

Portfolio title: Cancer Pain

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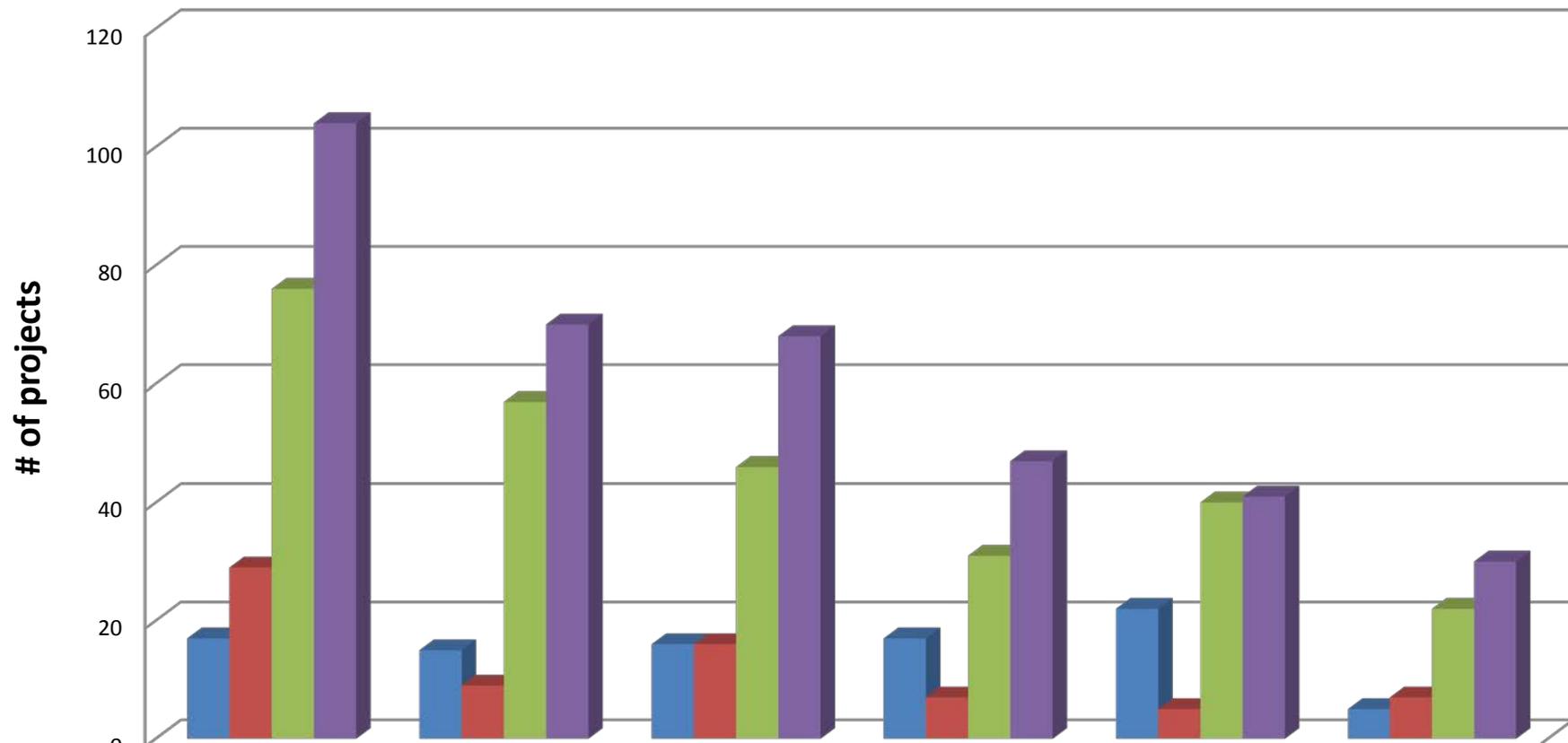
Ann O'Mara

Unique Aspects of Cancer Pain

- Prevalence
 - 30% to 50% of patients on active treatment
 - 80% to 90% of terminally ill patients
 - 30% to 40% of cancer survivors
- Unrelieved pain is the most feared symptom associated with a cancer diagnosis
- Cancer pain has unique characteristics
 - Numerous etiologies including the disease itself and its treatment
 - Mechanisms that underlie various types of cancer pain are unique
 - Oncology patients can experience multiple types of cancer and non-cancer pain

To compare number of projects in basic, translational or clinical research for each top condition

Basic Translational Clinical Total # grants

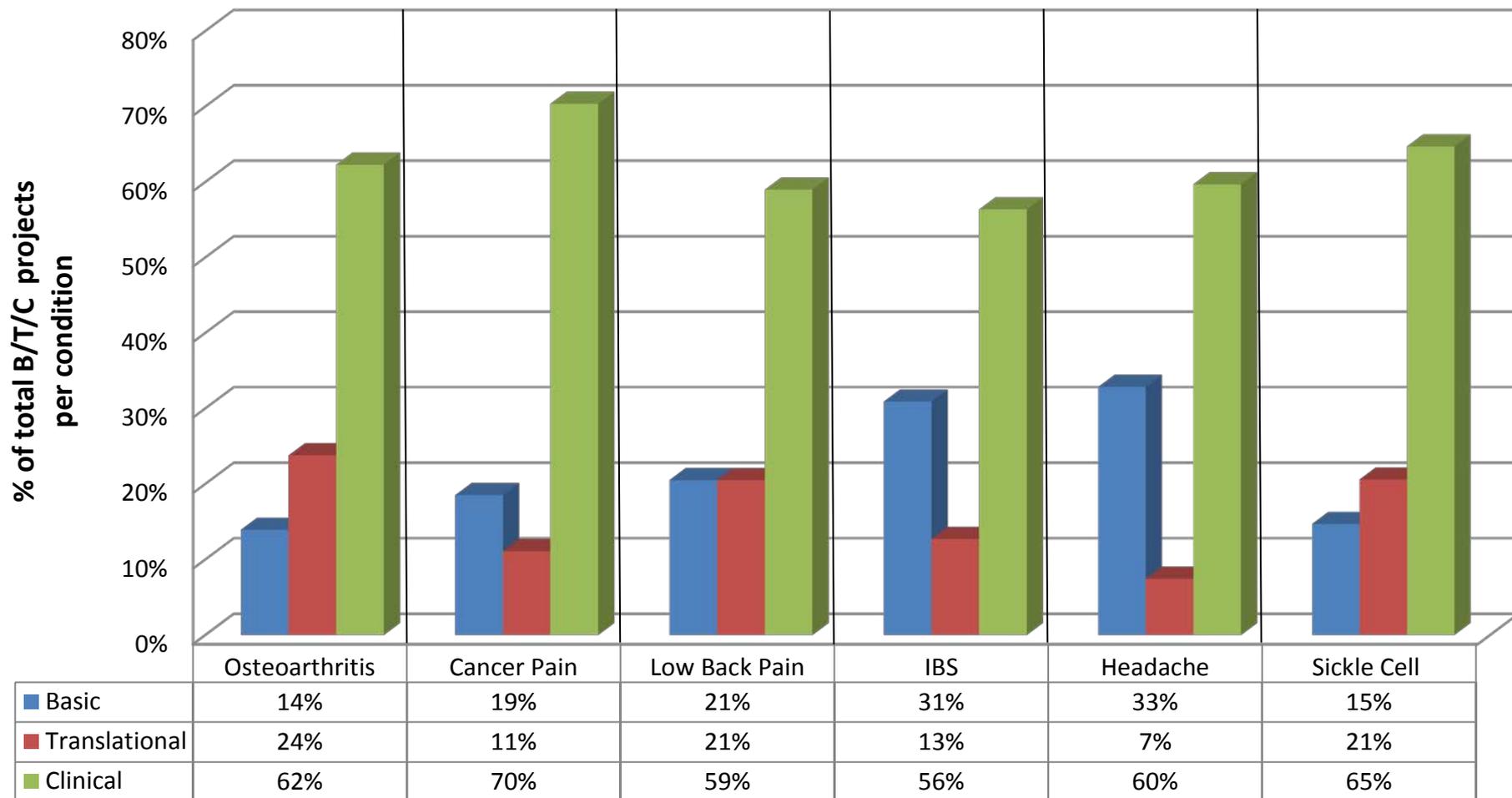


	Osteoarthritis	Cancer Pain	Low Back Pain	IBS	Headache	Sickle Cell Pain
Basic	17	15	16	17	22	5
Translational	29	9	16	7	5	7
Clinical	76	57	46	31	40	22
Total # grants	104	70	68	47	41	30

*Total # grants does not equal basic + translational + clinical because one grant can belong to more than one category

To compare basic, translational and clinical research *within* each top condition by percentage of total B/T/C projects

Basic Translational Clinical



Overview of the portfolio - 1

- Grants can be classified into five broad areas
 - Preclinical descriptive studies (n=9)
 - Clinical descriptive studies (n=7)
 - Preclinical intervention studies (n=4)
 - Clinical intervention studies (n=21)
 - Provider education studies (n=6)
- Preclinical descriptive studies (n=9)
 - Focused on evaluation of interactions between cancer cells and sensory neurons that result in algescic or inhibit analgesic responses
 - Models – bone pain, prostate cancer, pancreatic cancer, stromal cell environment
 - Mechanistic targets – chemokines, capsaicin, endocannabinoid signalling, vallinoid receptor

Overview of the portfolio - 2

- Clinical descriptive studies (n=7)
 - Five studies are focused on the elucidation of the biological basis for multiple symptoms in oncology patients
 - Inflammation or sickness behavior
 - Symptom cluster
 - Pain is one of many symptoms withing the clusters
 - Two studies are focused on optimizing PROs (one in adults, one in pediatrics)
- Preclinical intervention studies (n=4 on disparate topics)
 - Development of a spinal delivery system for gene therapy
 - Preclinical evaluation of a herbal treatment for cancer pain
 - Evaluation of cannabinoid CB2 agonists for bone pain
 - Evaluation of anti-NGF and TrkA blockers for bone pain

Overview of the portfolio - 3

- Clinical intervention studies (n=21)
 - Cancer pain specific intervention studies (n=5)
 - Ultrasound ablation for metastatic bone cancer
 - Botulinum toxin for painful cutaneous leiomyomas
 - Biobehavioral interventions to improve cancer pain management (n=3)
- Intervention studies for multiple symptoms in oncology patients (n=8)
 - Reduce inflammatory mediators
 - Pain is one of many symptoms being evaluated
- Multiple symptoms and/or end of life outcomes (n=8)
 - Main focus is on the provision of palliative care services
- Note – only one intervention study in pediatrics, elderly, cancer survivors, family caregivers

Overview of the portfolio - 4

- Provider education studies (n=6)
 - Four grants focused on palliative care education (3 adults, 1 pediatrics)
 - One grant focused on education of social workers on the psychosocial health needs of pediatric and adult oncology patients
 - One grant is focused on the development of a multimedia training program to teach cognitive behavioral approaches for pain management to providers who care for Native American communities

Highlights of the portfolio

- Highly innovative areas that have the potential to advance the field
 - Development of preclinical models of cancer pain
 - Bone pain
 - Pancreatic pain
 - Oral cancer pain
 - Cancer cell and sensory neuron interactions
 - Elucidation of mechanisms for multiple symptoms in oncology patients

Relevance to other pain conditions and opportunities to collaborate

- Preclinical studies
 - Do cancer pain mechanisms provide insights for other pain conditions?
 - Behavioral models can be used in other pain conditions
- Clinical studies
 - Biological basis of symptom clusters may apply to other chronic medical conditions
 - Biobehavioral interventions that are effective in cancer pain management may be useful in other chronic pain conditions

Potential overlap or shared interests among agencies or NIH institutes

- Cancer cell – sensory neuron interactions
- Symptom clusters in oncology patients
- Provision of palliative care services
 - “Lessons learned” from this initiative in how to stimulate research in other areas

Gaps & Opportunities: Research areas needed or untapped

- Analysis of secondary codes
 - 24 of 29 areas = 0
 - Maximum percentage was 14% for unique populations

% of projects in a secondary code within top condition	Top Conditions					
	OA	Cancer	LBP	IBS	HA	SICKLE
Secondary Code						
1. Neurobiological/gliar mechanisms of nociception and pain:	8%	12%	6%	19%	16%	9%
2. Genetics and genomics of nociception and pain:	1%	3%	0%	4%	3%	7%
3-Other "omics" of pain:	5%	1%	1%	5%	0%	2%
4. Mechanisms of and treatments for transitions in pain phases:	3%	2%	4%	5%	6%	0%
5. Development and validation of animal and human pain models:	1%	4%	4%	10%	11%	9%
6. Diagnosis/case definitions:	14%	0%	2%	0%	4%	2%
7. Pharmacological mechanisms and treatment:	4%	12%	3%	2%	5%	7%
8. Non-pharmacological mechanisms and treatment:	28%	12%	26%	5%	4%	4%
9. Biobehavioral and psychosocial mechanisms and treatment of pain:	7%	8%	13%	10%	3%	4%
10. Medical management of pain	0%	4%	3%	1%	0%	7%
a. Self management approaches (subcategories are all set to zero)	0%	0%	0%	0%	0%	0%
b. Team based treatment approaches	0%	0%	0%	0%	0%	0%
11. Analgesic development:	0%	0%	0%	0%	0%	4%
12. Development of device and therapy delivery systems:	1%	2%	0%	0%	1%	4%
13. Pain outcomes assessments and measures, and novel health information technology as tools for decision making support of pain management:	6%	2%	9%	5%	5%	13%
14. Development of informatics, data bases, and information technologies as tools for pain research:	1%	0%	3%	1%	0%	0%
15. Pain education	5%	11%	0%	0%	0%	5%
a. Health care provider education (subcategories are all set to zero)	0%	0%	0%	0%	0%	0%
b. Caregiver education	0%	0%	0%	0%	0%	0%
c. Patient education	0%	0%	0%	0%	0%	0%
d. Public education	0%	0%	0%	0%	0%	0%
16. Epidemiology of pain and pain disorders:	1%	1%	1%	2%	4%	0%
17. Health disparities in pain, pain management, and access to care:	1%	5%	0%	0%	0%	11%
18. Pain and women's and minority's health research	0%	2%	1%	4%	4%	7%
a. women (subcategories are all set to zero)	0%	0%	0%	0%	0%	0%
b. minorities	0%	0%	0%	0%	0%	0%
19. Unique populations	8%	14%	4%	5%	6%	0%
a. Pediatric (subcategories are all set to zero)	0%	0%	0%	0%	0%	0%
b. Elderly	0%	0%	0%	0%	0%	0%
c. end of life	0%	0%	0%	0%	0%	0%
d. Disabled	0%	0%	0%	0%	0%	0%
e. military	0%	0%	0%	0%	0%	0%
20. Sex and gender differences in pain	1%	0%	2%	3%	3%	0%
a. Male (subcategories are all set to zero)	0%	0%	0%	0%	0%	0%
b. female	0%	0%	0%	0%	0%	0%
21. Comparative effectiveness research:	0%	1%	8%	1%	3%	0%
22. Pain and substance use and abuse/addiction	0%	0%	1%	0%	0%	0%
23. Analgesic drug safety	0%	0%	0%	1%	0%	0%
24. Pain and trauma	1%	0%	0%	0%	0%	0%
25. Pain prevention	5%	1%	3%	2%	1%	0%
26. Chronic overlapping pain conditions in an individual	0%	0%	0%	1%	1%	0%
27. Pain and other non-pain comorbidities	1%	1%	1%	1%	9%	2%
28. Training in pain research	2%	2%	3%	9%	13%	4%
29. Health care utilization	0%	0%	3%	0%	0%	2%
	100%	100%	100%	100%	100%	100%

Gaps & Opportunities: Research areas needed or untapped

- Development of additional preclinical models
 - Post-surgical persistent pain
 - Mucositis
 - Musculoskeletal pain associated with AIs
- Appropriate animal models for cancer pain (i.e., with or without cancer)
- Detailed phenotyping and genotyping of common cancer pain syndromes
- Evaluation of how persistent pain impacts patients' treatment and survival (e.g. adherence, dose reductions)

Gaps & Opportunities: Research areas needed or untapped

- Evaluation of the impact of persistent pain on cancer survivors (adults and children)
- Impact of transitions in cancer care (e.g., from oncologist to primary care) on pain management
- Development of new mechanistically-based analgesics
- Studies of cancer pain in special populations (e.g., pediatrics, elderly, ethnically diverse patients, survivors)