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Francis Collins: We Can't Forget the People with Chronic Pain in Fight Against Opioid Abuse

[The following appeared on FierceHealthcare.com on June 4, 2018.](#)

National Institutes of Health Director Francis Collins, M.D., is warning against forgetting chronic pain patients as his agency looks for solutions to curb opioid abuse. Speaking at an NIH meeting on chronic pain and the opioid crisis, he said the healthcare system is grappling with a "joint crisis of pain and addiction."

"I think all of us that are concerned about this worry sometimes that we talk about one without realizing the other requires intense attention," Collins said. He acknowledged the overwhelming push to reduce the number of opioids prescribed to patients. On Thursday, [the American Medical Association reported](#) a more than 20% drop in the number of opioids prescribed to patients in the last five years as a result.

"But what about the people with chronic pain-24 million of them-with daily pain? What are they supposed to have available?" Collins said. "We all agree opioids are not a great solution. But what other solutions do we have for people with severe daily pain? Not nearly enough."

He was also discussing [the NIH's new HEAL initiative](#), which stands for Helping to End

Addiction Longterm, which was launched in April.

Meant to speed scientific solutions to address the national opioid public health crisis, Congress is nearly doubling NIH funding for research on opioid addiction and pain to \$1.1 billion. This is on top of strides that have already been made in recent years in neuroscience research to improve understanding of what is happening in the brain and nervous system when it comes to addiction and pain.

"We need to accelerate the translation of that knowledge and develop, for the purposes of dealing with the chronic pain that afflicts so many people, nonaddictive approaches to pain management. Those might be drugs or they might be devices or they might be nonpharmacological approaches including behavioral interventions," he said.

In particular, Collins said the HEAL initiative is trying to push academic researchers and the private sector to identify the signatures of patients who transition from acute to chronic pain to identify those most at risk, to find better targets for pain management and create better screening platforms to test interventions and therapeutics development.

"We would very much like to have better means of accessing whether pain management is working beyond the one to 10 scale which we all realize is flawed in multiple ways and affects many of the decisions about whether something is working or not," Collins said.

Collins said NIH is in the early stages of creating a clinical pain research network and securing commitments from pharmaceutical companies who are willing to make available data sets and assets such as compounds that they are no longer working on to allow other researchers to test for efficacy. It would involve incentivizing companies to bring interventions from small molecules, biologics or natural products into a well-standardized preclinical screening program to assess the potential value, Collins said. He compared the approach of the initiative to how NIH has addressed epilepsy drugs.

Collins said he would release more details on the HEAL program on June 15 during a public session of the Advisory Committee to the Director meeting.

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The TMJ Association (TMJA) is the only patient advocacy organization fighting for the best science that will lead to a greater understanding of Temporomandibular and related disorders, as well as safe and effective treatments. We cannot *change the face of TMJ* without YOU.

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About The TMJ Association

Changing the Face of TMJ

The TMJ Association, Ltd. is a nonprofit, patient advocacy organization

whose mission is to improve the quality of health care and lives of everyone affected by Temporomandibular Disorders (TMD). For over 25 years, we have shared reliable information on TMD with people like you. We invite you to visit our website, www.tmj.org.

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