

Chronic Pain Management Strategies

In the scientific literature, there is no definitive cure for most chronic pain conditions. The goal for treatment of chronic pain treatment is to manage pain so that the patient's physical and emotional functioning is restored, and overall quality of life improved.

There are multiple possible contributors to pain. At times pain can relate predominantly to bodily injury, as is typical of acute pain. However, if pain persists, additional factors are often involved and the message of pain may then point to broader issues. The management of chronic pain generally requires a broad whole person treatment approach which addresses the multiple aspects of pain and lifestyle. "Active self-management" is a key component, along with targeted medical input and appropriate social support. The focus is on making gradual change and assessing response. The aim in chronic pain is to "retrain the brain". Pain reduction usually happens slowly over a 6-12 month period, although at times rapid improvement can occur.

The following is an overview of various treatment for chronic pain. It is recommended that you carefully weigh up the evidence before you commencing any intervention for chronic pain. This includes consideration of possible side effects that might arise.

Biomedical

This can include surgery, nerve blocks and medication. There are also more invasive medical procedures such as implantable intrathecal drug delivery systems and spinal cord and peripheral nerve stimulators. Overall the evidence for medical interventions in chronic pain is weak. There may be a time limited role in selected cases.

Commonly used medications include, anti-inflammatory analgesics, paracetamol, antidepressants, anticonvulsants and opioids. It could also include pharmacological treatment for depression and anxiety.

Psychological Treatments

Cognitive Behavioral Therapy (CBT) helps patients to address patterns of thinking and behaviour. There is a focus on goal setting development and planning with much emphasis on an accurate understanding of pain and its relationship between physiology eg) pain and muscle tension, thoughts, emotions and behaviors. Lifestyle changes and strategies are encouraged to improve sleep patterns and to develop better coping skills for pain and other stressors using various techniques eg) paced activities and relaxation.

Physical Therapy (passive and active therapies)

This therapy may be guided by a physiotherapist, exercise physiologist, occupational therapist or other. Hands on therapy, has a role in acute pain management. The focus in chronic pain is active self management. Here the therapist facilitates an activity or exercise program. This could include a progressive program of range of motion therapy, muscle strengthening and postural training. Any therapy utilised will also include promoting active self-management strategies to increase an individual's ability to work and function, perform household duties and simply enjoy life.

Complementary Alternative Medical (CAM) Therapies.

CAM refers to forms of health care that are used in addition (complementary) or instead of (alternative) traditional medical treatment by some people with chronic pain. These are defined as:

1. Alternate medical systems: arises from complete systems of theory and practice eg) homeopathic and flower remedies in western cultures and traditional Chinese medicine in non-western cultures
2. Mind-Body interventions: techniques to enhance the minds capacity to effect the body eg) Counselling, meditation, prayer and creative therapies such as music or art therapy. These can overlap with some psychological therapies.
3. Biologically based therapies: Uses substances in nature eg) Nutritional supplements and vitamins, naturopathic nutrition and diet
4. Manipulative body based methods eg) massage, acupuncture, aromatherapy chiropractic and osteopathy
5. Energy therapies: based on use of energy fields eg) Tai chi, reiki and therapeutic touch.

The evidence in chronic pain management supports active over passive strategies and trial principles apply to CAM therapies, as it does to traditional approaches. It is important to understand that like any treatment there can be benefits and side effects. Refer to the professional body regulating practice for advice on levels of experience, qualifications, and training required by practitioners.

References:

1. Nicholas M, Molloy A, Tonkin L, B. L. (2011). *Manage your pain. Practical and positive ways of adapting to chronic pain.* Sydney: ABC Books
2. National Centre for Complimentary and Alternative Medicine (NCCAM): US Department of health and Human Service. (Sourced 2/3/2014) <http://nccam.nih.gov/health/pain/chronic.htm>