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# Pain/Opioid CORE News

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## Updates from the CORE

### Greetings from the Pain/Opioid CORE!

The HSR&D funded Pain/Opioid Consortium for Research (CORE) has had a busy summer and we are looking forward to an exciting fall. If you are interested in being added to our email list or would like additional information about the CORE, please contact Ray Van Cleve, PhD at [raymond.vancleve@va.gov](mailto:raymond.vancleve@va.gov).

#### CORE PIs

Alicia Heapy, PhD; Pain Research, Informatics, Multimorbidities, and Education (PRIME) Center of Innovation, VA Connecticut

William Becker, MD; (PRIME) Center of Innovation, VA Connecticut

Erin Krebs, MD, MPH; Center for Care Delivery and Outcomes Research (CCDOR) Center of Innovation, Minneapolis VA

### Rapid Start Funding

We are pleased to announce that we selected five projects to receive funding through our Rapid Start Funding initiative. The awardees are:

**Project Title:** Feasibility, Pain and Functional Outcomes of a Novel Mixed Reality Based System to Manage Phantom Pain for Patients with Lower Limb Amputation: A Pilot Study

**PI name:** Thiru M. Annaswamy, MD, MA; North Texas VA Healthcare System, Dallas, TX

**Description:** This study intends to use the Mixed Reality based system for MANaging Phantom Pain (Mr.MAPP), a virtual reality system that can guide veterans in different exercises and therapies in order to treat phantom limb pain. This is a virtual mirror therapy treatment that is conducted over one or more months in the Veteran's home. The primary goals of this pilot research study are to evaluate the feasibility and preliminary functional outcomes of this system in a sample of Veterans with lower limb amputation. Findings from this single-arm pilot study will serve as preliminary data to inform future fully powered clinical trials to assess Mr.MAPP's efficacy in treating PLP and practical clinical implementation of these findings in real-world settings.



**Project Title:** A Modified Hub and Spoke Model to Improve Access to MOUD

**PI name:** Gregory P. Beehler, PhD, MA; VA Western New York, Center for Integrated Healthcare in Buffalo, NY

**Description:** This project will evaluate if delivery of medication for opioid use disorder (MOUD) to Veterans has been improved following the implementation of a hub and spoke program (i.e., centralized intakes and inductions with MOUD maintenance managed by referring providers). Based on the RE-AIM framework, VA Corporate Data Warehouse data will be combined with stakeholder interviews to identify system, provider, and patient factors that contributed to program outcomes. Results of this evaluation will suggest if the hub and spoke approach has potential for further adoption in VA to compliment on-going efforts to reduce barriers to MOUD.



**Project Title:** Development of A Virtual Reality Toolbox for Chronic Pain Self-Management among Veterans

**PI name:** Christopher Fowler, PhD; James A. Haley Veterans' Hospital Tampa, FL

**Description:** Adjunctive virtual reality (VR) therapies have established efficacy for improving pain-related and functional outcomes. Our team will test a VR 'toolkit', which for this study, means that we have identified efficacious VR pain self-management APPs that align with Cognitive-Behavioral Therapy for Chronic Pain (CBT-CP) which will be downloaded onto a VR headset. VR can be a beneficial technology because the Veteran can do this at home and at a time that suits the patient. This will allow us to evaluate Veteran acceptability and tolerance for these different VR APPs prior to feasibility testing our toolkit as a CBT-CP adjunct to help improve adherence and outcomes.



**Project Title:** VHA Clinician Attitudes and Practices Regarding Buprenorphine Treatment and Impact on Patient Outcomes in Veterans with Opioid Use Disorder

**PI name:** Alison (Lewei) Lin, MD; VA Ann Arbor, HSR&D Center for Clinical Management Research, Ann Arbor MI

**Description:** Increasing buprenorphine treatment and improving retention in care are critical to reducing overdose and other negative outcomes for Veterans with opioid use disorder (OUD). While past work has focused on patient-level factors that contribute to receipt of buprenorphine, we have limited understanding of clinician-level factors and their impact on care delivery, which are particularly salient because there is a wide range of treatment philosophies and practices in buprenorphine treatment that may also differ across patient characteristics. The overarching goal of this project is to conduct a VHA wide survey study of buprenorphine prescribers to assess clinician attitudes and practices related to buprenorphine treatment using patient vignettes (e.g. to capture different types of patients including those with chronic pain). This understanding of buprenorphine treatment practices will help inform new clinician and system-focused interventions to improve quality of care and outcomes for Veterans with OUD.



**Project Title:** Understanding primary care experience for homeless-experienced veterans with co-occurring pain and addiction

**PI Name:** Allyson Varley, PhD, MPH; Birmingham VA Medical Center, Birmingham AL

**Description:** This study aims to better understand and enhance the primary care experience for Veterans and improve the Homeless Patient Aligned Care Teams (HPACT) service design for those who are experiencing substance use disorder, chronic pain, and homelessness. This study will take advantage of a recently-completed survey of over 3500 Veterans with homeless experience that get their care in HPACTs. We will compare the primary care experiences of Veterans who have chronic pain, substance use disorder, both problems, or neither. We will also compare engagement in pain and addiction health services among Veterans receiving primary care in clinics with higher as opposed to lower patient assessments of care quality.



## Veteran Engagement Panel

We feel incredibly fortunate to be working with twelve Veteran collaborators on our Pain/Opioid CORE Veteran engagement panel (VEP). Each VEP member brings their unique experience with chronic pain and opioid use, and will be providing feedback from the patient perspective to inform Pain/Opioid Consortia research. In August and September 2020, the VEP completed a two-part orientation. The panel then met with a CORE researcher to review the recruitment process and script for a funded HSR&D project. The panel provided extensive feedback and looks forward to reviewing more CORE projects.

The panel is available to provide feedback for any aspect of your research project (i.e. methods, recruitment materials, dissemination products). Prior to the VEP meeting, the study PI will be asked to meet with Pain CORE staff once (for approximately an hour) to craft a plan for engaging the panel; Pain/Opioid CORE staff will then prepare VEP meeting agenda and materials. The PI will then attend the VEP meeting, with CORE staff facilitating discussion. Post-meeting, the PI will receive meeting notes and observations (compiled by CORE staff) and meeting evaluations from the VEP members.

The VEP will meet monthly throughout 2021 and will meet with one research team per month. If you are interested in engaging with the Pain/Opioid CORE VEP, please contact, Ray Van Cleve at [raymond.vancleve@va.gov](mailto:raymond.vancleve@va.gov).

## Delphi Study

We have completed the first round of our virtual Delphi and have sent out the instructions for the second round. In round one, we received very insightful responses across a wide breadth of perspectives. Would change third sentence to: We have analyzed this rich data, used it to design round two, and distributed round two to our Panelists. A significant percentage of our audience gave exceptionally in depth answers to our questions on long term opioid use and opioid use disorder, giving us a lot of material to decipher and assemble into our second round.

# Portfolio Review

We have compiled a searchable database of over 2500 currently funded studies being conducted in the broad area of pain and opioid research. Studies were funded by VA, NIH, CDC, FDA, PCORI, other federal agencies, and industry. Each study has an entry including title, funder, PI, abstract, project number, and project terms. The studies come from a number of databases including NIH RePORTER and clinicaltrials.gov and span subjects ranging from OUD treatment within specific populations to psychological tools for pain management to medication reduction strategies. We hope this will be a useful tool for investigators who want to explore the breadth of projects in the area of pain and opioids or for informing the “Overlap” portion of HSR&D funding applications. The database will be online shortly, but if you are interested in receiving a copy of this database prior to that, please contact Raymond Van Cleve [raymond.vancleve@va.gov](mailto:raymond.vancleve@va.gov)

