

With Chronic Pain, Discrimination Hurts

By Cynthia Toussaint

Dealing with our doctors should not be more difficult than dealing with disease. Yet for the millions of women who suffer from chronic pain, that's the way it has always been.

While gender discrimination has significantly decreased, it is still shockingly pervasive in the medical establishment. For instance, when men complain to doctors about chronic pain, they are handed a prescription; when women complain, they are often told, "It's all in your head."

State legislators are finally taking overdue notice of this damaging double standard. On Wednesday, the state Senate Health and Human Services Committee and the Legislative Women's Caucus are scheduled to hold a hearing on the inequity of pain diagnosis and treatment between men and women.

The American Chronic Pain Assn. and the National Institutes of Health estimate that more than 50 million Americans suffer from chronic pain, costing more than \$100 billion in reduced productivity, sick time and medical costs.

For 21 years, I have fought chronic pain in the form of reflex sympathetic dystrophy, or RSD, a progressive, neurological disease that began with a hamstring tear and ended up robbing me of my physical talents, personal relationships and career.

For 13 of those years, I had to fight my doctors just as hard as I fought the pain. My doctors insisted that the pain was "in my head." My problems got steadily worse, at one point leaving me bedridden until I found a pain-management expert who listened, diagnosed and treated my condition. In a matter of weeks, my health dramatically improved and the proper diagnosis has allowed me to live a productive and fulfilling life.

However, the delayed diagnosis denied me a full recovery and cost me a career as a ballerina.

After my diagnosis and treatment, I started a nonprofit organization, For Grace, dedicated to increasing awareness of RSD and the plight of women in chronic pain. Pain sufferers from across the country have contacted For Grace to tell me their stories. They are almost all the same, with one difference -- men tell me their doctors never told them their problems were psychological. Far too many women do.

While the legislative hearing may raise the profile of the issues of women in pain, further action must be taken to eliminate diagnostic discrimination and provide equal medical attention for all Americans.

Doctors must be aware that women's pain is not inherently psychological. Medical students need to learn about gender-bias issues and how to properly evaluate and treat chronic pain in

everyone. State agencies, such as the Office of Women's Health, should take pain management seriously and advocate for gender equity in the treatment of chronic pain.

California spearheaded movements to end discrimination in the workplace, in housing and in other areas of life. Our state needs to take the lead once more and halt less-overt discrimination that results in very real suffering.

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