Recent Articles In Pain Physician Contend That American Workers May Be Denied High Quality, Cost-Effective Pain Care

Paducah, KY – According to recent Pain Physician articles, guidelines produced by the American College of Occupational and Environmental Medicine (ACOEM) may prevent injured workers from receiving the majority of the medically necessary and appropriate pain procedures. According to primary author Dr. Laxmaiah Manchikanti, “the ACOEM recommendations do not appear to have been based on a careful review of the literature, overall quality of evidence, standard of care, or expert consensus. Thus, they may result in reduced medical quality of care; may severely hinder access to appropriate, medically needed and essential medical care; and finally, they may increase costs for injured workers, third party payers, and the government by transferring the injured worker into a non-productive disability system.”

The Pain Physician articles authors are Laxmaiah Manchikanti, MD, Vijay Singh, MD, Richard Derby, MD, Standiford Helm II, MD, Andrea M. Trescot, MD, Peter S. Staats, MD, Joshua P. Prager, MD, and Joshua A. Hirsch, MD and contributors David S. Kloth, MD, B. Todd Sitzman, MD, MPH, Eric Hauth, MA, MS, and Michael Whitworth, MD.
The authors demonstrate that ACOEM’s review of the interventional pain care literature failed to include substantive input from the relevant medical professional societies expert in interventional pain medicine. Further, over half of all ACOEM recommendations are based simply on the consensus opinion of their guideline author panels.

“Acceptance of ACOEM Guidelines will have a devastating and far reaching impact on Workers compensation claimants,” according to David S. Kloth, MD and Director of the Connecticut Pain Care. In the modern day environment, workers’ compensation costs continue to be a challenge, with a need to balance costs, benefits, and quality of medical care. The costs of workers’ compensation care affects all stakeholders including workers, employers, providers, regulators, legislators, and insurers. Consequently, a continued commitment to quality, accessibility to care, and cost containment will help ensure that workers are afforded accessible, high quality, and cost-effective care.
“I was deeply disturbed by the draft I reviewed of the new ACOEM guidelines” said Andrea M. Trescot, MD and President of the American Society of Interventional Pain Physicians. These guidelines reviewed a variety of interventional pain procedures, and, because of the lack of interventional experience by the reviewers, very inappropriate conclusions were reached. If these guidelines are utilized by their target audience, workers compensation insurance carriers, the injured workers in this nation will be denied some of the most effective pain treatments currently available. Patients denied these treatments will not be able to return to work, and will be shunted to the disability and Medicare rolls, which will cost all of us in taxes, not to mention the cost of the tragedy of destroyed lives and loss of productivity.”

ACOEM’s process of guideline development is not consistent with accepted practices for evidence-based guidelines and these guidelines are highly controversial among physicians and workers. Implementation of these guidelines for interventional pain management may not be applicable for patient care due to numerous deficiencies. These guidelines may restrict the independent professional practice of medicine; may result in reduced quality of medical care; will severely hinder access to appropriate, medically needed, and essential medical care; and may increase costs for injured workers, third party payers, and the government by transferring the injured worker into a non-productive disability system.


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