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The Missing 'p' in Chronic Pain Management

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Introduction: Chronic pain is one of the most underestimated and undertreated health care problems worldwide. It has major consequences either on the quality of life of the sufferer or on the health care system. Consequently, social burden is very high. The main reasons for this rely on inadequate evaluation and understanding of pain as well as lack of knowledge about the psychiatric disorders that may occur in many pain conditions. **Aims:** The authors aim to define the role of psychiatrists in chronic pain management. **Methods:** Literature review in PubMed and Cochrane databases using the following words: 'chronic pain', 'psychiatric disorders', 'comorbidities' and 'pain treatment'. **Discussion:** There is a clearly established link between chronic pain syndromes and psychopathology. The influence of chronic pain is especially prevalent in depression, anxiety, personality disorders, substance abuse and posttraumatic stress disorder. There are several reasons for including the psychiatrist in the management of chronic pain syndromes: 1) the high prevalence of psychopathology: 2) psychiatrists are more skilled to understand and evaluate the role of the cognitive and affective dimensions of pain as well as to identify susceptibility traits to the patient's experience, such as sexual abuse and neglect that predispose individuals to pain, substances use and concurrent mental health disorders. **Conclusions:** Treatment of the patient with chronic pain is often ineffective. Chronic pain management requires a comprehensive workup and thoughtful treatment plan which balances comfort with function and rehabilitation. For this, it is necessary an interdisciplinary approach, in which psychiatry can play an important role.