

Chronic Pain Webinar questions: 28th November 2018

The following is a summary of the questions and answers that were discussed following the webinar presentation.

Appropriateness of programme:

Would this call be appropriate for an RCT of a community pain management program using a novel approach which is more personal and individualized than traditional outpatient pain management programs and where the provider is a charity which adds social projects to the intervention?

From the information provided this may be appropriate if it addresses a specific need in the management of pain. If it is an RCT then it is likely to be most suitable for the HTA programme if it is a well developed intervention, ready for delivery across health/social care, has established efficacy and proof of concept, can be delivered by the provider and is acceptable to patients, and effective and cost effective. If the provider is a charity it will need to be clarified how will the intervention be delivered across the service.

Which programme should pathway development of specific chronic pain condition fall under?

In order for the application to be appropriate for NIHR, there would need to be proof of concept and a theoretical understanding of how pathway development would impact on chronic pain. You would need to look at the specific programme remits to assess which programme would be most appropriate.

We currently have a Government grant from the Innovation Funding Service for the production of prototypes of immersive content for people with Chronic Pain Syndrome and research into their use. We are looking for funding for the further content, drawing from the findings of the initial research, and into a full patient clinical research programme. Is this the right place to come?

It is assumed that immersive content refers to an image-based immersive intervention. The key issue to be considered is the extent to which the focus of the application is to look for funding for further content development. If the focus of the application is just to develop the intervention further, then it is unlikely to be in the remit of most of the NIHR programmes which typically only allow for a small portion of further development.

Our proposal is based on stratification of back pain using MR imaging, and hence identification of possible mechanisms and biologically based treatment strategies. Where would our application be best submitted?

If research into mechanisms are part of this research, these are welcomed and supported by the EME Programme. However, mechanistic studies have to be part of an intervention that is being assessed, and experimental medicine is not covered.

Appropriateness of topic:

I am interested in connections between pain and frailty in older people, would this be within the theme?

There is also an NIHR Themed call in frailty. While this question could be potentially in remit, the critical issue is that there must be an intervention or clear path to patient benefit. If this question is just about how pain and frailty interact, it would not be in remit of this call.

a. Would an application on the Pelvic Pain Management Programme as a rehabilitation programme for patients with chronic pelvic pain, that include endometriosis be appropriate for this call?

b. Would chronic diabetic neuropathic pain be a subject for the study?

c. Would Chronic migraine be included in the call?

For all these areas, if the application is focussed on the management of chronic pain, and there is a shortcoming in existing provision, then this would likely to be appropriate. The key issue is that the application would be focused on the management of chronic pain, and not on other aspects of endometriosis/diabetic neuropathy/migraine. Applicants would need to look at the specific programme remits to assess which programme would be most appropriate.

I am interested in submitting a grant application regarding paediatric chronic pain. Am I right to assume the themed call includes chronic pain in children and young people

Yes, the call is open to all age groups.

Are epidemiological studies still valuable to the NIHR?

NIHR programmes are mainly looking at the pathway to providing patient benefit and are focussed on an intervention. Sometimes epidemiology studies can, for example, provide evidence of effectiveness of an intervention through observational studies, but issues for examples of confounding would need to be addressed. However, applications just focussed on cause and effect are unlikely to be in remit.

Appropriateness of setting:

We would be looking at a feasibility study for a counselling intervention in care homes. Would we be able to apply for funding for participants who would be in care homes as opposed to NHS settings?

NIHR funding includes settings such as care homes. Applicants are advised to refer to the AcoRD guidance for information on eligible research costs
<https://www.gov.uk/government/publications/guidance-on-attributing-the-costs-of-health-and-social-care-research>

We are interested in working with the homeless, would this be included?

Yes, we encourage projects that work with under represented populations. As with any application, applicants would need to show how they will manage recruitment.

Appropriateness of applicant:

Who is eligible for this call?

Any UK organisation that considers that it can carry out high-quality clinical, applied health or social care research is likely to be eligible, either directly or with a partner.

Applicants should check individual funding opportunity guidance documents for eligibility requirements and contact the relevant programme if they have further questions regarding eligibility.

Questions about Themed Calls:

Are NIHR still interested in Themed Call topics once the calls have closed?

Yes, once the Themed Call deadlines have closes, the topics remain priority areas.