

Newham North West 2 Primary Care Network

## Feeling ALIVE: I CAn Live Well with Pain

**PCN CLINICAL DIRECTOR** 

**Dr Anil Shah** 

WEBINAR COMPILED AND FACILITATED BY

**Philip Hodgkinson - Clinical Pharmacist** 

Katy Szita - Lead Social Prescriber

## Housekeeping

- The running time of this information webinar is approximately 1.5 hours.
- We will provide you with a summary about pain management techniques.
- The content includes links to online resources and information about local services for you to explore and consider in your own time.
- We would like to offer you the opportunity to have a follow up appointment with a Social Prescriber at your GP surgery after you have viewed this webinar. We will tell you more about this at the end of the session.
- Alongside the link to view this presentation you will be provided with the slides so you can read the content afterwards.

### **Overview**

#### Торіс

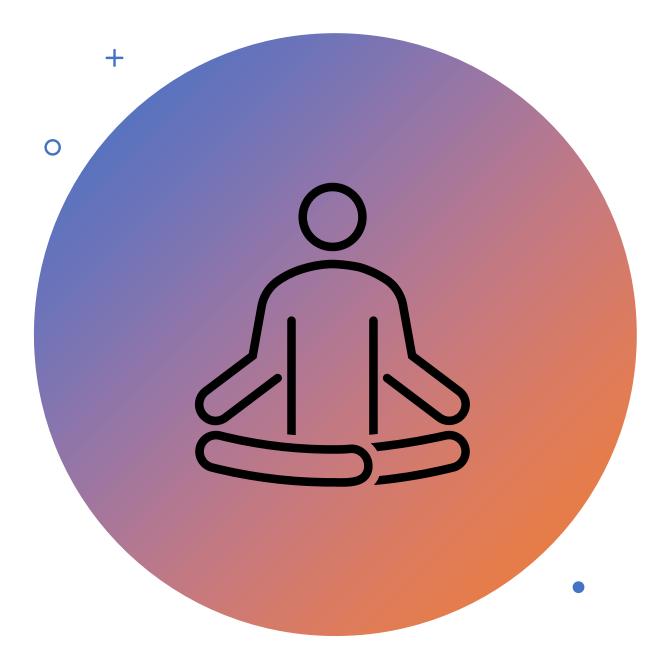
Mindfulness exercise

Section 1: clinical What is pain? Pain medication overview. Opioid side effects, reduction, tapering.

Section 2: non-clinical Self-management: Pain cycle vs self-care cycle Summary of 10 footsteps to living well with pain

Non-pharmacological treatment options and services available locally

Next steps and close



## Mindfulness Exercise

- We are going to do a short mindfulness exercise to help you to relax and be fully present to absorb the information we will be sharing with you.
- Later in the webinar we'll be introducing you to how mindfulness and relaxation can help you to manage pain.
- Before we start please:
  - Get comfortable in your seat
  - Take a deep breath (in from your nose and out from your mouth)
  - Try to feel relaxed and let go of any tension

## Take 2 minutes to be still and calm





## Reset

• Take a moment to come back to the session and be ready to focus on the information we're about to share with you.

# What is pain?

**NHS Definition**: The brain and the nerves inside the spine (the spinal nerves) make up the central nervous system. The spinal nerves carry messages from the body to the brain including signals that tell the brain there's pain somewhere.

The brain acts like a control centre working out how serious the source of the problem is and what strength the pain should be. Sometimes the brain's interpretation of these signals isn't always accurate (not always an accurate measure of tissue health).

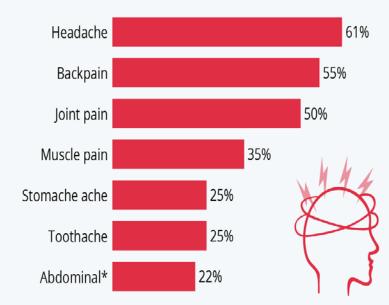
**Tina living well pain website**: I have no idea when I experience 'pain' if it is the same as when someone else does. Just like I have no idea when I feel 'fear' whether that is the same experience others feel. Or maybe taste, hunger or smell.

I don't think scientists agree on, or even really know, what pain is or how and why we experience it.

Until science has more answers I choose to simply think of pain as 'an unpleasant experience'. Tina living well pain website

#### Pain in the UK

UK adults that have experienced physical pain in the last 12 months, by type

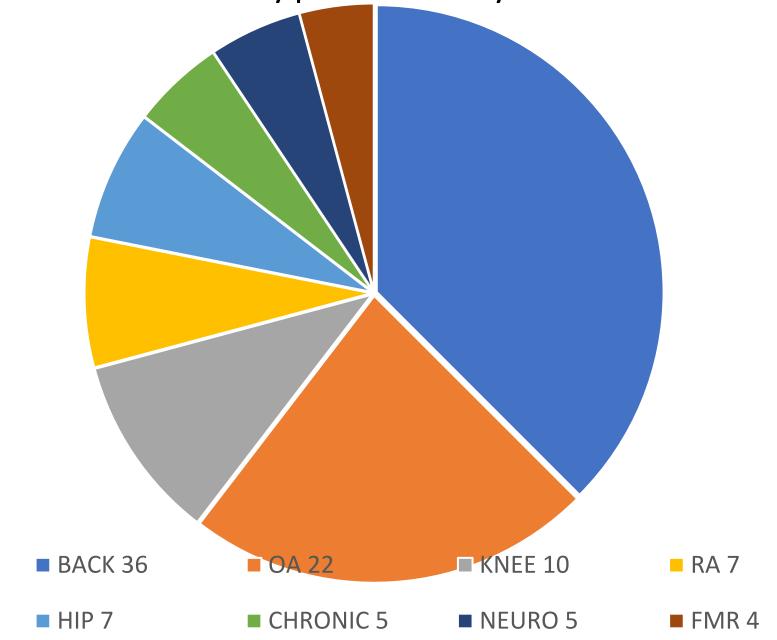


\* Option only shown to female respondents n=539 UK adults that have suffered from physical pain in the past 12 months. Conducted 30 July to 9 August 2021. Source: Statista Global Consumer Survey

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#### statista 🗹

## Pain types locally

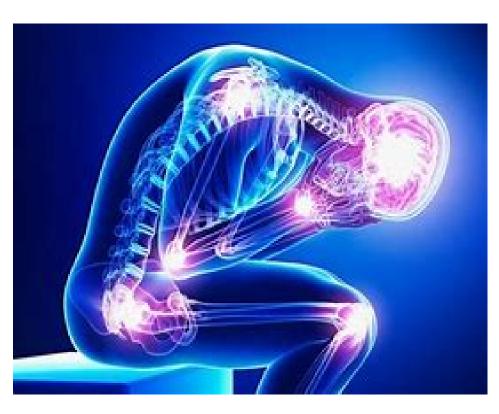


## Acute PAIN

- Pain that begins suddenly and does not last long.
- Common Causes
- Minor injuries such as scraping your knee
- Soft tissue damage such as a paper cut or sprain
- Surgical pain
- Labour and childbirth
- Headache simple
- Toothache







#### Chronic PAIN

- Any pain which lasts more than 12 weeks
- Between one-third and one-half of the population of the UK
- Almost half of people with chronic pain have a diagnosis of depression
- Clear underlying condition

Examples

- Diabetes neuropathy
- Arthritis osteo & rheumatoid
- Fibromyalgia
- Irritable bowel
- Back pain
- Endometriosis etc

#### **Chronic Primary PAIN**

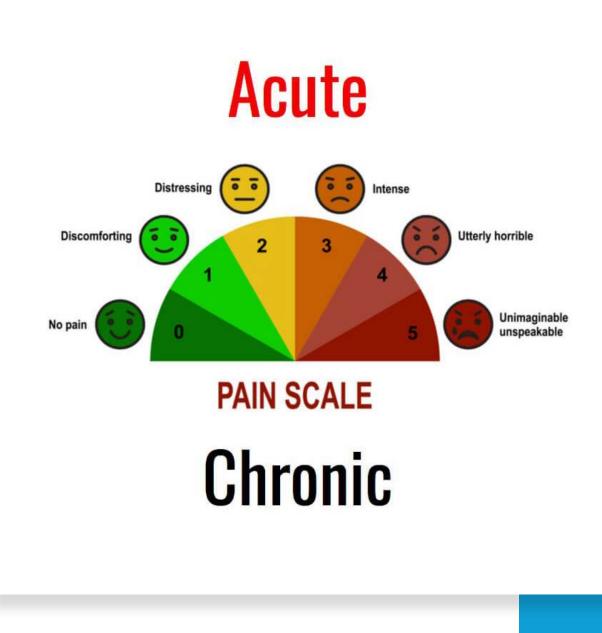
- As Chronic pain, BUT
- no clear underlying condition
- leading to changes in nervous system & behaviours
- ie anxiety, depression, fear

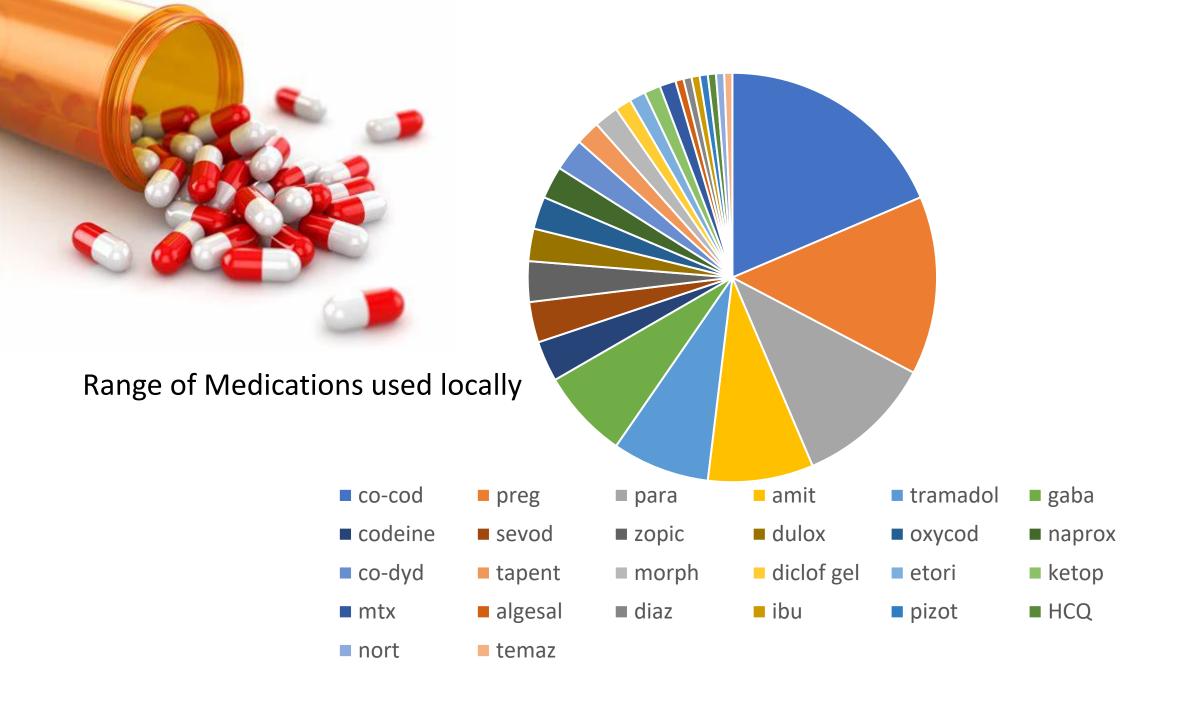
#### Examples

- Fibromyalgia
- Chronic headache/face pain
- Chronic Musculoskeletal pain
- visceral pain

### Pain Appointment Thoughts

- The patient brings their pain, the doctor interprets it as disease (...a cure is offered)
- Pain is complex and people experience it, and manage it, differently.
- Examination needed?
- Score may help
- Have you used anything?
- How long for?
- Side effects?
- A person can use a range of tools, which includes medication
- Compatible with other conditions?
- Stepwise treatment
- Further diagnostics





DRUG group	action	drugs	Side effects	
Neuropathic	Antidepressant	Amitryptyline Nortriptyline Duloxetine	Drowsiness, dry mouth, low sodium, constipation, diziness	
	Anticonvulsant	Gabapentin Pregabalin	Malaise, insomnia, tremor, anxiety, confusion	
PAIN Killer		Paracetamol	Skin reactions, Tachycardia	
	Opioid	Codeine Morphine Oxycodone Fentanyl Buprenorphine Tramadol	Dependance, respiratory depresssion, constipation, drowsiness, headache	
Non steroidal (NSAID)	Туре 1	Ibuprofen Naproxen Ketoprofen Diclofenac	Gastro intestinal , bleed, heart failure, nausea, rash	g
	Туре 2	Etoricoxib	Arrhythmias; asthenia; bronchospasm; constipation; diarrhoea;	
Arthritis DMARD (disease modifying arthritis drug)		Methotrexate Leflunomide Hydroxychloroquine	Anaemia; appetite decreased; diarrhoea; drowsiness; fatigue; gastrointestinal discomfort;	

## Drug groups

## Opioids

• There is little evidence that opioids are helpful for chronic pain.

Opioids should be discontinued if the person is still in pain despite using opioids, even if no other treatment is available.

. ....

• people with chronic pain who do not achieve useful pain relief from opioids within 2 to 4 weeks are unlikely to gain benefit in the long term.



• Moreover, it has recently been established that both physical pain and psychological pain stimulate the same part of the brain Medicines optimisation in chronic pain Key therapeutic topic 16 January 2017

## **Opioid side effects**

- Questions
- Do you still have pain despite using your opioid medication regularly? Body becomes tolerant of use very quickly, increased pain receptors increase pain perception
- Does your medication cause side-effects that affect your daily activities e.g. drowsiness that stops you driving , breathing difficulty
- Have you noticed a change in your sex drive or sexual function?

infertility, reduced libido, amenorrhoea, sexual dysfunction, fatigue, hot flushes,

• Do you take your medication because it helps you to relax?

Addiction, craving, dependance?

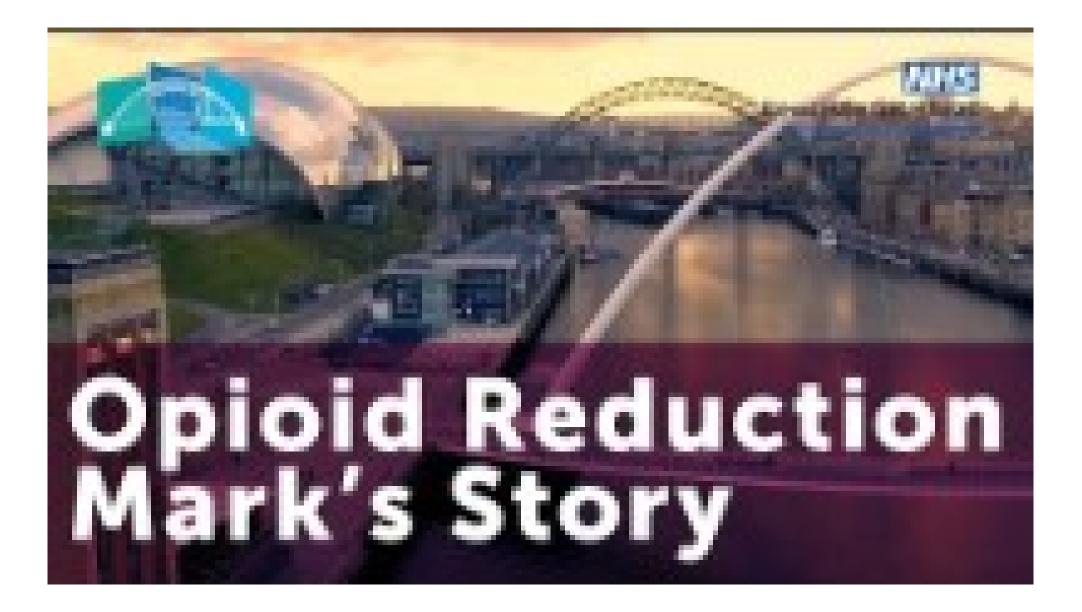
If you answer 'yes' to any of those questions, it is likely that the opioid medication is not doing what it is supposed to and may be causing you harm.

## **Opioid tapering**

- How do I taper?
- 1. Enlist support from family, friends and all your healthcare team.
- 2. Make a plan to manage any withdrawal related pain.
- 3. Make a plan to manage any withdrawal symptoms including anxiety and trouble sleeping.
- 4. Learn and practice non-drug pain management strategies.
- 5. There may be times when the withdrawal symptoms have been really severe, and you are not ready to take the next step. Formulate a plan with your doctor and pharmacist for when you may need to pause or slow down a taper. It is OK to take a break, but the key point is to try to move forward with the taper after the pause.

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- 6. Remember that the long term goal is improved pain control and quality of life while reducing potential harms of treatment
- 7. Slow Gradual dose reductions of 5 to 10% of the dose every 2-4 weeks with frequent follow-up with your doctor is the preferred method for most people.



## Pain Killers?

- We now know that pain medicines only reduce pain for about 40 percent of people who use them. They appear to become less effective the longer people remain taking them. Side effects of pain medicines can have a major impact on a person's life.
- Side effects such as sedation, fatigue and weight gain can make it harder for people to become more active, something we are confident has a positive effect on pain and well-being. At least 50% of people with pain are overweight and pain medicines can make that harder to change.
- So being a person with pain often involves making changes

## Next steps/ Non drug therapies

Reviews exploring other causes of pain

**Review pain medication** 

Liaising with specialist services and/or referral

Referral for non-pharmacological therapies i.e. physiotherapy

Signposting to self-management resources i.e. Live Well with pain 'Ten steps to living well'

Lifestyle changes such as weight loss, exercise, stop smoking

TENS machine/ acupuncture/ massage/ supports/ ice or heat

Sleep

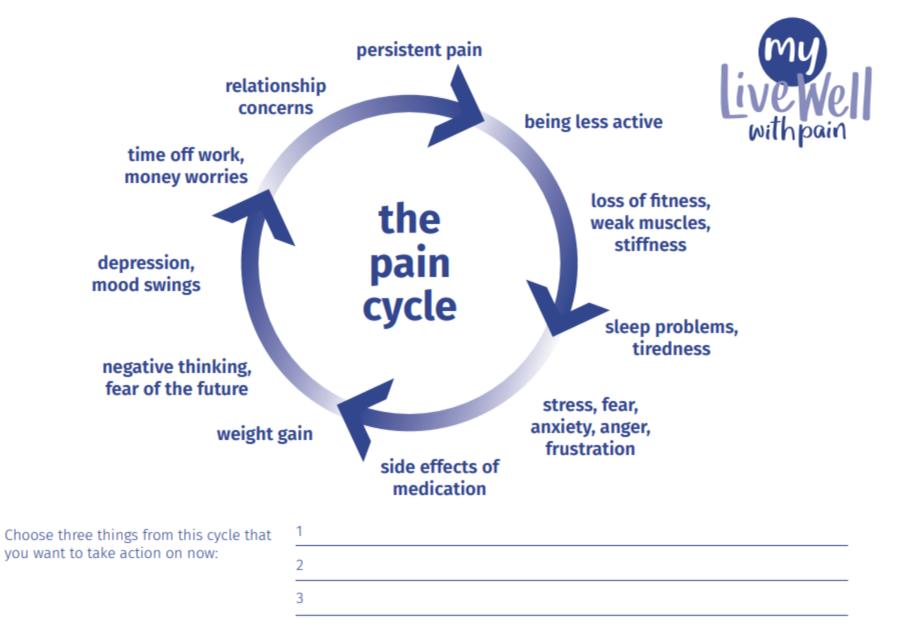
Part 2 including acceptance, mindfulness, communication, managing moods, pacing, set goals

## **Treatment Options for Persistent Pain**

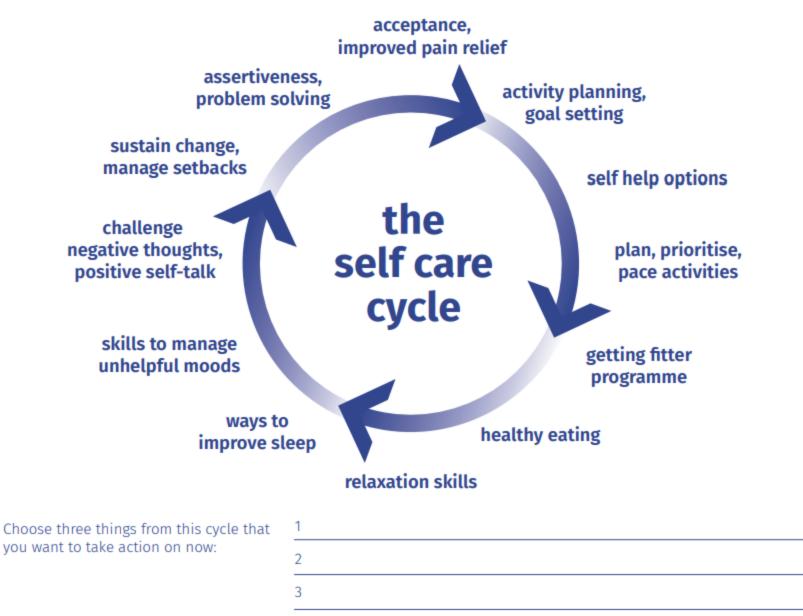
- National guidelines state that pain relief such as opioids should not be used for persistent non-cancer pain as the harm outweighs the benefit.
- In the second half of this presentation, we will share with you the alternative ways to manage your pain.

### Pain Cycle

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### Self-Care Cycle



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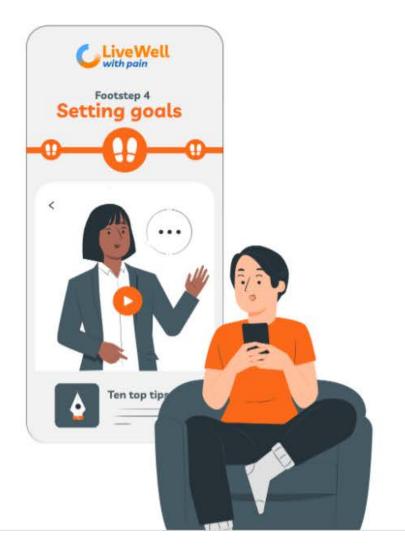
### What is the Ten Footsteps programme?

*Ten Footsteps to Living Well with Pain* is a step-bystep online guide to living well despite your persistent pain.

When people self-manage their pain, their quality of life improves. Eventually it stops dominating their day and they begin to get more out of life.

Knowing how to self-manage your pain is not automatic – but it is something that you can learn.

That's where *Ten Footsteps* comes in. It's designed to help you learn the skills you need to become an effective self-manager of your pain.





Footstep 1 Pain and the brain



Footstep 2 Acceptance





Footstep 5 **Relaxation and** mindfulness



Footstep 6 Sleep



Footstep 7 Communication



Footstep 8 Managing moods



Footstep 9 Medicines and nutrition



Footstep 10 Managing setbacks



Download the booklet!

Download and print this easyto-read summary of all ten footsteps in a handy A4 format.

## **Footstep 1 – pain and the brain**

- Persistent pain is different to the kind of pain you experience when you injure yourself.
- It goes on long after the original damage has healed it's as if the brain can no longer 'turn down the volume'.
- Reducing the pain involves retraining your brain.
- Learning self-management skills so you can live your life despite the pain are the best way to 'turn down the pain'.
- For a deeper dive into this step visit <u>Pain and the brain Live Well</u> with Pain for video and downloadable leaflet content about pain and how it affects your emotions and life.

Footstep 2 - acceptance

- Acceptance is an ongoing journey of change, that takes time.
- People who accept their pain find that it has less impact on their day to day lives.
- Acceptance is not about giving in, but changing your focus towards what you want to do with your life.
- Many people use mindfulness to manage their pain more successfully.
- For a deeper dive into this step visit <u>Acceptance Live Well with</u> <u>Pain</u> where you can watch two videos about acceptance and download a leaflet 'Your journey with pain'.

## Pain and me video (3 minutes)



ີ່ **Footstep 3 - pacing** 

- Pacing is one of the key self-management skills for people living with persistent pain.
- It can help you achieve your goals without increasing your pain.
- There are both helpful and unhelpful styles of pacing overactive, underactive, 'boom and bust'.
- Changing your pacing style could bring many benefits and lessen your pain.
- For a deeper dive into this step visit <u>Pacing Live Well with Pain</u> where you will see links to four helpful tools to help you to pace: leaflet guide to help you avoid the 'boom and bust' cycle', activity diary, effort scale, daily pacing plan.

#### Positive changes reported by people who learnt to pace

#### **Doing more**

They could achieve their goals - and tick more things off their 'to-do' list.

#### **Sleeping better**

They could sleep better at night.

#### More control

They felt they had more control over the pain and their activity levels.

#### Less medication

They depended less on medications and thus experienced fewer unpleasant side effects.

#### **Brighter moods**

Life became more enjoyable - they had more fun.

#### More energy

They felt stronger and more energetic - they had more 'get up and go'.

#### A better social life

With more confidence that their pain was manageable, they could plan for a better social life and do more things with family and friends.

#### Less pain

They found they had less pain and had fewer setbacks. If they did have setbacks, they didn't last as long.

#### Less effort

They felt less effort was required to achieve daily tasks and activities.

## **Footstep 4 – setting goals and getting active**

- Having goals helps you to focus on the things that matter most to you. Developing goal setting skills will increase your ability to achieve your goals.
- Using SMART goals will give you a better idea of how to go about achieving them and you'll be far more likely to get there!
- Writing down your SMART goals and your weekly steps towards them will help keep you on track.
- Don't forget to build in some rewards.
- For a deeper dive into this step visit <u>Setting goals and getting active Live</u> <u>Well with Pain</u> to view and download goal setting resources, my goal ladder, my SMART goals, as well as guidance on ways to be get fitter, be more active and how to manage your sleep better.

## ີ່ **Footstep 5 – Relaxation and mindfulness**

- Mindfulness and relaxation can lessen pain levels, reduce stress and improve concentration.
- Learning relaxation skills can be easier than you expect.
- Mindfulness helps in many ways, such as improving memory or attention so you can concentrate better.
- Read and watch the Living Well with Pain content to discover:
- Mindfulness and how it can help chronic pain
- What relaxation and mindfulness are.
- Ways to relax and practice mindfulness.
- For a deeper dive into this step visit <u>Relaxation and mindfulness Live Well</u> with Pain for links to videos, books and website content.



- Lots of people living with pain have difficulties with sleeping, but research has shown that sleeping well with pain is possible.
- Making some changes to what you do during the day will help you sleep better.
- Regular physical activity will help to improve your sleep.
- Your food and drink choices will have an impact too.
- Getting a regular night-time routine is important.
- Making sure that your bedroom is 'fit for sleep' can make a big difference.
- For a deeper dive into this step visit <u>Sleep Live Well with Pain</u> for downloadable leaflets and links to helpful websites.

#### Why can't I sleep?

It's likely that there are a number of causes of your sleep difficulties. Here are six triggers often found by people living with pain:



## ີ່ **Footstep 7 - communication**

- When life is dominated by pain, the art of everyday conversation can get lost so it's important to avoid some common communication traps.
- Other people can't see the invisible effects of pain. So talk to them about ways they can support your goals to help you to live better with pain.
- Assertiveness is a key skill for talking to other people about your pain.
- Plan what you want from meeting your health care professionals and you'll get more out of it.
- For a deeper dive into this step visit <u>Communication Live Well with Pain</u> to learn about avoiding communication traps, explaining your experience to others and talking to health professionals.

## ີ່ **Footstep 8 - managing moods**

- It is normal to struggle with moods when you have persistent pain.
- People who have learnt to manage their moods find it makes a big difference to their pain and their lives.
- Be kind and compassionate to yourself. Remember it is "not your fault" that your pain refuses to go away.
- There are many ways to lessen the stress or pressure you're under. Discover which ways work best for you and use them often.
- Remember, you are not alone. Don't be afraid to ask friends or family to help.
- For a deeper dive into this step visit <u>Managing moods Live Well with</u> <u>Pain</u> to find out: ways to manage your moods better, five steps to wellbeing, mindfulness and self-compassion, listen to mindfulness audio meditations, self-help leaflets.

## **Footstep 9** - medicines and nutrition

- Pain medicines only reduce pain for a minority of people in the long term.
- Side effects are wide ranging and can have a major impact on your life.
- Reducing your medicines especially opioids can actually lead to a reduction in pain.
- If you want to reduce your medicines always talk to your prescriber first.
- Reduce slowly so your body gets used to the change.
- Healthy eating is also important to how you feel physically and for your mood.
- A healthy balanced diet can also help you to reach a healthy weight.
- For a deeper dive into this step visit <u>Medicines and nutrition Live Well with</u> <u>Pain</u> to learn how and why you can reduce your pain medication, top tips for healthy eating, medicines decision guide, the great opioid side effect lottery, ask yourself six questions, two patient stories about the harms of opioid prescribing.

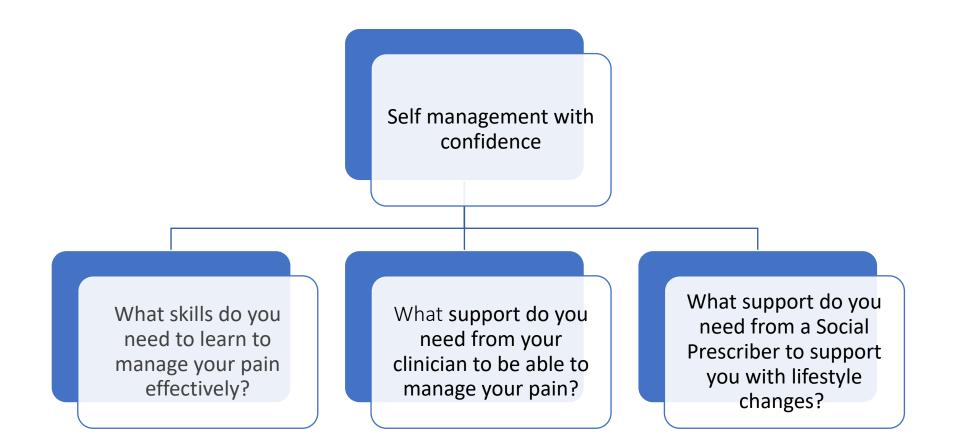
## **Footstep 10** - managing setbacks

- People with pain experience setbacks for many reasons and sometimes for no obvious reason at all.
- Having a setback plan can help you to get back on track sooner.
- Cutting back on activity but still being gently active is the key.
- Using your pacing skills is more important than ever during a setback.
- Remember to be kind to yourself and that "it will pass".
- For a deeper dive into this step visit <u>Managing setbacks Live Well</u> with Pain, read about how to manage setbacks and download the booklet.

### Local non-pharmacological services for Persistent Pain

- Psychological therapy: <u>Newham Talking Therapies counselling and community</u> workshops - living well with a long-term condition and coping with chronic pain workshops.
- **MSK Pain clinic:** Newham Hospital physiotherapy, chronic pain clinic, orthopaedic, rheumatology.
- CGL Newham Rise: can provide advice and support for alcohol and substance misuse including illicit Opioid addiction, but don't provide interventions for people prescribed Opioids.
- Physical Activity and weight management: Xyla 12 week exercise and weight management, Well Newham website activities listing, Osteostrong, Healthwise Exercise on Referral, Specialist Gym.
- **Private services:** Physiotherapy (limited NHS access) Acupuncture (limited NHS access), chiropractor, sports massage, TENS machine.

## Next steps



### **Next Steps**

#### Viewing this webinar is just the beginning of your journey to learning how to live well with pain.

You should also have received the presentation slides. Take time to read these so you can follow up on the points we have introduced.

## There are hyperlinks to the 10 Footsteps to Living Well With Pain content. You will see links to additional resources on the next slide.

We recommend you complete parts 1 and 2 of the <u>Self-Management Navigator Tool</u> in preparation for the actions below:

#### We'd like to offer you support following this webinar.

- You can request a consultation with a Social Prescriber to support you to action the goals and difficulties you have identified that you'd like to work on.
- You may find it helpful to bring your notes from part 2 of the self-management navigator tool to the consultation.
- The Social Prescriber can arrange for you to have a follow up appointment with a clinician if you'd like to review your pain management medication.
- Contact your surgery to request an appointment, this can be face to face or on the phone.

### Additional Resources – please click on the hyperlinks

- Explaining pain leaflet
- <u>Self-Management Navigator Tool Pain Concern</u>
- Resources for people with pain Live Well with Pain
- Ten Footsteps to Living Well with Pain booklet
- <u>12 Practical Pain Self-management Tools Pain Toolkit</u>
- <u>Chronic pain self-help guide | NHS inform</u>
- Breathworks Mindfulness and Compassion Training