

For Immediate Release

## HKSH Releases Survey Findings on Pain Conditions Amongst Hong Kong People Over 40% of 3,000 Respondents Suffer from Long-term Pain Medical Specialists Advise against Neglecting Chronic Pain

(16 April 2024, Hong Kong) Various pain conditions induced by illnesses or stress have become a prevalent health issue in Hong Kong. If the pain persists for more than three months, it could be deemed as chronic pain. Chronic pain has a negative impact on the patient's sleep, emotions, concentration, relationship with family members, and social life, which should not be overlooked. An earlier survey was undertaken by HKSH Medical Group (HKSH) which encompassed 3,018 participants: 2,037 females (67%) and 981 males (33%) in order to gain insight into the pain conditions and pain management strategies of the respondents.

The survey found that over 75% (2,306) of the respondents had experienced pain in the previous month, with females being the majority. Over 80% of female respondents had experienced body pain in the previous month. More than half of the respondents reported pain in various parts of their bodies, while over 40% had endured chronic pain lasting for at least three months. Multiple approaches are generally adopted to address these pain conditions. Furthermore, approximately half of the respondents expressed that pain has affected their daily life, leading to emotional and psychological distress.

The survey was primarily conducted through electronic questionnaires on online media platforms to understand the experience of Hong Kong people with pain. A small number of questionnaires were collected from the public through partner organisations and outpatient clinics at HKSH, and the survey was completed last quarter. The age distribution of the respondents was as follows: 25-34 (22%), 35-44 (30%), 45-54 (22%), 55-64 (17%), and the remaining respondents were under 18 years old or above 65 years old. 43% of the respondents reported experiencing chronic pain, which is characterised by lasting for three months or longer. Among them, approximately 27% had even experienced pain for an extended period of over a year.

The majority of respondents who reported experiencing pain indicated that it primarily affected their shoulder and neck, accounting for 62% (1,438 respondents) followed by the lower back (38%, 866 respondents). Other common pain areas included headaches and pain in hands, feet and knees. A significant number of young respondents (between 18 and 34 years old) were uncertain of the main cause of the pain and some attributed the pain to "physical degeneration", "blood circulation" and "injuries", while middle-aged or older participants (aged 35 years or above) mostly believed that pain was a result of "physical degeneration". When experiencing pain, nearly 60% of the respondents chose to rest as a means of relief. Other methods employed included massage or hot/cold therapy (47%), relaxation or exercise (39%), and take painkillers (37%). Approximately 31% of respondents stated that they would seek medical attention concurrently.

The survey also revealed that pain substantially impacts the daily life of the respondents. Nearly 60% of the respondents believed that the most significant effect was on their sleep patterns. For individuals in the workforce, pain has also affected their efficiency and performance at work. 44% of the participants reported that pain had a detrimental effect on their emotional and mental well-being, while 22% acknowledged that it also influenced their social and interpersonal interactions.

**Dr. LEE Tsun Woon, Honorary Consultant and Specialist in Anaesthesiology of Hong Kong Sanatorium & Hospital,** responded, "Aside from impeding one's mobility, pain can also cause disrupted sleep, anxiety and diminished concentration, all of which can adversely affect one's work and social life. When chronic pain is left unmanaged, it can generate stress and distress for the patient, potentially leading to anxiety and depression.

養和醫療集團有限公司 香港跑 HKSH Medical Group Limited 2 Village

香港跑馬地山村道2號 2 Village Road, Happy Valley, Hong Kong

電話	Tel	ĩ	(852) 2835 8800
傳真	Fax	÷	(852) 2835 8008
電郵	Email	à	medicalgroup@hksh.com





Anxiety and nervousness can decrease the body's ability to tolerate pain, resulting in heightened pain levels and perpetuating a vicious cycle."

According to previous research studies, the prevalence of chronic pain in Hong Kong increased from 10.8%<sup>1</sup> in 1999 to 28.7%<sup>2</sup> in 2013. **Dr. Joseph CHAN, Chief Medical Officer of HKSH Medical Group, Deputy Medical Superintendent of Hong Kong Sanatorium & Hospital**, remarked, "Hong Kong people often encounter issues including shoulder, neck, and back discomfort as a result of work-related stress or excessive use of electronic gadgets. Our doctors at the Family Medicine and Primary Care Centre (FMC) often come across instances of pain, and they will find out the causes of pain through clinical diagnosis. For instance, a patient who presented with stomach pain was eventually diagnosed of a cardiac issue, while a patient who had sudden and severe headaches along with vomiting received a preliminary diagnosis of acute glaucoma following an examination of eye pressure. This would necessitate an immediate referral to an ophthalmologist for surgery in order to prevent blindness."

"Our FMC doctors will refer patients to other specialties such as orthopedics, neurology, rehabilitation medicine, and rheumatology to determine if there are more complex underlying causes that require further treatment. For certain diseases such as cancer, if the pain persists despite treatment, we will refer patients to pain specialists for interventional therapy. In the event that members of the public are afflicted with persistent pain and have sought the assistance of multiple specialists without substantial alleviation, it might be prudent to consider the option of consulting pain specialists," added Dr Chan.

The World Health Organisation (WHO) suggested in 2000 that "chronic pain is a disease" rather than merely a symptom or unpleasant sensation. In 2018, WHO classified chronic pain into seven categories: primary pain, cancer-related pain, neuropathic pain, posttraumatic or postsurgical pain, visceral pain, headache or orofacial pain, and musculoskeletal pain.<sup>3</sup> Among these, musculoskeletal pain, such as joint pain, muscle pain, and back pain, is the most common in Hong Kong, followed by neuropathic pain.<sup>2</sup> This type of pain is caused by damage or disease related to the central nervous system, such as postherpetic neuralgia (the most common complication of shingles) and trigeminal neuralgia. While the causes of chronic pain are not easily traceable, and the degree and scope of pain experienced by each patient may vary, the medical field has consistently advocated for an interdisciplinary approach to the diagnosis and treatment of chronic pain in order to achieve effective pain management.<sup>4</sup>

Dr. CHEUNG Chi Wai, Honorary Consultant and Specialist in Anaesthesiology of Hong Kong Sanatorium & Hospital, said, "Many people fail to fully comprehend the significance of pain, and some mistakenly assume that pain may be easily alleviated by consuming medicines. However, if treatment is delayed, the situation may worsen. In order to achieve the goal of relieving patients' pain and preserving their quality of life, it is crucial to employ a multidisciplinary approach and effectively coordinate resources. In my professional practice, I have encountered numerous complex situations, including cancer pain, trigeminal ganglion, spinal neuralgia, and other forms of persistent neuropathic pain. Various therapeutic modalities, such as radiofrequency ablation, which utilises heat to destroy nerves and impede the transmission of pain signals, resulting in a significant reduction in pain and a decreased reliance on medication." Dr. Cheung stressed that if patients have chronic pain lasting for a duration of three months or longer, and the potential presence of

<sup>&</sup>lt;sup>4</sup> Chen PP. Multidisciplinary approach to chronic pain management. HKMJ. 1996;2: 401-4.

養和醫療集團有限公司	香港跑馬地山村道2號	電話 Tel : (852) 2835 8800
HKSH Medical Group Limited	2 Village Road, Happy Valley, Hong Kong	傳真 Fax :(852) 2835 8008 電郵 Email:medicalgroup@hksh.com



<sup>&</sup>lt;sup>1</sup> Ng KF, Tsui SL, Chan WS. Prevalence of common chronic pain in Hong Kong adults. Clin J Pain. 2002 Sep-Oct;18(5):275-81.

<sup>&</sup>lt;sup>2</sup> Cheung CW, Choi SW, Wong SSC, Lee Y, Irwin MG. Changes in Prevalence, Outcomes, and Help-seeking Behavior of Chronic Pain in an Aging Population Over the Last Decade. Pain Pract. 2017 Jun;17(5):643-654.

<sup>&</sup>lt;sup>3</sup> World Health Organization. International Classification of Diseases 11th Revision (ICD-11). The global standard for diagnostic health information. <u>https://icd.who.int/en</u>.



infection and tumor has been eliminated, they should consult pain specialists when the current methods of pain relief are insufficient.

**Dr. TONG Ka Fai, Henry, Honorary Consultant in Anaesthesiology and Specialist in Pain Medicine of Hong Kong Sanatorium & Hospital,** added, "In the treatment of pain, non-pharmacological methods are typically employed as a first-line approach, and oral analgesics will be prescribed as needed, depending on the type and severity of the pain. If medication fails to effectively alleviate the pain, or if the patient experiences intolerable side effects from the medication, interventional procedures may be considered. These procedures may involve ultrasound-guided local injections of steroids and/or anesthetics into specific target nerves or nerve plexuses, precisely blocking the transmission of pain signals and alleviating nerve inflammation. Ultrasound also enables the injection of different medications into the affected area, addressing both the symptoms and the underlying cause simultaneously."

The above interventional procedures are invasive and must be performed by professionally trained pain specialists. X-ray or ultrasound guidance is required for radiofrequency treatment, in which the doctor will insert an electrode needle that releases radiofrequency energy with a temperature of over 42°C into the target nerve to destroy nerve fibers, thus blocking the transmission of pain signals from the nerve. Another treatment method is cryotherapy which involves placing a cryoprobe near the target nerve. This creates an ice ball with a temperature of -78 °C using liquid carbon dioxide, thereby destroying the nerve tissues. Consequently, the nerve's ability to transmit pain signals is weakened, resulting in pain relief.

**Dr CHEUNG** suggested that for those who continue to experience persistent pain despite attempting various treatment methods, spinal cord stimulation may be considered. This involves the surgical implantation of a pacemaker-like device that emits electrical stimulation into the patient's body. The purpose of this stimulation is to modify nerve activity and block the transmission of pain signals to the brain, ultimately achieving a more long-lasting alleviation of pain.

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For media enquiries, please contact:

Corporate Affairs Department					
Eunice CHENG	Tel: 2917 5828				
Joyce CHAN	Tel: 2917 5829				
Yee LO	Tel: 2917 5841				
Email:	media@cad.hksh.com				

## About HKSH Medical Group

Officially launched in September 2017, HKSH Medical Group promotes public health and advanced medicine through a multi-faceted, coordinated approach across clinical services, medical education, scientific research and public health education. Members of the Group, including Hong Kong Sanatorium & Hospital, HKSH Healthcare and HKSH Eastern Medical Centre, are dedicated to offering top-quality holistic care to patients, upholding the motto 'Quality in Service, Excellence in Care.'

Established in 1922, Hong Kong Sanatorium & Hospital is one of the key members of HKSH Medical Group and a leading private hospital in Hong Kong. Living up to its motto of 'Quality in Service, Excellence in Care', the Hospital is committed to serving the public as well as promoting medical education and research.

For more information about HKSH Medical Group, please visit www.hksh.com.

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## **Photo caption** :

A survey conducted by HKSH found that 43% of the respondents had experienced chronic pain. Dr. Joseph CHAN, Chief Medical Officer of HKSH Medical Group, Deputy Medical Superintendent of Hong Kong Sanatorium & Hospital (second from left), Dr. LEE Tsun Woon, Honorary Consultant in Anaesthesiology of Hong Kong Sanatorium & Hospital (second from right), Dr. CHEUNG Chi Wai, Honorary Consultant in Anaesthesiology of Hong Kong Sanatorium & Hospital (first from right), and Dr. TONG Ka Fai, Henry, Specialist in Pain Medicine of Hong Kong Sanatorium & Hospital (first from left) urge the public to seek medical help timely to find out the underlying cause and receive targeted medical treatment if the pain persists for three months or more.



2. **Dr. CHEUNG Chi Wai** demonstrates the radiofrequency ablation procedure in which an electrode needle that releases radiofrequency energy with a temperature of over 42°C is inserted into the target area to destroy nerves and impede the transmission of pain signals, resulting in a significant reduction in pain and a decreased reliance on medication.



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3. Dr. CHEUNG Chi Wai suggested that those who continue to experience persistent pain despite attempting various treatment methods may consider spinal cord stimulation. This involves the surgical implantation of a pacemaker-like device that emits electrical stimulation into the patient's body. By modifying nerve activity and blocking the transmission of pain signals to the brain, a more long-lasting alleviation of pain can be attained.



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4. **Dr. TONG Ka Fai, Henry** demonstrates the cryotherapy procedure in which a cryoprobe is placed near the target nerve. This creates an ice ball with a temperature of -78 °C using liquid carbon dioxide destroying the nerve tissues. As a result, the nerve's ability to transmit pain signals is weakened to achieve pain relief.



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