

Chronic Pain

Service User Information Leaflet

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How to manage pain?

Most people are referred to Physiotherapy because they are in pain. The pain experience varies hugely. There are many causes of pain and many factors influence it. With a greater understanding of pain, it is possible to learn coping strategies and skills for dealing with it.

Acute pain

Acute pain is short-lasting pain that may be linked to an injury. When the injury has healed, pain will go away. Examples of this type of pain are a broken leg, a sprained ankle or strained back muscle.

Painkillers usually help this type of pain.

Chronic pain

Chronic pain is long term pain that has lasted longer than 3 months. It is pain that continues after healing has occurred. Most people have pain, for example in their low back, at some stage in their lives. In most cases, it will get better in several weeks. However, for some people the pain persists.

How pain is felt

The body has lots of pain nerve endings which send pain messages through pathways in the spinal cord to the brain. The brain sorts these messages. The brain can also send messages back down the pathways in the spinal cord in response to pain messages. For example, standing on a pin will cause pain messages to be sent to the brain and the brain will send a message back to the foot to move off the pin. This is an example of how pain can be useful by the body to prevent further injury.

The spinal cord is like a telephone exchange sending messages up to the brain and also taking messages back down the body.

With chronic pain, despite the injury healing, pain messages continue to be sent to and from the brain although healing has occurred. The nervous system becomes “wound-up” and becomes sensitive. The pathways in the spinal cord become like motorways rather than country lanes. It is easier to send messages along them and they travel faster and more frequently. Even unconnected sensations such as touch, heat or cold can be felt as pain along these pathways.

Why are x-rays or scans often unhelpful in people with chronic pain?

Your GP may perform some investigations to rule out any serious disease. X-rays, however, have a very limited role in finding the cause of chronic pain. This is because as we get older we all have changes in our bone and joints. These changes are due to normal ageing. These changes (sometimes described as wear and tear or degeneration) will be visible on an x-ray, but may not be causing the pain. Scans may be helpful in ruling out other causes of pain. The problem, however, may be due to abnormal firing of the nervous system, which cannot be seen on scans.

Pain in relation to wear tear

Wear and tear, sometimes called arthritis or osteoarthritis or rheumatism, is a normal part of the ageing process.

Just as we get poorer skin and grey hair on the outside as we get older, our joints become less smooth on the inside and our muscles become less flexible. The pain from this can occur at the same time as chronic pain.

Different pains are managed in different ways. Joints like to be exercised in order to keep them fit and supple and reduce pain. The secret is to try to exercise at a level which allows the joints to be exercised, but does not stir up the pain.

How pain behaves

Different people manage their pain in different ways. Some people push through their pain, constantly sore, regardless of the pain. Others ride the roller coaster of good and bad days, overdoing activities on the good days with a resultant flare-up. There are those who change and reduce their activity to such an extent that it completely takes over their life. The secret is to find an even balance.

For example people with chronic low back pain often describe themselves as having good days, bad days and flare up days.

Good day

Pain is present but not too troublesome and most activities can be easily achieved. (It is tempting to overdo activities on these days).

Bad day

The pain is more severe and it can be difficult to complete daily activities.

Flare-up days

The pain is severe and makes it impossible to carry out normal activities (Figure 1).

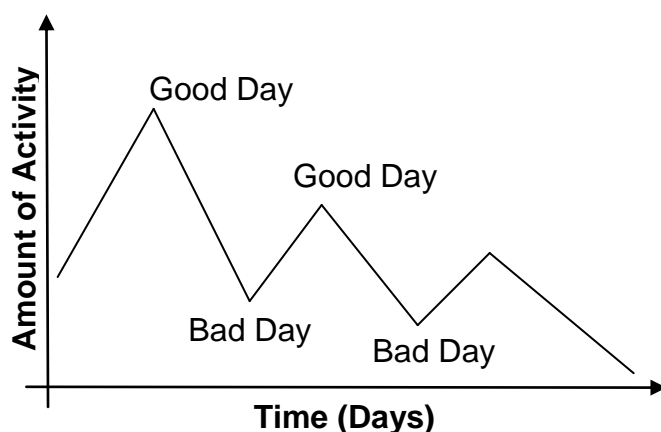


Figure 1: Activity reduces with time in people with chronic pain, if not managed correctly

Pain and stress

Stress causes the body to release chemicals. These chemicals are useful if you need to escape from danger as it increases alertness. It has the ability, however, to add to the sensitivity of the pain system and produce extra pain. Therefore, if stress is

increased for long periods there are higher levels of these chemicals and you get more pain (Figure 2).

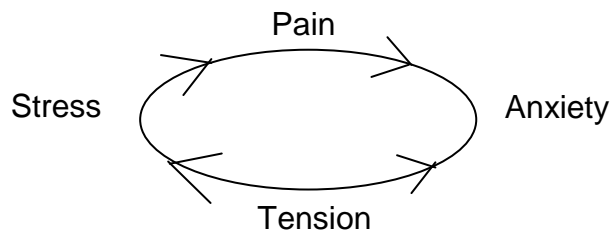


Figure 2: Pain-stress cycle

Pain, relaxation and exercise

Relaxation helps reduce stress and therefore helps reduce pain. Exercise causes the body to release the body's natural painkillers. These chemicals have the ability to "dampen down" the pain system and reduce messages sent in pathways of the spinal cord to the brain. These chemicals also help to reduce stress.

Pain and sleep

Pain can lead to difficulty getting to sleep and/or waking frequently through the night. Tiredness is another trigger for pain. Pain and lack of sleep can become a vicious circle.

Helpful regular relaxation and exercise can help improve sleep.

How can I help myself?

- **Expectations;**
- **Relaxation;**
- **Pacing and Spacing;**
- **Exercise.**

Expectations

Coming to terms with the fact there is no cure for chronic pain and it cannot be "fixed", but **can** be managed, can be difficult. It is, however, the first step to successful pain management. It is then possible to move forward to the future.

Relaxation

There are many approaches to relaxation, e.g. yoga, Alexander technique. There are many books and tapes on the subject. A physiotherapist can advise you in your choice.

Find a quiet comfortable space, e.g. lying on your bed on a flat chair. Choose a quiet time in your house. Take the telephone off the hook.

Relaxation should be practised daily. It cannot be rushed. Relaxation, like sleep, cannot be forced.

Once you can do relaxation well, you can use these skills in stressful situations.

Pacing and spacing

This is the opposite of the 'rest over activity' cycle. Pacing involves dividing an activity into small achievable chunks and setting realistic baselines.

A baseline, is the maximum amount of activity you can do on a bad day without stirring up your pain at the time or later, e.g. walk 3 minutes, iron 2 shirts, stand to wash up 2 minutes

Example:

The corner shop is an 8 minute walk. Your baseline is 3 minute pain free walking. In order to get to the shop, you walk for 3 minutes, rest, walk for 3 minutes, rest and then walk the remaining 2 minutes to the shop. Repeat the same on the way back.

You can gradually increase your baseline by a minute at a time, over a period of time e.g. a week or two (Figure 3).

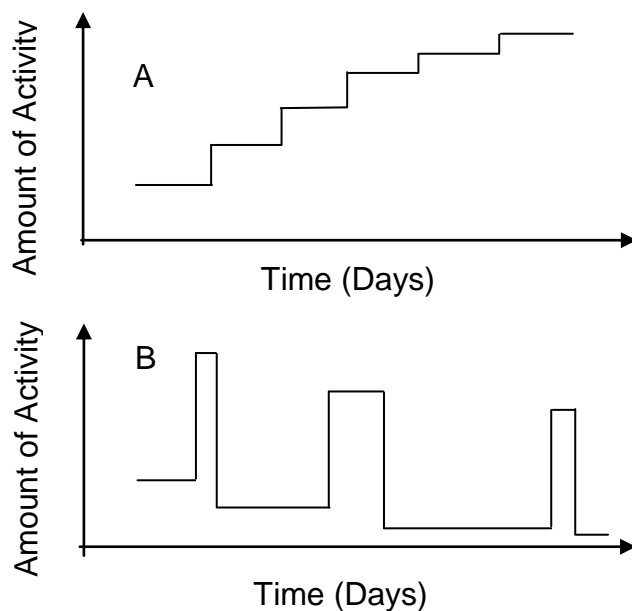


Figure 3: Pacing and Spacing (A) Gradual increase in activity results in greater long term improvement (B) Rapid bursts of increased activity results in reduced improvement

If you increase your baseline too much, cut it back for a week. Then gradually increase more slowly.

Any activity within your daily life can be divided up into chunks of activity and rest that do not flare up your pain.

Exercise

Exercise can also be divided into chunks for pacing and spacing.

You need to set sensible exercise baselines, i.e. the number of repetitions of each exercise you can do on a bad day without flaring up your pain.

If you are feeling sore do some movement that day. Reduce the number of exercises i.e. exercises need to be done on good and bad days.

Examples of exercises – ‘arm swings’, ‘marching on spot’. A physiotherapist will be able to help you establish your individual exercise programme and your exercise baselines.

What about medication?

You may need to use medication to help you return to your optimal activity. Your GP can advise on different forms of medication that can control the pain and help reduce nerve sensitivity.

Should I be off work?

It is usually advised that you try to stay at work or get back to work as soon as possible after a flare-up. Research shows that the longer you are off work the less likely it is that you will return. There is no cure for chronic pain. Current research shows that changes in your lifestyle, adding pacing and spacing, exercise and relaxation, will help you manage your pain better. With better pain management, you will have a better quality of life.

Useful Information

Pain Association Scotland
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Tel: 0131 312 7955
0800 783 6059 (enquiries only)
Fax: 0161 312 6007
www.painassociation.com

British Pain Society
www.britishpainsociety.org

Healthtalkonline – patients discuss their experiences
<https://www.healthtalk.org/>

Painconcern
www.painconcern.org.uk

Action on Pain
<http://www.action-on-pain.co.uk/>

Backcare
www.backcare.org.uk

Back Pain Overview
<http://www.youtube.com/watch?v=BOjTegn9RuY>

Understanding Pain Overview
<https://www.youtube.com/watch?v=aH9NG1c6mIY>

Position of Comfort Diagrams: ©PhysioTools