

Bridging the Gap: Addressing Pain Management Disparities in an Underserved Urban Population

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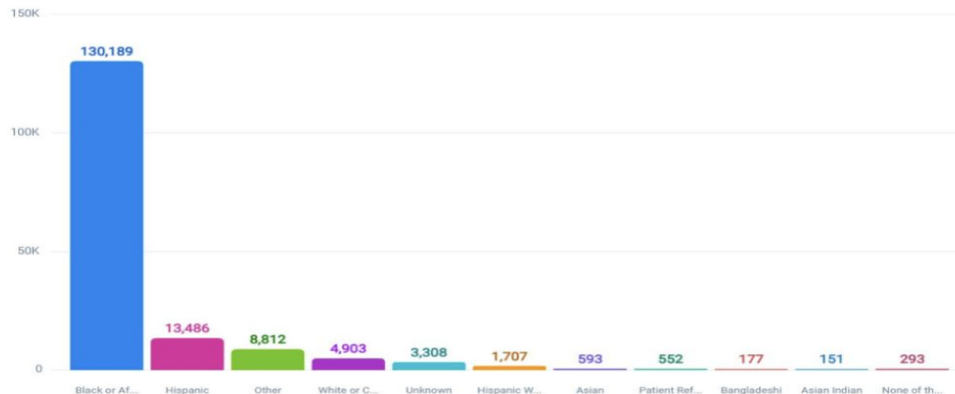
Purpose

To look at demographics of ethnicity in a pain clinic in an urban pain clinic in Brooklyn, New York. We hope to compare how this clinic's patient population being from minorities like African American descent and Hispanics compare to other studies which have shown poor pain management in the minority population. Overall, we hope to emphasize the need for more pain management care centers for patients of African American descent and other minority populations.

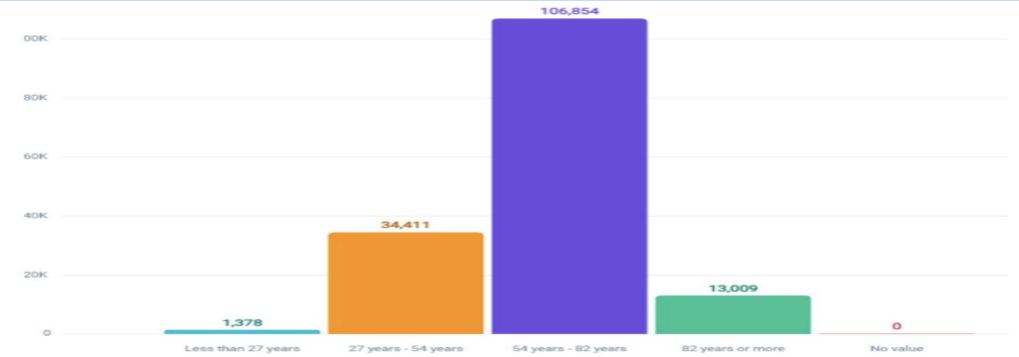
Introduction

Ethnic minority populations, particularly African Americans, experience significant disparities in pain management and healthcare access. Despite higher rates of chronic pain, these groups often receive inadequate treatment due to socioeconomic barriers and limited access to care. In our pain clinic in Brooklyn, New York, we serve a predominantly African American and Hispanic patient base, reflecting the demographics of our urban, underserved community. Our clinic aims to address these disparities by providing comprehensive pain management care for conditions such as lumbar radiculopathy, cervical radiculopathy, radiculitis myofascial pain, complex regional pain syndrome, and post-laminectomy syndrome. We focus on improving patient outcomes through a multimodal approach, reducing reliance on opioids and using non-opioid medications, therapies, and procedures.

Ethnic Distribution of Patients Between 2014-2025



Age Distribution Patients Between 2014-2025



Discussions

Chronic pain is more prevalent in underserved populations, with African American and Hispanic individuals facing barriers to receiving appropriate treatment. Studies show these groups are less likely to be prescribed opioids or receive timely, effective care. Our clinic reflects these trends, with 156,414 patient encounters over the past decade. The majority of our patients are aged 54-82 (68%), and 83% are Black or African American, while 9% are Hispanic. The conditions we treat are often underdiagnosed or undertreated in minority populations due to a lack of specialized care in underserved areas. We emphasize a multimodal approach to pain management, focusing on non-opioid pharmacologic treatments, physical therapy, cognitive behavioral therapy, and interventional procedures. This holistic model addresses not only the pain but also its underlying causes, reducing opioid dependency and improving long-term outcomes.

Conclusion

Our clinic plays a crucial role in serving African American and Hispanic populations in Brooklyn, New York, where pain management is often inadequate. By providing specialized, culturally competent care, we aim to improve patient outcomes and reduce healthcare disparities. Through our multimodal approach, we help patients manage pain more effectively while minimizing opioid use, ultimately improving their quality of life and functionality.