

# BRIDGING THE GAP

*A newsletter for medical professionals*

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## FEATURE ARTICLE

### BHI® 2 Test Brings Quicker Relief to Chronic Pain Patients

People who have chronic pain want one thing; relief. And the sooner they get it, the better. So when a doctor has an opportunity to cut up to three months off the time a patient has to wait to get treatment, he jumps at the chance. The reason for the shorter time frame? The BHI 2 (Battery for Health Improvement) test.

Dr. James Willis is a pain physician at Case Pain Consultants in Auburn, California. He makes frequent use of implants to treat his patients, which means the patients have to be cleared psychologically before insurance will agree to pay.

The main problem with that, says Dr. Willis, is the fact that there just aren't very many pain psychologists around. In his area, it can take up to a month just to get an appointment for a psychological evaluation.

"Then the patient has paperwork to fill out, and it can take one to three months to get the results back," says Dr. Willis. "Finally, there is the delay in getting the patient back to my office after I receive the evaluation. During that entire period of time, the patients' interest in the procedure tended to cool." In many cases, Dr. Willis would refer previously optimistic patients for a psychological evaluation and never hear from them again.

There were other barriers as well. "A third to a half of the patients won't go through with the formal psych 'eval,' simply because they can't afford it. It's not necessarily a covered service under insurance plans," says Dr. Willis. "Overall, if you looked at the entire experience, I was able to proceed with maybe one out of four people whom I considered appropriate candidates for the therapy."

One day he mentioned these problems to a representative from a spinal cord stimulator manufacturer who knew about the BHI 2 test. "The rep said, 'Gosh, there are some people in Reno who are using this nice computerized test, called the BHI 2. They actually administer it on a little keypad that you give the patient, you get the results back immediately' and I thought, 'that would certainly solve a lot of problems'."

Dr. Willis then talked with colleagues at a meeting of the International Spinal Intervention Society (ISIS). "I raised the question at a couple of the seminars as to what people were actually doing. And I identified several people who were using the BHI 2 as their primary psych test and found that the third parties, including Medicare, were more than happy with that."

So he began using the BHI 2 test, and was impressed with the accuracy, efficiency and scope of a tool he has come to consider "invaluable."

"It covers the entire range of psychological evaluation that I need," he says. "It tells me whether the patient has any dramatic underlying psychopathology, if there's untreated depression, whether there are any other issues, such as issues of secondary gain. It's a great initial test."

Dr. Willis can also count on the BHI 2 test's reliability. "The times when I have had red flags raised, they tended to be confirmed by the psychologist," he says. Those red flags reveal whether a patient has any dramatic underlying psychological issues, whether it's untreated depression, narcotic dependence or drug fixation, or whether there are any other issues, such as issues of secondary gain. And when there are no red flags? "The majority of the patients do very well."

Dr. Willis has found that the younger a patient is, the more receptive he or she is to taking the test. "Some of the older patients might ask, 'Why are you asking this stuff?' because they've never seen a test like this before. But the majority of people have no problem with it."

He offers the BHI 2 initially, with the shorter test, the BBHI™ 2 (Brief Battery for Health Improvement 2), primarily used for follow-up. He has plans to use the tests more frequently in an on-going capacity "to get a periodic evaluation of the patient's progress."

"I think more pain practitioners need to know about the fact that the tests exist," he says. "It has dramatically increased the number of people who actually get to use the therapy, with really successful results for the patients."

It is all about the patient. As Dr. Willis puts it, "The bottom line is, you just want to make sure that when you put this expensive therapy in the patient, he or she is going to benefit from it."

And as more and more patients at Case Pain Consultants feel the benefits of their treatment, they probably don't realize that the test they took beforehand played a crucial role in their pain relief.