# <u>Understanding pain and what to do about it.</u>

Everyone agrees that pain is a universal human experience.

We now know that pain is **100% of the time** produced by the **brain**. This includes all pain, no matter how it feels – sharp, dull, strong or mild and no matter how long you've had it.

You may have had pain for a few weeks or months and this is called acute pain. It's common with tissue damage for example, from a back injury or ankle sprain and generally you'll be encouraged to stay active and gradually get back to doing all your **normal** things including work.

**Or** you may have pain for three months or more and this is generally called persistent or chronic pain because in this type of pain **tissue damage is not the main issue.** 

## Persistent pain - some facts

Persistent pain is quite common and affects around one in seven of us. It can be caused by health problems like arthritis or nerve damage or as a result of a specific problem that has not healed. It can also develop slowly, sometimes for no obvious reason or it may even come on some months or years after an activity or injury like a road traffic accident or surgery.

Persistent pain can be felt in a specific part of the body like the back, shoulder or legs or throughout the whole body. The pain may be continuous or vary in its level and can have other symptoms like numbness, burning or electric shocks. Sometimes it can flare up and get worse very quickly while at other times it can be easier to manage.

The pain can be in the tissues like muscles, ligaments and joints or it can come from the nerves. It may also be made up of both tissue and nerve pain.

## What to do about it

What is less clear though is when you're told you have persistent pain — what's the best thing to do about it?

Having a brain that keeps on producing pain even after the body tissues are restored and out of danger is no fun. Some people say it feels like they must have something wrong.

But that's just it – once anything dangerous is ruled out – health professionals can explain that most things in the body are healed, as well as they can be, by 3 – 6 months. Therefore on-going pain being produced by the brain is **less about the structural changes in the body and more about the sensitivity of the nervous system** – in other words, it's more complex and it often doesn't respond to usual treatments.

## A useful analogy

One way to understand persistent pain is to think about a very sensitive car alarm.

Car alarms are good when someone is trying to break into your car! The lights flash, the siren blares and it grabs your attention instantly to tell you the car is at threat of a break in. **However**, car alarms are annoying when the same thing happens just when someone brushes past the car or a butterfly lands on the roof. The siren still sounds and the lights flash yet there is no break in threat.

The body's nervous system is like this too. In persistent pain the pain sensing nerves send off the same signals as if there was an instant threat of injury or damage when none exists. It's not just annoying though, it hurts too!

Whilst the car alarm system can be fixed or replaced, with persistent pain you need to learn how to manage your faulty sensitive nervous system.

#### Retrain pain

So to try and figure out what's going on you need to retrain the brain and nervous system. To do this it's helpful to look at **all the things** which affect the nervous system and may be contributing to your individual pain experience.

It helps to look at persistent pain form a **broad perspective** and by using a structured approach and a **plan** it is less likely that anything important will be missed.

#### Medical approaches

Let's start with the medical side. Firstly – taking medication **can** help but only to a **limited** extent. It is the **more active** approaches that are necessary to retrain the brain. So using medications to get going is ok, and then mostly they can be tapered and ceased. Some people also think surgery might be the answer, but when it comes to a complex problem like chronic pain, surgery may not be helpful. So **if** you're thinking of surgery, it's best to get a second opinion and remember to consider all aspects.

#### **Thoughts and emotions**

Next it is helpful to consider how your thoughts and emotions are affecting your nervous system. Pain really impacts on people's lives and this can have a big effect on your mood and stress levels. All those thoughts and beliefs are brain impulses too – but, you can learn ways to reduce stress and wind down the nervous system. This helps with emotional wellbeing and can reduce pain as well.

### **Diet and Lifestyle**

The third area to consider is diet and lifestyle. Now it turns out that our modern lifestyle might not be so good for us- in fact, what we eat and how we live may really be contributing to a sensitised nervous system. Looking at all the things like smoking, nutrition, alcohol and activity levels – and seeing if there are any **issues**, is a good place to start and these things can go down on your plan.

#### Personal story

Then there's often enormous value in exploring the deeper meaning of pain and the surrounding personal story. By stepping back and looking at all the things that were happening around the time the pain developed many people with pain can make useful links between a worrying period of life and a worsening pain picture. For many, recognising deeper emotions can be part of the healing process – for example, changes in social situation, family dynamics or loss of a job.

#### Physical activity and function

Lastly, but by no means least, is the physical activity and function. From the brain's perspective getting moving at comfortable levels, without fear, and where the brain does not "protect by pain" is best, and you'll gradually restore your body's tissues.

#### To summarise

Persistent pain comes from the brain and it can be retrained but it needs to be considered on a broad perspective looking at the whole person.

## The Top 5 factors that keep people in the Chronic Pain Cycle

A lack of Physical Activity

The over-activity rest trap (Boom and Bust)

Social withdrawal and lack of enjoyable activity

Stress, anger, frustration, sleep problems

Waiting for a cure, hoping pain will disappear, seeking a quick fix

## 5 Solutions to help regain control of pain

Progressive return to enjoyable physical activity and exercise

Goal setting and pacing to avoid Boom and Bust.

Seek out pleasurable and enjoyable activities to help fill your time and absorb your attention

Stress busters – attempt to reduce stress where possible in your life; relaxation techniques; sleep quality; breathing exercises

Acceptance, taking control and stop searching for the quick fix

#### Setting up a Daily Pain Plan

Each day set yourself 3 goals:

An **Activity** Goal

A **Relaxation** Goal

A Fun Goal

Make sure that your goals are Realistic, enjoyable, specific and time set for example

Goal	Aim/Target	Time of day
ACTIVITY	Walk x 20 mins or stretch x 15 mins	4pm
RELAXATION	Lie on top of bed x 20 mins listening to music and do breathing exercises	9pm
FUN	Play a game with kids	7pm

## Pacing and Prioritising

Attempt to establish your baseline – you need to recognise the warning signs that you are doing too much and are at risk of flaring up.

The key to pacing is to ensure you take a break before you need one!!

Avoid tackling all your tasks at once and learn to prioritise which tasks are essential

By avoiding the Boom & Bust activity trap you will have less episodes of pain and inactivity.

Your body will become stronger over a period of time with not having any prolonged episodes of pain and inactivity, and over time you will be able to do more and set your baseline higher.

Further reading

www.retrainpain.org

www.paintoolkit.org

VIDEO: www.archi-net.au/resources/primary/partners/fast-track-pain or

Youtube: understanding pain and what to do about it in less than 5 minutes