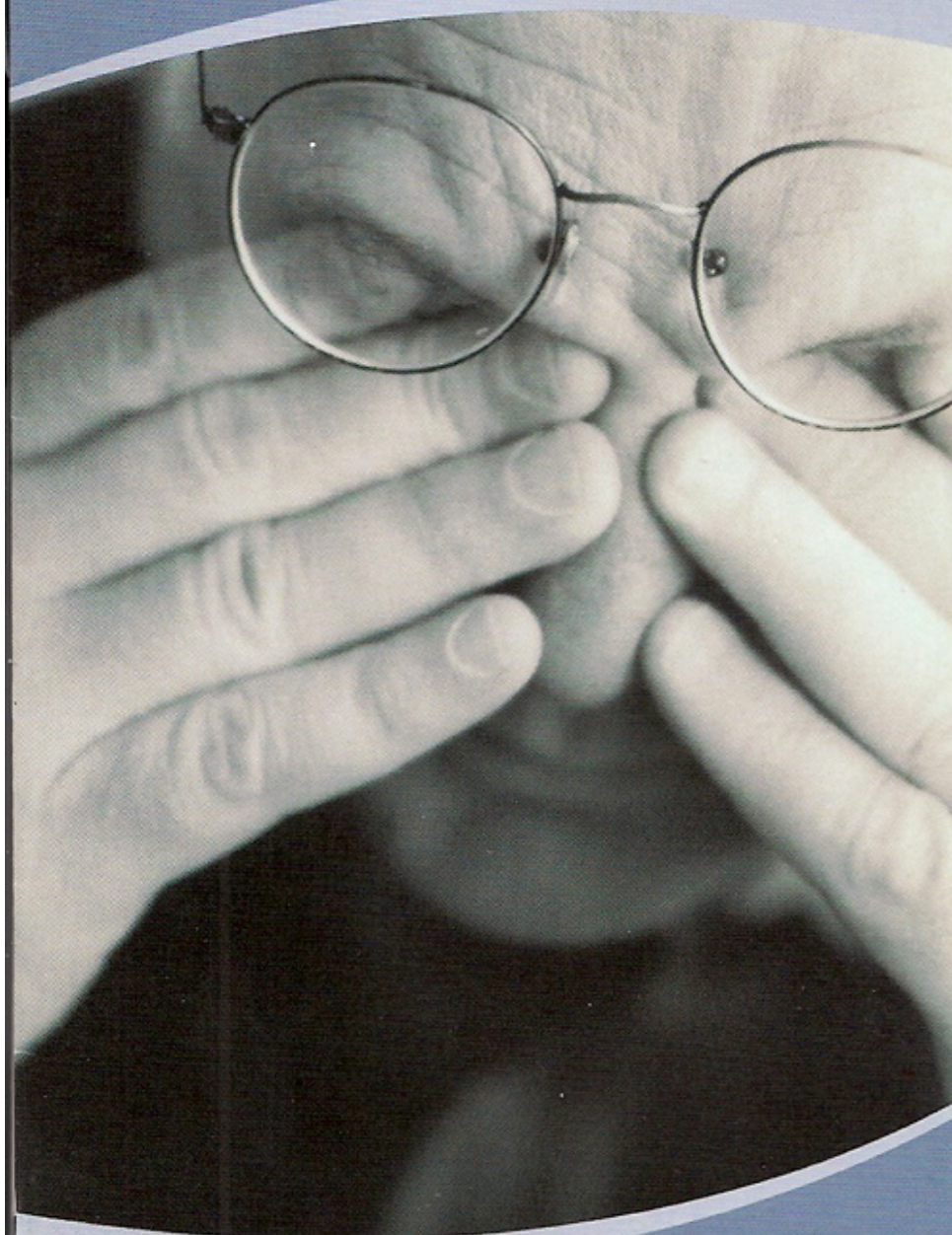


Chronic Pain



**Patient
Education
Center**

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What Is Chronic Pain?

Chronic pain is pretty simple to explain. It's when your body—either one part of it or several different places—hurts and that hurt lasts longer than six months despite efforts to reduce it. Normally, pain is caused by an injury or illness—this is known as acute pain. In acute pain, “ouch” signals from the site of the injury travel along the nerves to the brain. When the brain receives those signals, it sends a message back along the nerves. Our body feels these signals as pain. When the illness is cured or the injury is repaired, “ouch” messages stop traveling along our nervous system, and the pain goes away. In chronic pain, however, those signals don't stop even if the illness or injury is gone. Sometimes pain signals keep coming even when no illness or injury started them in the first place.

As many as 70 million Americans suffer with chronic pain, costing \$100 billion dollars in spending each year for lost wages, medical costs, and worker's compensation. Amazingly, pain has only recently been considered a disease in itself; patients and doctors used to think pain was either a symptom of another disease or a “normal” part of aging.

What Causes ? Chronic Pain

Chronic pain can result from:

- A past injury, such as an accident or fall.
- A past illness or infection, even after the sickness is cured.
- Certain difficult diseases, such as multiple sclerosis and cancer.
- Diseases of the muscle and skeletal systems, such as fibromyalgia and arthritis.
- Illnesses that affect the whole body, such as depression and chronic fatigue syndrome.

There is a specific injury-related pain known as *neuropathic pain*, which results from damage to the nerves. But sometimes pain has no underlying cause or disease—it is the disease. This can be the most difficult kind of chronic pain to treat—pain unrelated to past disease, injury, or any known damage inside or outside the nervous system.



Kinds of Chronic Pain

- *Intermittent pain* occurs in waves or patterns; it is not constant (all the time).
- *Persistent pain* occurs for 12 or more hours every day and is constant.
- *Breakthrough pain* occurs suddenly when you do something that causes more pain or as your pain medication begins to wear off.
- *Pain flares* occur out of nowhere and are very, very intense.

People with chronic pain can have one or all of these kinds of pain in different parts of the body. The most commonly affected areas are the joints, lower back, and head (especially causing headaches).



How Can Chronic Pain Be Treated?

There are many ways to treat chronic pain, but it is not always easy to determine which treatment is best for an individual. Because chronic pain does not always have an obvious source, it can take time before you and your doctor find a solution that really works. Along the way, patients and doctors may get frustrated, especially when it seems nothing is working and the pain continues.

Many doctors start treatment with medication. Sometimes the medication is targeted to the pain; sometimes it is targeted to side effects of the pain, such as depression, anxiety, or problems sleeping.

Medications to Treat Chronic Pain & Its Effects

Specifically for Pain

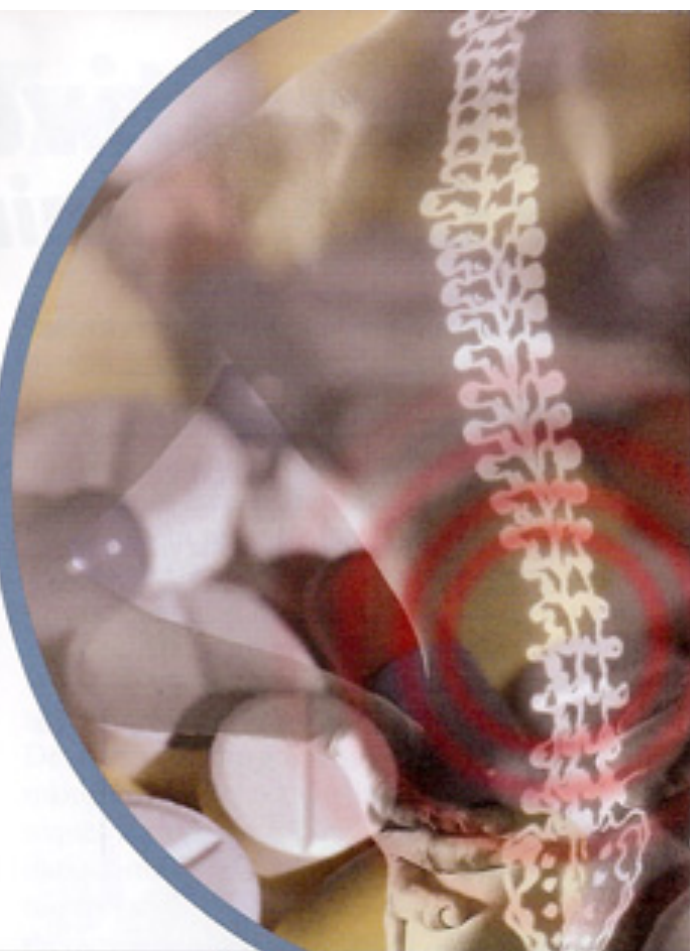
Nonsteroidal anti-inflammatory drugs.

Also called NSAIDs. These include aspirin, ibuprofen, and naproxen, and COX-2 selective inhibitors such as celecoxib, rofecoxib, and valdecoxib.*

Acetaminophen. A very common *analgesic* (pain reliever), such as Tylenol.

Opioids. Analgesics derived from the opium poppy, such as morphine, codeine, oxycodone, and hydrocodone.

Topical agents. Analgesics applied directly to the skin, such as lidocaine or capsaicin preparations.



Other Medications That May Help

Your doctor might also prescribe other medications to take along with standard painkillers:

Anticonvulsant drugs. Often used for neuropathic pain.

Corticosteroids. Often used to treat pain from inflammation.

Antidepressants. Generally used to treat side effects of chronic pain, such as anxiety and sleeplessness. Some tricyclic antidepressants can be effective against neuropathic pain as well.

* Recent research has indicated that COX-2 selective inhibitor drugs may increase the risk of heart problems. Although increased risk does not and will not affect every person who takes these medications, you should discuss risk factors in detail with your doctor before using these medications.

Alternative Treatments for Chronic Pain

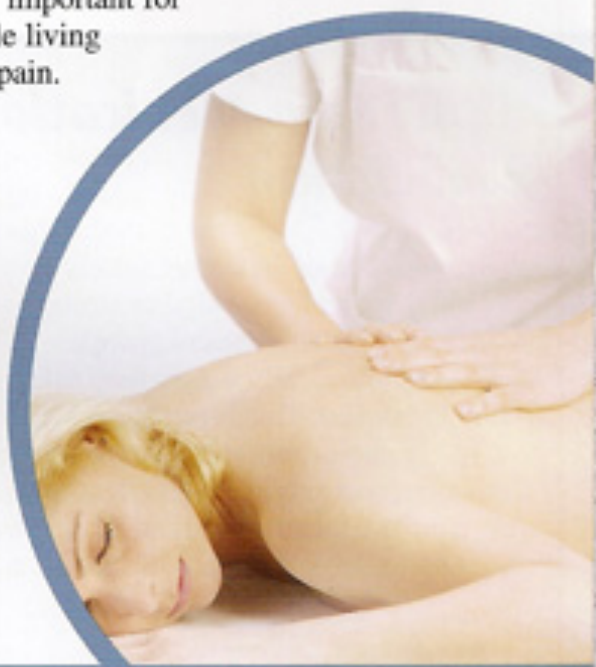
Ask your doctor or pain specialist about these complementary treatments:

Physical therapy. This is especially helpful for people having trouble getting around and doing everyday tasks. Exercise is crucial to treating chronic pain, but because certain motions can cause more pain, people may be afraid to try them. Physical therapists can help teach people how to carefully move to reduce existing pain and not add to their pain. They can also assist in creating a home exercise program to make moving better easier every day.



Biofeedback. This is a way to gather information from your body that doesn't hurt or require any surgery. A health care provider puts sensors on your skin; the sensors measure things like skin temperature, how tense your muscles get, and how your brain reacts. This "bio" (from your body) "feedback" (information) can help your doctor find ways to treat your pain.

Relaxation therapy. Stress can cause muscles to tighten up, which can make pain worse. Dealing with stress is an important part of pain management. Relaxation therapy can help. Techniques include deep breathing exercises, meditation, massage, and even some exercise techniques (such as yoga and tai chi). Relaxation therapy also teaches coping skills important for people living with pain.



Acupuncture. In the last few years, this ancient technique has become widespread in the United States and is used by thousands of trained health care providers for pain relief and prevention. Patients new to the technique might be afraid of the acupuncture needles, but the process itself is not painful and the needles are regulated by the Food and Drug Administration for safety.

Interventional treatments. These medical treatments are administered by a doctor; they involve injections and intrathecal (implanted) devices that deliver medication directly to pain sites. Techniques include

steroid injections, therapeutic blocks, implanted nerve stimulators, and intraspinal drug delivery systems. Ask your doctor for details about these options.

Psychotherapy. Seeing a therapist can be a tough hurdle for people with chronic pain; patients often think it means the doctor doesn't believe their pain is real. Talking to someone about how your pain affects your life is important, however. Therapy can help you come to terms with your pain, your limitations (if any), how to manage your pain, and how to communicate your condition to the people in your life.

Living with pain affects all aspects of your life. It can make you angry, frustrated, and depressed, especially when everyday activities are difficult or you can't do things you love anymore. Personal relationships can suffer. Sometimes support groups are useful for people with chronic pain and their families, especially spouses and significant others.

About Pain Medications & Addiction

People are afraid of addiction, falsely believing that taking any kind of strong painkiller—especially those known as opioids—automatically means they risk becoming hooked. This is not always the case. In fact, according to the American Pain Foundation, "opioids are safe, effective, and rarely lead to addiction" as long as they are prescribed by a health care professional and

taken as directed. Talk to your doctor about all of your pain medications. Ask questions and remember to give honest answers to any questions your doctor has for you. Working together, you and your doctor will find the best way to reduce your pain without putting you at risk for any new problems.

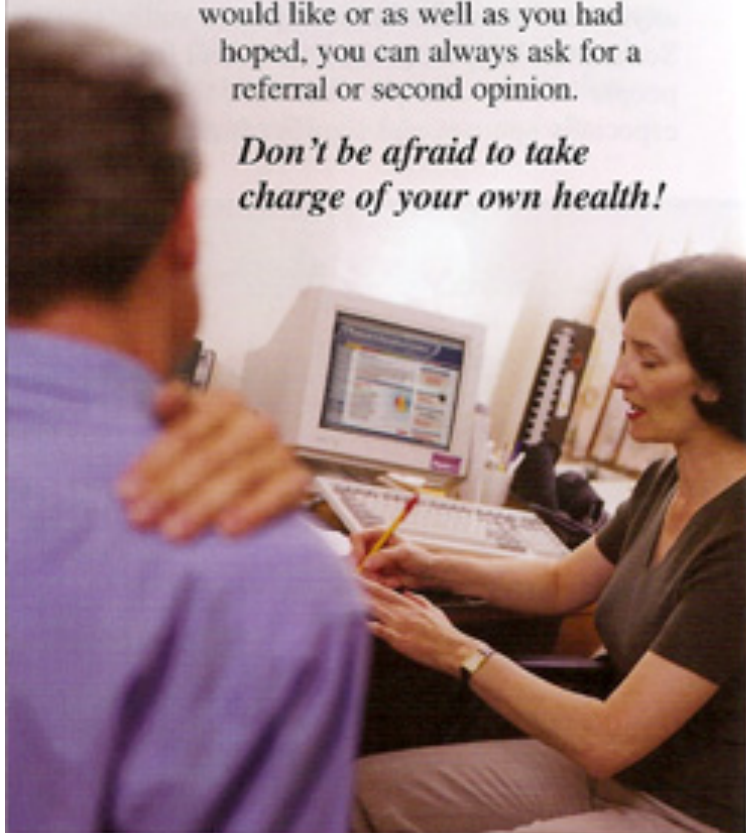


Pain Specialists

A *pain specialist* is like any other kind of medical specialist—he or she has had additional training in a specific area of medicine. If your regular doctor cannot find ways to treat your chronic pain, he or she might refer you to a pain specialist. Your successes and difficulties with previous pain treatments and management techniques will determine when it is time to see a specialist.

It is very important to always be honest with your doctors about your treatments, your continued pain (if any), and how you are dealing with that pain. Remember, if you don't feel your treatment is going as well as you would like or as well as you had hoped, you can always ask for a referral or second opinion.

Don't be afraid to take charge of your own health!



Common Concerns of Chronic Pain Patients

Because chronic pain is considered a relatively new disease, sometimes you might feel you are not getting the help you need. You might not even realize how serious your condition is; often, people fear their doctor will think the pain is *psychosomatic*—all in their head—and will not work to help them with their condition.

People with chronic pain deal with many personal fears, such as worrying about future loss of the ability to move well, how their pain might affect their personal relationships, and how their medications might change their moods or behaviors.

They may also be concerned about medications and how to find the right ones, the ones that work. It can be frustrating; medications may have to be changed a lot if previous prescriptions don't make a difference. Be sure to talk to your doctor about your fears and frustrations.



Pain Care Bill of Rights

As a Person with Pain, You Have The Right to:

- Have your report of pain taken seriously and to be treated with dignity and respect by doctors, nurses, pharmacists, and other health care professionals.
- Have your pain thoroughly assessed and promptly treated.
- Be informed by your health care provider about what may be causing your pain, possible treatments, and the benefits, risks, and costs of each.
- Participate actively in decisions about how to manage your pain.
- Have your pain reassessed regularly and your treatment adjusted if your pain has not been eased.
- Be referred to a pain specialist if your pain persists.
- Get clear and prompt answers to your questions, take time to make decisions, and refuse a particular type of treatment if you choose.

Although not always required by law, these are the rights you should expect for your pain care.

American Pain Foundation

www.painfoundation.org/downloads/Notebook.pdf



For more information on chronic pain, try the following Web sites:



American Pain Foundation

www.painfoundation.org

American Academy of Pain Medicine
www.painmed.org

American Chronic Pain Association
www.theacpa.org

American Pain Society
www.ampainsoc.org



Mayo Clinic Pain Management Center
www.mayoclinic.com/findinformation/diseasesandconditions/index.cfm

National Chronic Pain Society
www.ncps-cpr.org

National Pain Foundation
www.nationalpainfoundation.org



Pain.com
www.pain.com

To Learn More About Chronic Pain ...

Do you have more questions about Chronic Pain, treatments, and healthful living? Go to www.patienteducationcenter.org for more than 20 different entries for chronic pain providing information on:

- Medications • Treatment Options
- Tests • Support Groups ... *and More.*

- > Go to www.patienteducationcenter.org.
- > Click on *Search Health Information*.
- > Enter *Chronic Pain* in the text box.
- > Click on *SEARCH* or hit *ENTER*.
- > Scroll down list of topics; click on topic of choice for more information.

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