



Sherwood Forest Hospitals  
NHS Foundation Trust

INFORMATION FOR PATIENTS

# Let's Manage Pain

Dedicated to Outstanding care

## About this booklet

Persistent pain, also called chronic pain, is pain which continues for longer than expected.

Pain can affect all areas of your life.

People with persistent pain find that accepting and managing the pain can be more useful than trying to find a cure for the pain.

This booklet is designed to help you cope better with your pain.

### **The following areas are covered:**

- Types of pain
- The neuromatrix model of pain – this explains the nature of pain, including chronic pain
- Stress and pain
- How to self-manage
- Values and goal setting
- Sleep
- Medications.

## Types of pain

Not all pain is the same. 'Acute' pain is pain which lasts a short period of time and is due to an injury or illness.

Pain which lasts longer than 3-6 months is called 'chronic' or 'persistent' pain.

Sometimes people can have persistent pain along with an illness such as osteoarthritis.

Sometimes people have ongoing pain after an injury and sometimes people have pain and no cause is found.

The bad news is that it is very difficult to find a complete cure for persistent pain once someone has it.

The good news is that people with pain can have a good quality of life when they manage their pain better.



## Differences between acute and persistent pain

<b>Acute pain</b>	<b>Persistent pain</b>
Short lasting while healing process is taking place.	Lasts longer than 3-6 months and not related to healing process.
Pain medications can be helpful.	Pain medications not always helpful, especially if the side-effects stop you from doing things you enjoy.
Anxiety or depression may be short-lived whilst the pain lasts.	Mood difficulties may be longer-term.
Acute pain means 'danger'. It is a warning signal.	No useful purpose.
A symptom of tissue damage, illness or disease.	Can occur without disease/injury or after tissues have healed .
Rest can be helpful	Long periods of rest without exercise are not helpful.

## Neuromatrix model

Threat signals from the body travel up to the brain.

Research has shown that the brain very quickly decides (without us even being aware of it) whether it thinks these threat signals means we are in danger. Just like turning up the volume on a radio, if the brain decides the signals means 'danger' it will turn up the volume of the pain to make sure we take action. The brain will also turn down the pain volume if it decides there is no danger and we don't need to take action.

For example, if we worry that pain is a sign we have a life-threatening condition, the pain volume will be turned up.

Expecting pain or paying worried attention to the pain can also increase the volume. Sometimes the brain makes a mistake and keeps the signals going, even though the danger has passed (e.g. phantom limb pain).

High stress levels and low mood also increase the threat signals, making the pain feel worse.

When this happens, it is very difficult to find a cure for the pain. However, people can cope with persistent pain by learning to self-manage.

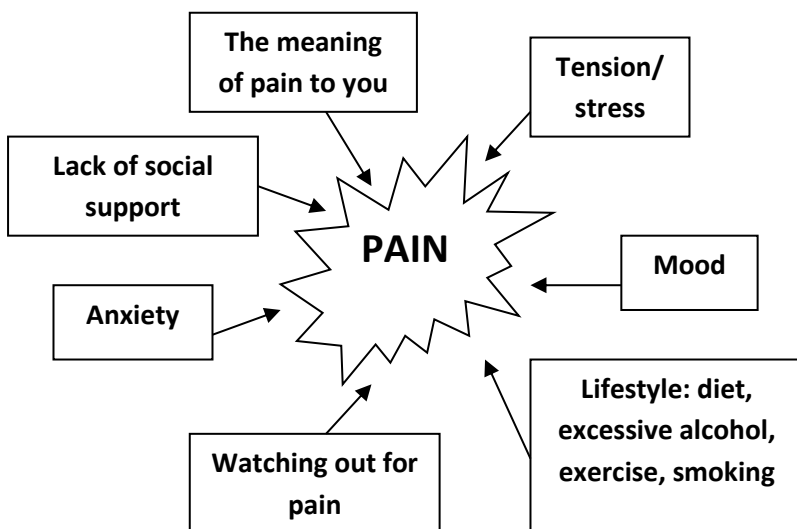
## Stress and pain

As the neuromatrix model of pain shows, there is a significant link between stress and pain.

Pain, understandably, causes stress, which causes more pain, resulting in more stress.

Managing stress and other lifestyle factors can help manage pain and help to break this cycle.

Excessive alcohol intake, smoking and poor diet can also negatively affect pain. Exercise and social support can help.



## Self-management

Self-management is an important aspect of pain management.

Research has shown that people cope better with their pain when they take active control of their lives, rather than trying to seek a cure of their pain.

### **Why is self-management important?**

- It will help you find ways to enjoy life, despite your pain.
- It will help you recognise when you have done too much and need to pace yourself.
- Leading a fuller life helps you focus less on your pain which will improve your mood.
- You will better manage your frustrations and fears.
- By learning to set small, achievable goals you will regain a sense of achievement and you can start today.

## Values

Values are the things which are most important to you and which define you as a person.

Values often include such things as family (e.g. being a good parent/partner/son/daughter), leisure (e.g. participating in hobbies or interests), work or education (e.g. being a valued employee, learning a new thing) and health (e.g. being fit or eating well).

It is important to recognise that some values will be important at different times in your life, at different stages and that priorities change.

However, it is important to be balanced in your values. If you pay too much attention to just one value such as health, other things you value may become neglected. If this happens, it may affect your mood and quality of life.

Persistent pain can impact everyday functioning in many ways. Often people give up the things they used to like doing because of the pain (e.g. hobbies or interests), or find they cannot do things in the same way anymore (e.g. work or housework). Many people find these difficulties impact on their sense of identity, e.g. being a good parent, employee or friend.



Pain can take you away from living YOUR life. People with persistent pain often feel like they are no longer the same person or have lost the things they used to enjoy in life.

Focusing on your values is important. The first step is to identify your values. What's important to you now? How successful do you feel you are in living according to those values at the moment?

It might be helpful to ask the question: "What are some of the things I have stopped doing which are important to me, or used to enjoy?" In order to help you achieve this, it is important to set yourself small manageable goals based on your values.

## Setting goals

Goals help you live according to your values. For example, you might have the goal of getting your children to school on time, which is consistent with the value of being a good parent.

**Step 1** – Choose one or two areas of your life that you want to change.

**Step 2** – What is your long term goal? What can you realistically do?

**Step 3** – What is a small step in the right direction? This could be as simple as making a phone call.

**Step 4** - Set yourself a small target for the week, something that you feel is achievable, but that is new or you haven't done for a while. Think of what, how, when and who with? How can you pace this goal?

When planning goals, it is important to make them:

- Specific
- Paced
- Achievable
- Challenging
- Enjoyable.

**Step 5** – Anticipate possible barriers and how you can overcome them.

- What can you do?
- Who can help?
- How have you coped with difficulties in the past?

## Sleep

Pain and stress can interfere with sleep, leaving you feeling tired and often in more pain. This can cause more stress, resulting in more difficulties sleeping.

The following tips should help you to improve your sleep:

- Avoid napping during the day.
- Avoid stimulants such as caffeine, nicotine and alcohol too close to bedtime.

- Gentle exercise during your day can promote good sleep.
- Don't eat large meals close to bedtime.
- Establish a regular bedtime routine.
- Associate your bed with sleep. It is not a good idea to use your bed to watch TV or work.
- Empty your head by writing your thoughts/jobs list down before you go to bed. Anxious or worried thinking can affect your sleep.
- Turn the clock round so that you are not constantly checking the time, which can make you more agitated, increasing the likelihood you will not get a good night's sleep.

Further resources: [www.nhs.uk](http://www.nhs.uk) (insomnia).

## **Medications**

There are many different types of medication for pain. A better understanding of these can help your self-management.

## **Paracetamol**

This is a drug on its own and it can be very effective. Paracetamol is often found in a combination with weak opioid drugs, these are:

- Co-codamol 8/500mg, 30/500mg (codeine and paracetamol)
- Co-dydramol (500mg paracetamol/ 10mg dihydrocodeine).

## **Non-steroidal anti-inflammatory drugs (NSAID)**

Here are some of the common ones:

- Ibuprofen
- Naproxen
- Diclofenac (Volterol gel).

## **Weak opioids:**

- Codeine
- Dihydrocodeine
- Tramadol.

## **Strong opioids:**

- Morphine
- Fentanyl (usually in patches)
- Buprenorphine (usually in patches)
- Oxycodone.

## Other medications

Often others are used to treat pain, which are helpful with nerve pain and also help to improve on sleep:

- Amitriptyline or Nortriptyline. These are anti-depressant drugs used in small doses and can help improve on sleep.
- Gabapentin or Pregabalin are anti-convulsants and are licensed to use for nerve pain.
- Duloxetine is an anti-depressant drug used for nerve pain.

## Rule of thumb

Start with paracetamol. If you are still in pain **add** a NSAID and, if still having high levels of pain **add** a weak opioid.

Generally, **only** have **one** from each group.

## Side effects

Paracetamol: Usually none.

NSAID: Diarrhoea, indigestion, stomach ulcers (very low probability).

Opioids: Constipation, nausea, dizziness, itching, sleepy, hallucinations, palpitations.

Others (e.g. amitriptyline, gabapentin): Dry mouth, blurred vision, constipation, sleepy, hallucinations.

## **Remember**

It is often difficult to know which pain medication is causing the side effects. It is always best to try one at a time. If the side effects outweigh the benefits, discuss this with your nurse or doctor.

## **Alcohol**

Alcohol has the same side effects as many of the medications, **but** could make any side effects greater.

## **Driving**

**Do not drive** if affected by medication in any way that alters your perception.

## **Timing of medication**

Take your pain medications at the recommended times as this may reduce side effects.

## **Remember**

The pain medication that works for one person may not be as effective for another person. It is a matter of trial and error.

Do not take someone else's medication, it is dangerous.

## **Our service**

We are a multidisciplinary team of consultants in anaesthesia and pain control, specialist pain nurses and clinical psychologists specialising in pain management.

We are based in the Pain Management Unit, Clinic 9 at King's Mill Hospital, and run individual and group pain management programmes.

If you are interested in attending, please speak to your GP and they can refer you to our clinic.

## **Further sources of information**

NHS Choices: [www.nhs.uk/conditions](http://www.nhs.uk/conditions)

Our website: [www.sfh-tr.nhs.uk](http://www.sfh-tr.nhs.uk)

## **Patient Experience Team (PET)**

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

**King's Mill Hospital:** 01623 672222

**Newark Hospital:** 01636 685692

**Email:** [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net)

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