

# Pain/Opioid CORE

VA HSR&D

Pain/Opioid Consortium of Research

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U.S. Department  
of Veterans Affairs

Bookmark it!

## Searchable Portfolio of Funded Pain/Opioid Projects

The Pain/Opioid CORE has been undertaking efforts to develop a prioritized set of research goals related to pain and opioid research across the VA. As part of this multi-year process, we conducted a broad pain/opioid funding portfolio analysis to understand the landscape of current and previously funded projects and identify potential gaps and opportunities for future work. Our portfolio analysis focused only on funded projects and not on published studies, for which a separate high-level review was completed to inform our research prioritization process. This resource is now available on the [Pain/Opioid CORE website](#) on the [“Researcher Resources” page](#).

The objective of the portfolio analysis was to create an updateable catalogue of pain/opioid related funded projects relevant to the VA or Veteran health. To be as inclusive as possible and allow for capturing potential future shifts in focus areas over time, we developed an approach that 1) began by curating a dataset of all VA funded research and NIH HEAL awarded projects from a sample of common data sources and 2) utilized natural language processing to identify pain/opioid relevant projects from the larger dataset.

### *Details on the Process*

We used web-scraping to curate the initial dataset of projects based on searches beginning in September 2021. We identified VA and non-VA funded project data sources that were publicly available and presented data in a manner amenable to web-scraping. Awarded project data were obtained from the following VA and non-VA sources for the project years available:

- [VA HSR&D “Completed” Projects](#) (1999 – 2021)
- VA ORD Funded Projects ([FY21](#), [FY20](#), [FY19](#), [FY18](#), [FY17](#))
- [ClinicalTrials.gov](#)
- [NIH HEAL Awarded Projects](#)
- VA QUERI Projects from NIH RePORTER (by QUERI Study Section, FY17-22)
- [NIH-DoD-VA Pain Management Collaboratory Pragmatic Trials](#)

Once individual project data were extracted, we resolved duplicates across the various sources to obtain a final analytic dataset containing 6,778 awarded projects. We then used natural language processing on abstract and title text in the dataset to “tag” projects as relevant to topic areas – including pain, opioids, and more. Subject matter experts provided input on and iteratively refined our reference vocabularies across topic areas and reviewed project lists to ensure appropriate cataloguing.

The Pain/Opioid CORE also recognized the opportunity to provide the portfolio analysis results as a searchable, web-based resource for pain/opioid and other Veterans’ health researchers. The resource allows searching of the project dataset using keywords, titles, investigators, or other information and to export the results in several formats. Quick search buttons are included to facilitate project searching in the CORE identified topic areas. As additional topics are added to the portfolio analysis in the future, we will update this quick search feature. We also plan to improve the sensitivity of the search process, as needed, in future iterations of the tool and welcome feedback to alert us to any projects that may be relevant to pain/opioid research and Veterans but were not identified during the first iteration of the portfolio analysis. Please send any feedback to [PainOpioidCORE@va.gov](mailto:PainOpioidCORE@va.gov).

## FEATURED ARTICLES

## Special Project: Delphi Study on Diagnostic Challenges Regarding Opioid Dependence and OUD In Long-Term Opioid Therapy

Members of the Pain/Opioid CORE (Drs. Sara Edmond, Will Becker and other colleagues) recently published a series of three articles focused on the need for and defining criteria of a new clinical entity describing problems that arise for some patients prescribed long-term opioid therapy (LTOT), where harms associated with LTOT appear to outweigh benefits of continued LTOT. A three-round Delphi study was conducted to generate consensus from experts in the field about whether a new diagnostic entity, separate from Diagnostic and Statistical Manual-5's Opioid Use Disorder (DSM-5's OUD) diagnosis is necessary, and if so, identifying the new criteria and definitions for this clinical presentation. The study team published a protocol paper (in [JMIR Research Protocols](#)), a qualitative analysis of arguments for and against the creation of a new entity (in [The Journal of Pain](#)) and the outcomes of the Delphi panel (in an upcoming issue of [Pain](#)). Qualitative analysis found that three-quarters of experts screened for Delphi participation were in favor of a new diagnostic entity, while one-quarter did not feel a new diagnostic entity was the best path forward, though there was an overall acknowledgement that the current implementation of DSM-5's OUD diagnosis is not meeting the needs of this population. Subsequently, Delphi panelists and a subgroup of experts systematically identified a condition name, definitions and essential criteria for this new diagnostic entity, though further work is needed for refinement and adoption of these results. The preferred name was "Prescription Opioid Dependence Syndrome" and the criteria deemed essential included harms of continued LTOT outweigh the benefits and difficulty tapering even in the context of a guideline-concordant taper.

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**Resource for VA Investigators**

## Methods Advisory Sessions Available to Address Heterogeneity of Treatment Effects

The Pain/Opioid CORE offers several domain-focused workgroups to connect investigators with similar interests and facilitate scientific advancement in their respective areas. The Heterogeneity of Treatment Effects (HTE) Workgroup supports scientific study related to the differential effectiveness of treatments, or combinations of treatments, aimed at reducing pain and/or opioid use. Studying treatment effect heterogeneity involves the application of rigorous and innovative statistical and data science methods to clinical trial data, electronic health record data, and other sources of patient data.

The HTE Workgroup now offers methods advisory sessions to chronic pain- and opioid-focused investigators who seek expert input on methodological approaches to examining treatment effect heterogeneity. Advisory sessions are offered as a complimentary resource to VA pain/opioid investigators. The objectives of these sessions are to enable investigators to rigorously examine HTE in their existing pain and opioid focused data, help design HTE analysis plans for funding proposals, and provide a learning environment for HTE methods through involvement of leading methodologists.

### Who is involved in an HTE methods advisory session?

- **Pain/Opioid Researcher(s):** VA Pain/Opioid investigators, including early-career investigators and trainees, are eligible to present at the advisory sessions, whether seeking guidance on HTE analyses of existing data or refining methods and aims related to HTE in future grant submissions. Interested investigators can contact the workgroup with questions or to schedule a session using the contact information below.

- **HTE Methodology Experts:** The HTE Workgroup has organized a group of expert statisticians and methodologists related to HTE-focused analyses who will be invited to participate in specific sessions. Advisory session facilitators will aim to match the expertise of methodologists with the specific research questions to be discussed during the session.
- **Other Attendees:** While discussants will typically be limited to members of the research team, methodology experts, and advisory session facilitators, other investigators are welcome to attend advisory sessions as an active learning opportunity to observe practical examples of HTE analysis plans.

**Advisory sessions for interested research teams are now available.** To apply for a complimentary HTE advisory session, submit to the contacts listed below a brief description of your study, research question(s), and anticipated next steps after participating in the advisory session (e.g., grant submission, analyses, manuscript). Research teams invited for an advisory session will participate in a brief planning call with the advisory session facilitators in advance of their scheduled session to prepare materials.

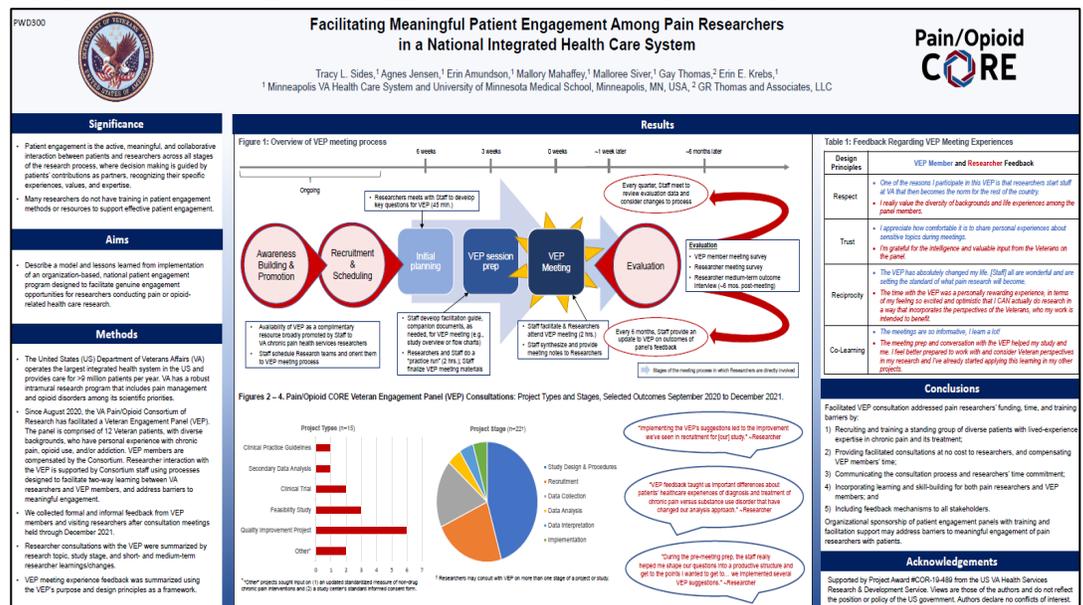
Contact HTE Workgroup Chair, Kelli Allen ([Kelli.Allen@va.gov](mailto:Kelli.Allen@va.gov)), and Pain/Opioid CORE Coordinator, Kathryn LaChappelle ([Kathryn.LaChappelle@va.gov](mailto:Kathryn.LaChappelle@va.gov)), with questions or to apply for an HTE methods advisory session.

Those interested in learning more about HTE are invited to attend Kelli Allen’s presentation on the topic at the November 1 (11:00 ET) HSR&D Spotlight on Pain Management cyberseminar series (recording available within a few days after). See the Featured Events section [below](#) for a registration link and further detail.

## CORE Veteran Engagement Panel

The Pain/Opioid CORE Veteran Engagement Panel (VEP) consists of twelve Veterans who have personal experience with chronic pain, opioid use, or opioid use disorder. Veteran members are a diverse group of men and women from across a wide range of ages and backgrounds, including students, retirees, and current workers with varied military, volunteer, and professional experiences. The CORE established this panel to connect Veterans with the VA pain/opioid research community, facilitate Veteran-engaged research, and promote opportunities for two-way learning.

In September, CORE staff presented a poster titled, *Facilitating Meaningful Patient Engagement Among Pain Researchers in a National Integrated Health Care System*, at the International Association for the Study of Pain (IASP) 2022 World Congress of Pain describing lessons learned from implementation of the Pain/Opioid CORE VEP.



Pain/Opioid CORE Poster for the IASP 2022 World Congress of Pain

Pain/Opioid CORE staff and two VEP members will co-present a Veteran engagement forum at the 2023 HSR&D/QUERI National Meeting. During the interactive presentation, titled *Engagement is at Our CORE: Sharing the Successful Model of the Pain/Opioid CORE Veteran Engagement Initiative*, we will review 1) how our national VEP is contributing to pain/opioid research and how our model can be applied to other strategic initiatives, 2) how trained meeting facilitators, Veteran panel members, and guest researchers come together in a successful engagement triad, 3) best practices for preparing Veterans and researchers for fruitful meetings and evaluation methods to ensure continuous improvement of engagement experience. Watch for an update on this presentation in our Spring 2023 newsletter.

Our Veteran Engagement Panel continues to meet with research teams monthly.

If you are interested in consulting with the VEP we invite you to review [this one-page overview on the VA Intranet](#) and to contact CORE Coordinator, Tracy Sides ([Tracy.Sides@va.gov](mailto:Tracy.Sides@va.gov)), with questions or to schedule a research consultation with the VEP. [Click here to learn more >>](#)

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## Featured Pain/Opioid Related Events

### **SAVE-THE-DATE: November 1, 2022: HSR&D Spotlight on Pain Management (SoPM) Cyberseminars**

The HSR&D Spotlight on Pain Management Cyberseminar series is held on the first Tuesday of each month to discuss pain-relevant health services research and support evidence-based improvements in pain management for Veterans. On November 1<sup>st</sup> from 11:00-12:00 ET, Pain/Opioid CORE Heterogeneity of Treatment Effects (HTE) Workgroup Chair, Kelli Allen, will present on *Understanding Heterogeneity in Effects of Interventions for Chronic Pain* ([register for the event here](#)). Additionally, the Pain/Opioid CORE will be presenting the December 2022 SoPM cyberseminar. Watch your email for a link to register for the meeting. For more information on upcoming and past sessions, visit the [VA HSR&D Cyberseminar website](#).

### **SAVE-THE-DATE: 2023 Annual Scientific Meeting for the United States Association for the Study of Pain (USASP) - April 11-14, 2023**

The Annual USASP Meeting will be held April 11 – 14 at the Washington Duke Inn in Durham, North Carolina. This year's theme is *From Bench to Bedside to Population: Transitional Pain Science Approaches for the Whole Person*. Stay up-to-date and learn more information about the upcoming conference by visiting the [USASP annual meeting website](#). Symposium proposals are due November 10, 2022 and research abstracts by January 13, 2023.

### **HSR&D Complementary and Integrative Health Cyberseminar -- Recording**

On September 15<sup>th</sup>, CORE internal leadership committee member Stephanie Taylor and Steven Zeliadt presented an update on their six-year study: *The APPROACH Study: Assessing Pain, Patient Reported Outcomes and Complementary and Integrative Health (A VA National Demonstration Project)* at the HSR&D Complementary and Integrative Health cybersminar series. The APPROACH Study is the first large-scale review of complementary and integrative health (CIH) therapy for use on pain and comorbid outcomes among Veterans. [Click here to view the recorded presentation](#).

## Featured Pain/Opioid Funding Opportunities

### 2023 Pain/Opioid CORE Rapid Start Funding Cycle

The next request for applications to the Pain/Opioid CORE Rapid Start Funding program will be issued in early December with an anticipated due date of January 1. [Click here for more information >>](#)

### **NIH Notice of Intent to Publish a Funding Opportunity Announcement for HEAL Initiative: Prevention and Management of Chronic Pain in Rural Populations, NOT-NR-22-015. (UG3/UH3, Clinical Trials Required)**

The National Institutes of Health (NIH) HEAL (Helping to End Addiction Long-term) Initiative intends to promote a new initiative by publishing a Funding Opportunity Announcement (FOA) soliciting applications for UG3/UH3 phased cooperative research to accelerate implementation of effective, non-opioid interventions for chronic pain management in rural and remote populations. Projects include pragmatic, implementation or hybrid effectiveness-implementation trials to improve pain management and reduce the unnecessary use of opioid medications. The overall goal of this initiative is to support the implementation of effective clinical practices and procedures that may lead to prevention or improved management of chronic pain in rural and/or remote populations, along with a reduction in unnecessary opioid prescribing and/or use. Results from the trials supported by this initiative should inform policy makers, payers, community stakeholders, health care providers and patients in the primary care, emergency department, hospital, home health, or dental setting. This initiative requires that the patients receiving services must reside in rural and/or remote areas and the intervention under study be integrated into a health care delivery system. [Click here for more information >>](#)



[More information and updates on the Pain/Opioid CORE >>](#)

To be added to our email list to receive our newsletter and research updates, please [visit our website to subscribe](#).

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[Click here](#) for more information about VA HSR&D Consortia of Research

(COREs). Contact us: [PainOpioidCORE@va.gov](mailto:PainOpioidCORE@va.gov)