

INFORMATION FOR PATIENTS

Self-management of persistent pain

Purpose of leaflet

This leaflet is a summary for patients who have attended a 'Pain Education' session. It describes what healthcare professionals mean by the term 'persistent pain' and offers some simple advice about managing pain.

How common is pain?

All humans experience pain. It is a useful, protective system to help us survive and stay out of danger. For example, pain can make you withdraw your hand from a hot pan to stop it getting burnt, or encourage you to stay still to help tissues heal if you have broken a leg. Both of these are examples of 'acute pain', which we all experience. In the UK, 'persistent pain' is also a common problem; 1 in 5 people have it. Please see the next section for more details about the difference between acute and persistent pain.

Research has shown that all pain is produced by the brain. The amount of tissue damage/inflammation often does not match with the amount of pain produced by the brain. In fact, it is possible for the brain to produce pain in the complete absence of any tissue damage at all. Pain is simply the brain's response to perceived danger.

What is the difference between acute and persistent pain?

Acute pain is common when you have damaged or inflamed tissues in your body, for example if you sprain your ankle or break your arm. Acute pain can last for a few days, weeks or months and then it generally gets better. If your pain has lasted for 3 months or more it is called 'persistent pain'. In persistent pain, tissue damage is not the main issue. We know that most tissue damage in the body heals as well as it can do by 3-6 months. In persistent pain, the brain continues to produce pain even after the body tissues are restored and out of danger. Persistent pain is like an overly sensitive or faulty car alarm, which keeps going off for no reason. Resting and relying on medication are not useful if you have persistent pain.

| Acute pain | Persistent pain |
|---|--|
| Short lasting while healing process is taking place | Lasts longer than 3-6 months and not related to healing process (tissues are generally as healed as they are going to be by 3-6 months post injury) |
| 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, especially if you have "life shutdown" |
|---|---|
| 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 at all helpful and can lead to muscle tightness and weakness. |

So what can I do to help myself?

On-going pain produced by the brain is less about structural changes in the body and more to do with an over-sensitivity of the nervous system. In order to manage this, you need to retrain and calm down the brain and nervous system. It is helpful to look at all the things that affect the nervous system and may be contributing to your pain. For example, stress (including worries about what is wrong with you, concerns about medication and whether you are safe to be more active) and depression can increase the sensitivity of the nervous system. It can also be useful to look at your lifestyle choices and consider whether you feel ready to make some positive changes to improve your general health.

Step 1: Understanding and reducing medication

Taking medication for persistent pain can help, but only to a limited extent. People with persistent pain are frequently prescribed lots of different types of medication at high doses. Unfortunately, in most cases, their pain remains. They are still unable to function well and often have side effects, which prevent them living their life the way they would like to. Using a limited amount of painkilling medication in the early stages of a persistent pain problem can enable you to remain active and take part in the activities you value in life. Following this, medication can usefully be slowly reduced and then stopped altogether. It is particularly helpful to reduce your medication if you are on high doses of opioid medication such as morphine or Tramadol. Opioids can have long term effects on the body when taken over a long period of time and can actually increase your pain as you become tolerant. Please talk to your GP about whether reducing medication is a good option for you.

Step 2: Slowly increase activity and flexibility

Keeping active is vital in order to stop your muscles becoming tight and weak. Bed rest and staying still can prolong recovery and increase pain. Your brain needs to learn to become more active without fear of harm, by increasing activity in a gentle and planned way. One useful way to do this is to 'nudge the edge of the pain' by pushing yourself just a little bit more each time you do an activity. You may have some discomfort during activities, but this is not harmful in persistent pain conditions. While increasing your activity levels, it is important not to fall into the "boom and bust" trap of doing too much one day and then having a lot of pain and a day in bed the next day because you have pushed yourself too hard.

Setting small goals to increase your activity levels is the solution.

For expert advice on activity and exercise plans, you can self refer to physiotherapy. If you have previously accessed physiotherapy you can simply continue with your exercises and begin to set yourself some more small goals in order to build up your tolerance to small increases in pain.

Step 3: Managing difficult thoughts and emotions

Persistent pain can really impact on people's lives, increasing stress levels and causing low mood. In addition, poor mood and stress can make pain levels significantly worse.

It is important to learn ways to reduce stress and 'calm down' the nervous system. Understanding how the body responds to stress and using techniques such as relaxation alongside remaining active can help improve your mood and reduce pain.

If you feel that you have issues other than your pain which are impacting on your mood, then you can access free NHS support by self-referring to one of the following services, who provide Cognitive Behavioural Therapy (CBT):

- Insight (0300 555 5579)
- Let's Talk Wellbeing (0115 956 0888) Trent PTS (0115 896 3160)
- Turning Point (0300 555 0456).

National guidance on pain management recommends combined physical and psychological programmes.

There are a number of these programmes locally including specialist physiotherapists who combine the exercise programmes with CBT. If your pain is more complex, your GP can refer you for a pain management programme delivered by a full multidisciplinary team (including physiotherapists, clinical psychologists, occupational therapists and pain nurse specialists.)

Step 4: Prevent 'Life Shutdown'

Many people with persistent pain stop doing all the activities which made their life enjoyable or meaningful in an attempt to reduce their pain. Unfortunately, this often has the opposite effect. The brain is left with more time to attend to the pain and stress and low mood increase as you begin to drop out of work, social and other activities.

It is really important to continue with your normal activities as much as possible. Sometimes this will mean doing things in a different way, for example, enjoying a video with grandchildren rather than playing football with them or meeting someone for a coffee at home in the day rather than going out with a larger group of friends to a pub at night. You might change your housework routine by using lighter/different equipment and doing chunks of activity with rest periods in between.

Step 5: Tackling diet and lifestyle issues

It is helpful to consider if there are any areas of your lifestyle which you could improve. For example you may be overweight or smoking or drinking too much alcohol.

If you feel ready to make some healthy changes and improve your overall sense of wellbeing, the Self Care Hub at Ashfield Health and Wellbeing Centre can help you to access services to support you (telephone 0300 303 2600).

In conclusion

All pain is produced by the brain. Persistent pain is pain which has lasted longer than 3-6 months and is caused by an over- sensitised nervous system. If you look at your pain from a broad perspective there are many opportunities to help yourself and 'calm down' the brain. Ways to help include reducing your medication, accessing support for the emotional consequences of pain, changing unhelpful lifestyle patterns. setting small goals to slowly increase activity levels and finding new ways to engage in the activities you value in life. If used together, these approaches can significantly improve your pain experience.

Taking responsibility and learning how to manage your pain differently, rather than continually seeking a 'cure' with medical interventions, is really important in helping improve wellbeing. Specialist healthcare professionals are available to guide and support you in learning how to self-manage.

Please access our pain management website to access more self-help materials - including information leaflets and relaxation MP3 files - via the Sherwood Forest Hospitals Trust website.

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

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

King's Mill Hospital Tel: 01623 672222 **Newark Hospital** Tel: 01636 685692

Email: sfh-tr.PET@nhs.net

If you need this information in a different language or format, please contact the Patient Experience Team, as above.

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If you require a full list of references for this leaflet, please email <u>sfh-tr.patientinformation@nhs.net</u> or telephone 01623 622515 extension 2715.

All of our hospitals are smoke free and as such you will not be able to smoke anywhere on site including the car parks, pathways and grounds. Please speak to a member of staff if you would like to stop smoking. We can offer advice and refer you to services that support smokers who want to cut down or stop completely.

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