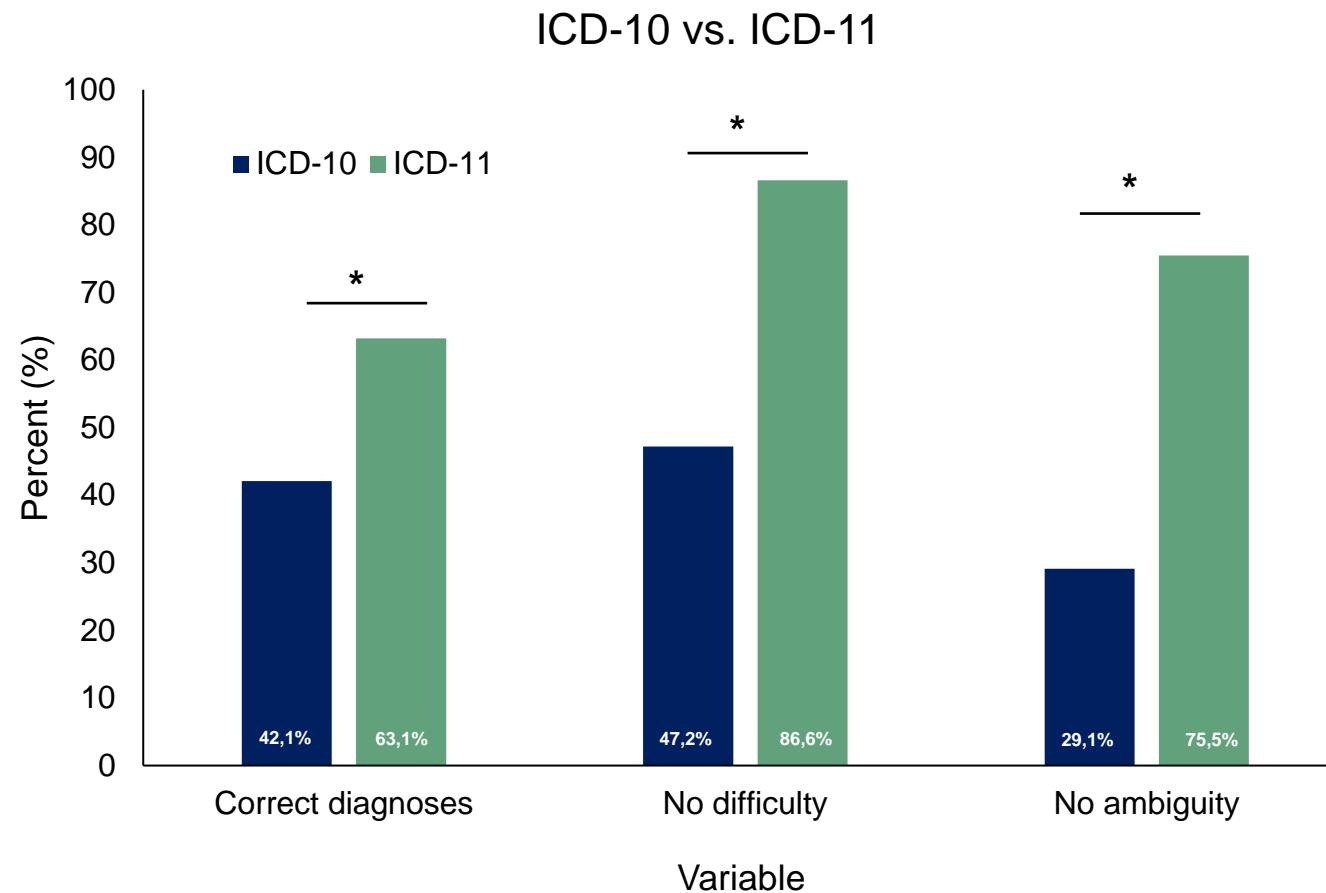
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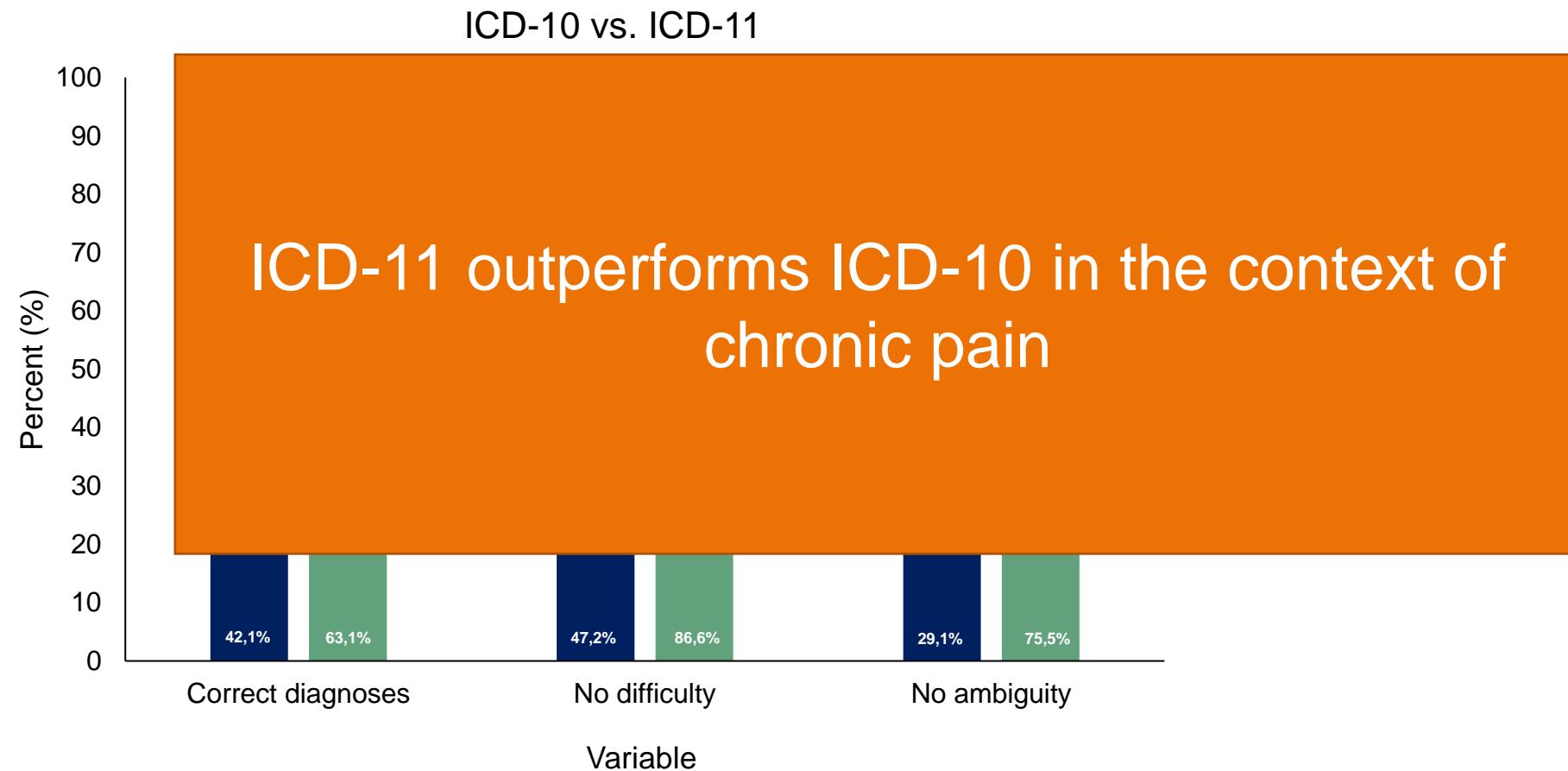
Does ICD-11 meet classification criteria? Part 2

Results of WHO Field Testing:



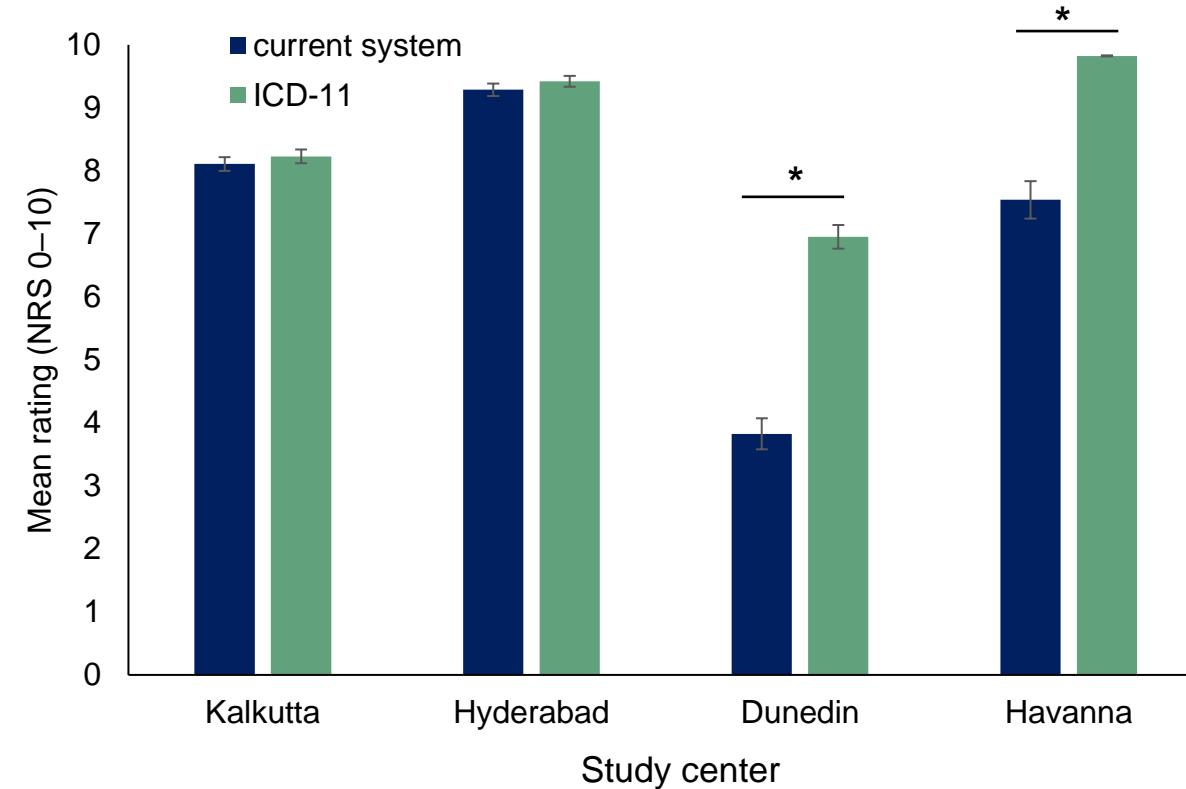
Does ICD-11 meet classification criteria? Part 2

Results of WHO Field Testing:



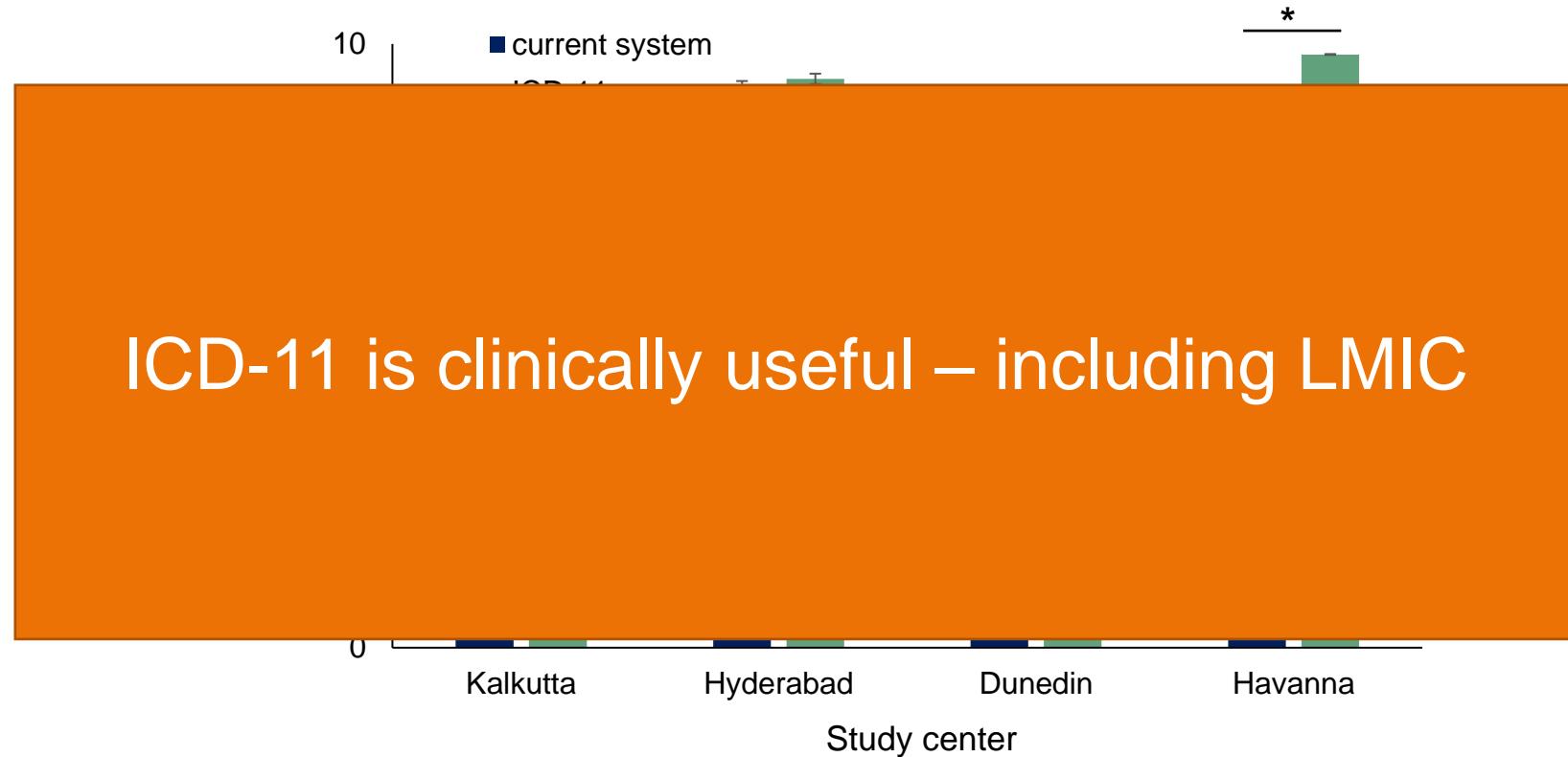
Clinical utility of the ICD-11

Clinical utility as rated by clinicians: 8.45 ± 1.69 (Rating 0–10)



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ICD-11 is clinically useful – including LMIC

Perspective of people with lived experience

N = 690 persons with the lived experience of chronic pain

Mean pain duration: 17.2 ± 13.5 years

Mean rating of the ICD-11 diagnoses: 1.75 ± 1.47 (NRS -5 to 5)

Endorsement scale	Total sample
	M ± SD
Treatment expectations	1.47 ± 1.92
Openness	2.95 ± 1.93
Understanding by others	1.51 ± 1.92
Stigma	1.47 ± 2.0
Overall opinion	1.87 ± 1.98

Perspective of people with lived experience

“I genuinely think the new classification is more appropriate, accurate and could very well help people understand their pain better, explain their pain better and allow doctors to give more appropriate treatment faster.”

“I think this will make a big difference in the treatment and diagnosis of chronic pain. If doctors have better codes the communication between your care team would be faster/easier and more concise”

“When I saw the information here I read to [my partner] the descriptions and it makes it much easier to describe and talk about me pain.”

Perspective of people with lived experience

"I genuinely think the new classification is more appropriate, accurate and could very well help people understand their pain better, explain their pain better and allow doctors to give more appropriate treatment faster."

"I think this would be far easier for me to understand than the current classification of chronic pain. If doctors understood it better, I think they would be far more willing to listen to what I say and would be far more likely to refer me to a pain care team"

Endorsement and support by people with the lived experience of chronic pain

"When I say I have chronic pain, it makes it much easier for people to understand what I'm going through and it makes it much easier for me to get the support and the treatments and it makes it much easier for me to explain my symptoms to my doctor."



Thank you for your attention!

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Suggested Further Reading

Barke, A. & Korwisi, B. (2023). Making chronic pain count: Empirical support for the ICD-11 classification of chronic pain. *Current Opinion in Anesthesiology*, 36(5), 589 – 594.
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