

Background

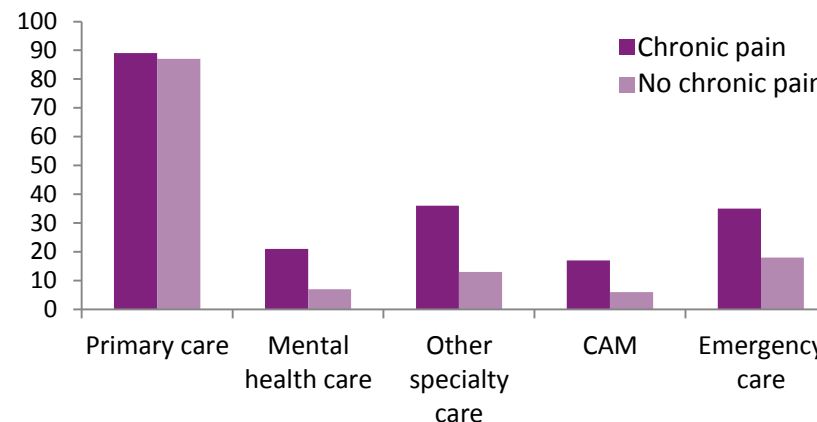
- The population prevalence of pediatric chronic pain is not well characterized, due to lack of nationally representative data.
- Pediatric chronic pain prolongs inpatient stay and increases hospitalization costs, but the population-level association between chronic pain and health care utilization is unclear.
- We used national survey data to describe the prevalence of pediatric chronic pain, and compare health care utilization among children ages 0-17 years by presence of chronic pain.

Methods

- Secondary analysis of de-identified data from 2016 National Survey of Children's Health (NSCH), exempt from IRB review.
- NSCH surveyed caregivers of children 0-17 years, collecting data on health status and health care utilization.
- Outcome data included any use in past 12 months of: primary care, mental health care, specialty care other than mental health care, complementary and alternative medicine (CAM), and emergency care.
- Chronic pain defined as: "frequent or chronic difficulty [with] repeated or chronic physical pain, including headaches or other back or body pain?" OR moderate or severe headache reported.

Results

Health care utilization by presence of chronic pain (weighted %)



Adjusted associations between chronic pain and health care utilization

	OR	95% CI	P
Primary care	1.4	(1.0, 1.9)	0.052
Mental health care	0.9	(0.6, 1.2)	0.446
Other specialty care	2.0	(1.6, 2.5)	<0.001
CAM	2.3	(1.8, 3.0)	<0.001
Emergency care	1.6	(1.3, 2.0)	<0.001

Multivariable logistic regressions adjusting for survey weights and complex sampling design. Covariates included physical comorbidities, mental health comorbidities, child's age, child's gender, child's race/ethnicity, parents' educational attainment, type of insurance coverage, family income, language spoken in the home, caregiver-reported general health status of the child, and state of residence.

Results

- **43,712** children included in analysis; **6% had chronic pain.**
- Common physical comorbidities of chronic pain: allergies (42%), asthma (21%), and heart conditions (4%).
- Common mental health comorbidities of chronic pain: anxiety (23%), ADHD (17%), and depression (13%).
- After multivariable adjustment, children with chronic pain were more likely to use **emergency care, specialty care other than mental health care, and CAM.**

Discussion

- Estimated 6% population prevalence of pediatric chronic pain associated with functional limitation.
- High use of emergency care among children with chronic pain may be related to poor control of chronic pain in this population.
- High use of CAM among children with chronic pain may be related to high acceptance of CAM for treating chronic pain.

References

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2. King S et al. Pain 2011;152:2729-38.
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4. Toliver-Sokol M et al. J Pain 2011;12:747-55.