It's Hard to Study Pain: Challenges in Conducting Research Among Chronic Pain and High-Risk Obstetric Populations

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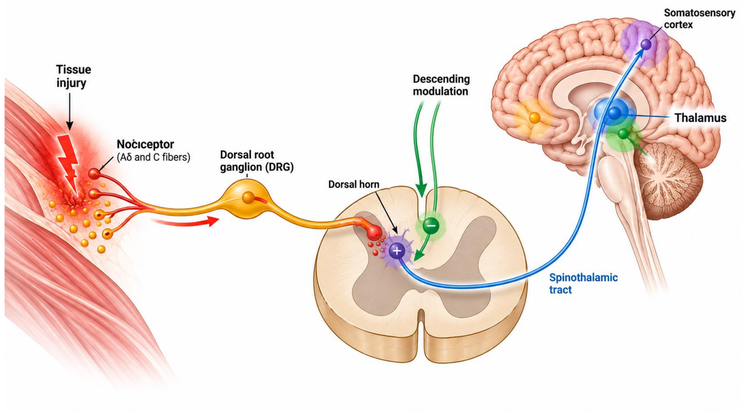
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Background

Pain is complex and personal, shaped by emotional, social, and behavioral factors. Research in chronic pain, especially among high-risk obstetric populations with substance use disorder (SUD), faces unique ethical and logistical challenges. Despite growing interest in improving peripartum pain management and mental health outcomes for these patients, research efforts are consistently hampered by poor enrollment and engagement. Two recent institutional studies highlight these persistent barriers, despite strong multidisciplinary support.

Objective

- To identify barriers to recruitment and ongoing participation in pain research and highlight opportunities for more feasible, patient-centered study designs.



Study 1: Chronic Pain Patients in Perioperative Research (IMPACT)

Purpose:
Assess patient experience with a perioperative pain-management plan using pre- and post-surgical pain consultations.

Challenges Encountered:

- Fatigue and frustration with extensive surveys
- Declining participation during post-surgical follow-up
- Emotional exhaustion limiting continued engagement

Key Takeaway:
The emotional and cognitive burden of chronic pain, combined with the physical demands of surgical recovery, made structured research participation and longitudinal follow-up challenging.

Study 2: Pain Research in the Obstetric Patient with SUD

Purpose:
Highlight challenges encountered when conducting pain research in obstetric patients with substance use disorder, based on two separate grant-funded initiatives.

Challenges Encountered:

- Stigma and mistrust of the healthcare system
- Unstable housing
- Communication barriers
- Competing childcare demands
- Psychological fatigue

Key Takeaway:
Traditional research models may overestimate patients' ability or willingness to participate consistently. Despite multidisciplinary support from behavioral health therapists and research staff, participation remained low.

Cross-Study Themes

- **Participant Fatigue** → Survey burden and lower completion rates
- **Mistrust and Stigma** → Hesitancy to enroll and remain engaged
- **Logistical Instability** → Missed visits and difficulty maintaining follow-up
- **Emotional Vulnerability** → Reduced capacity for sustained research participation
- **Competing Priorities** → Childcare, recovery, housing, and other immediate needs
- **System Barriers** → Difficulty establishing continuity and patient–research team rapport

Overall: *Across both studies, these barriers often occurred simultaneously, contributing to* ***reduced enrollment, retention, and study completion****.*

Conclusions

- Pain research in vulnerable populations is inherently challenging, with clinical, emotional, and social factors affecting both enrollment and continued participation.
- Traditional research protocols may unintentionally increase participant burden and contribute to poor recruitment and loss to follow-up.
- Future studies should prioritize flexible recruitment, simplified assessments, integrated care coordination, and low-burden follow-up strategies to improve engagement and retention.