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Public Attitudes on Regulatory Changes Affecting Pain Management

NCPIE Stakeholder Forum March 19, 2015

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#### WHO WE ARE

The Alliance for Aging Research is the leading non-profit organization dedicated to accelerating the pace of scientific discoveries and their application in order to vastly improve the universal human experience of aging and health.

www.agingresearch.org

## **Pain and Older Adults**



- Persistent pain affects 100 million Americans-more than diabetes, heart disease, and cancer combined.
- At least 1 in 3 Americans will experience severe, persistent pain during their lifetime.
- Around half of adults 65 and older have been diagnosed with arthritis, a common cause of persistent pain.
- Persistent pain is expensive, with an annual cost of at least \$560 to \$635 billion.
- Older adults too often believe that pain is just a normal part of aging.



### **Partners in Pain Awareness**



KnowYourDose.org Acetaminophen Awareness Coalition

**Pain Care Forum** 





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A M E R I C A N OSTEOPATHIC ASSOCIATION

## **Survey History**



- FDA concern over misuse and unintentional overdose of acetaminophen
- Alliance and other stakeholders concerned over possible actions that would limit availability of OTC acetaminophen products
- 2009 survey purpose
  - Better understand the role of acetaminophen in the lives of older adults;
  - Seek their reaction to the recommendations being considered by the FDA advisory committee; and
  - Determine what they might do if they no longer had access to higher strength doses of acetaminophen for pain management.
- Support provided by McNeil Consumer Healthcare



- Survey Firm Clarus Research Group
- **Date Conducted** December 18–30, 2014
- Sample SizeN = 1,600
- Sample UniverseU.S. adults 18–59 years old (800), U.S. adults 60 years<br/>old and older (800)MethodologyLive telephone interviewing, landline and cell callingAnalysisRonald A. Faucheux, Ph.D., President and Chief Analyst<br/>Andrew Rugg, Director and Analyst





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### PAIN RELIEVER USE

Respondents who mostly use over-the-counter pain relievers:



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### Pain Reliever Use



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### **Pain Reliever Use**



60+

Those respondents who said they have used Tylenol or an equivalent store brand over the last few months used:



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### VIEWS ON GOVERNMENT ACTION



"Currently, you can buy extra-strength and extended-release Tylenol or an equivalent store brand product over-the-counter without a doctor's prescription. Do you think it would be a good idea or a bad idea if the Food and Drug Administration changed that policy to require a doctor's prescription to buy extra-strength Tylenol or an equivalent store brand?"



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#### IMPACT ON PAIN MANAGEMENT

#### When presented with this question-

"If the Food and Drug Administration changed the rules to require a doctor's prescription to buy extra-strength Tylenol or an equivalent store brand product, do you think that would make it harder to get safe and effective pain relief, easier to get safe and effective pain relief, or would it not make any difference?"



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If the Food and Drug Administration changed the rules and required a doctor's prescription to buy extra-strength and extended-release Tylenol or an equivalent store brand—which of these four things would you most likely do? <sup>1444 people responded</sup>



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### Respondents who would "most likely" take more of lower dose



	Col	lege		Inco	ome		Pain Incidence		Pain Severity	
	Non- College Grad	College Grad	>\$25K	\$25K to \$49K	\$50K to \$99K	\$100K or more	Pain Every Day	Pain Other	Mild	Bad
It would be adequate to handle your pain level	53%	58%	35%	56%	57%	64%	48%	59%	60%	39%
Don't have prescription insurance coverage	6%	3%	5%	-	4%	2%	6%	4%	4%	9%
Would have trouble getting to a doctor's office to get a prescription	25%	16%	48%	19%	17%	17%	24%	19%	19%	28%
None of the above	15%	20%	10%	26%	21%	15%	19%	17%	16%	21%

### Respondents who would "most likely" take more of lower dose



	Age			Gender		Gender/Age				Race	
	18 to 59	60+	65+	Male	Female	Male 18 to 59	Male 60+	Female 18 to 59	Female 60+	White	Nonwhite
It would be adequate to handle your pain level	55%	58%	58%	59%	54%	54%	65%	55%	52%	56%	59%
Don't have prescription insurance coverage	5%	3%	2%	3%	5%	5%	1%	6%	5%	4%	6%
Would have trouble getting to a doctor's office to get a prescription	22%	18%	18%	20%	21%	23%	16%	21%	20%	21%	16%
None of the above	17%	19%	20%	17%	19%	17%	16%	17%	21%	18%	17%



### Respondents who would "most likely" take more of lower dose



 Actual Number Diagnosed or Treated with Condition (respondents could report multiple conditions)



### **Respondents who would "most likely" change pain relievers**

	Coll	ege		Inco	ome		Pain Incidence		Pain Severity	
	Non- College Grad	College Grad	>\$25K	\$25K to \$49K	\$50K to \$99K	\$100K or more	Pain Every Day	Pain Other	Mild	Bad
Regular strength Tylenol or equivalent store brand would not be adequate to handle your pain	25%	29%	23%	33%	26%	25%	31%	25%	25%	34%
Don't have prescription insurance coverage	8%	6%	9%	12%	6%	3%	4%	8%	8%	4%
Would have trouble getting to a doctor's office to get a prescription	28%	30%	24%	20%	35%	36%	23%	31%	29%	32%
None of the above	35%	33%	40%	31%	31%	35%	38%	32%	35%	29%

# Respondents who would "most likely" change pain relievers

	Age			Gender			Gende	Race			
	18 to 59	60+	65+	Male	Female	Male 18 to 59	Male 60+	Female 18 to 59	Female 60+	White	Nonwhite
Regular strength Tylenol or equivalent store brand would not be adequate to handle your pain		30%	28%	27%	27%	28%	25%	22%	33%	26%	29%
Don't have prescription insurance coverage	8%	6%	5%	8%	7%	7%	9%	9%	3%	6%	10%
Would have trouble getting to a doctor's office to get a prescription	34%	22%	21%	32%	27%	36%	25%	33%	19%	28%	32%
None of the above	30%	39%	43%	30%	37%	26%	36%	33%	41%	36%	28%





### **Respondents who would "most likely" change pain relievers**



 Actual Number Diagnosed or Treated with Condition (respondents could report multiple conditions)

## **Key Points**



- Significant numbers of those over and under age 60 rely on OTC acetaminophen products to manage their pain
- Those under age 60 and over age 60 prefer more education on safe use to further restriction by FDA
- For various reasons, many respondents would chose to take more regular strength acetaminophen or switch to another OTC pain reliever as opposed to seeking a doctor's prescription
- Within the populations that said they would take more or switch, there are existing health conditions for which this would be a less appropriate alternative
- It is our view that the FDA needs to consider this information before taking additional action to limit availability of acetaminophen doses over 500 mg

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Thank you for your attention!

**Questions? Comments?** 

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