



Navigating Pain

Finding the right path for your pain
management journey

New Zealand
pain
society



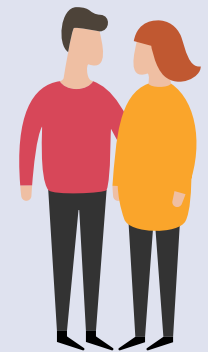
Contents

Welcome	03
Understanding pain	05
Challenges	09
Understanding your situation	11
Movement	15
Sleeping well	19
Helpful thinking	23
Getting support	25
Living your life	29
References	34

Welcome

Living with pain is challenging - making it hard to sleep, work, and enjoy life.

A team of health professionals including physiotherapists, psychologists, nurses, doctors and occupational therapists have put together this booklet to help you understand what you can do to manage your pain.



Most people would agree - being in pain is not fun.

But as unpleasant as it can be, we need to be able to feel pain. Pain is our inbuilt danger alarm system that keeps our body safe. Pain, although unpleasant, is actually pretty helpful.

Acute pain is the name given to short term pain – the kind of pain that gets us out of trouble. The pain of standing on a nail, tonsillitis or a broken arm. Because it is unpleasant, this type of pain encourages us to protect ourselves while our bodies heal.

But sometimes our danger alarm system can become too sensitive. Pain can stick around long after the body has healed, or even when there was very little damage. This type of ongoing pain is called **chronic or persistent pain**. This type of pain is much less helpful, and in fact may be the main problem itself.

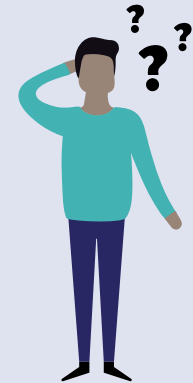
One in five New Zealanders live with persistent pain such as osteoarthritis, headache or low back pain. Living with any type of pain, especially persistent pain, can be full of ups and downs.

This booklet will explain some of the things that have been shown to help people living with pain. It has been written by health professionals who work with people with persistent pain. It contains the key things health professionals suggest trying when you have persistent pain of any type, no matter how long it has been around for. We hope it will help point you in the right direction to better enjoy your life.

You are the only person who can ever feel what it is like to live with your pain. Therefore, you are the best person to manage your pain. Depending on your situation, some of these ideas may be right for you. Talk to your GP or other healthcare professional about whether it is worth giving them a try.

Understanding pain

We often don't think about how our body works, until something goes wrong with it. However, we know that understanding the way the body is wired (the neurobiology of pain) can help people to have less pain and do more.^{1,2,3,4}



Understanding pain

Thinking about a car alarm is a good way to understand pain.

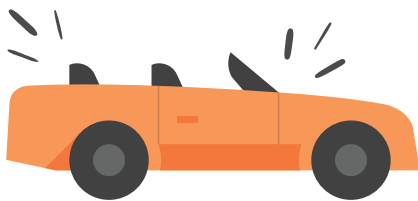
Imagine you are walking along the street and suddenly the **alarm** goes off on a car parked across the street.

Chances are the alarm will get your attention and you will look across the road to see what is going on.

Pain does the same thing: it gets our attention and makes us check out what is happening in our body. In this way, pain is our own inbuilt alarm system designed to get us out of trouble and keep us safe.¹

How you respond to the car alarm will depend on several things. For example, whether the car is yours, what else you can see at the time

Thinking about a car alarm is a good way to understand pain.



and how other people on the street are reacting to the alarm. Your brain will weigh up all this extra information very quickly and without you being aware of it. You will make a quick decision on how you should react. Should you rush over to the car to help or should you ignore it and keep walking?

If you can see someone running away from the car, or if the car window is smashed, then you will probably conclude that there has been a **break in**. The alarm is telling you something dangerous has happened to the car. In this situation, you might chase the car thief down the road, or you might wait around to give the police a report.

- › If you have a pain in your foot and you look down to see a nail sticking out of it, it is likely you will behave differently than if you see a scratch from a twig. In this way, our brain uses more than just the sensations coming from the foot to answer the question “how dangerous is this really?”⁵

If you look at the car and nothing seems out of place, you might decide that this was a **false alarm**. Something that is not dangerous has triggered the alarm, perhaps a bird landing on the car or the wind blowing past. In this situation, the issue is more with the alarm than the car itself. The alarm can be ringing when the car itself is fine. It’s a faulty or overly protective alarm. In this situation, you might just ignore the alarm and keep walking.

- › When pain sticks around for a long time there are certain changes within the nervous system that can make our alarm system more sensitive. It is like the volume knob has been turned up. Our alarm system gets more sensitive and easier to trigger.
- › Things that normally wouldn’t set off our danger alarms can. In some types of persistent pain this can even be as simple as clothes touching the skin. Even just thinking about a particular movement can trigger a sensitive alarm system.
- › This process is called sensitisation and is one of the main things that contributes to persistent pain. It is as if your danger alarm system has become too good at protecting you.



There are certain changes within the nervous system that can make our alarm systems more sensitive.

Understanding these facts is important. It can explain why pain can behave in strange ways. Persistent pain has less to do with what is going on in your body at the time, and more to do with the sensitivity of the nervous system.⁶

Understanding this can also help to guide you to what you might need to do about your pain.

Key points:

1. Pain is our own inbuilt danger alarm system designed to get us out of trouble.
2. Like a faulty car alarm, our danger alarm system can become too sensitive.
3. Understanding your danger alarm system can help you decide what approach you take to dealing with your pain.

Challenges

Acute pain is usually fairly straightforward to diagnose and manage. If you have acute pain, follow the recommendations of your health team, which may include rest or investigations.

Unfortunately, for many people with persistent pain it is much more difficult to identify exactly why the pain is there. This is one of the reasons living with persistent pain is challenging. If you have persistent pain, rest and investigations are likely to be unhelpful.



It can be very frustrating when repeated visits to health professionals don't give clear answers, and the pain doesn't go away. Some people describe a feeling of hope every time they see a new specialist, or have a new test. They wonder if this time there will be an explanation for the pain and a treatment that works. If there isn't, then frustration can increase. Some people even get different explanations from different health professionals.

All of this can leave people feeling confused and fearful about what is happening.

Missing out on the good things

When we have acute pain, we are often advised to rest until the problem is fixed and the pain gets better. When pain persists, resting and waiting for the pain to get better can start to get in the way of life. You may have to cut down on physical activities, and some people stop working or doing what they would usually do during the day.

Being sore can make us irritable and down. This may mean that we are not as fun to be around as we normally would be. Our friends, family and workmates may not want to spend time with us. Sometimes

we might say 'no' when asked to do things we used to enjoy because it is too hard, we might be too tired the next day, or we just don't know if we will have the energy. If we cut down or stop working we have less money coming in and this can create extra strain. All this adds up until life is less enjoyable than before.

Understandably, this means people with pain often also feel sad, frustrated and angry.

Feeling stuck

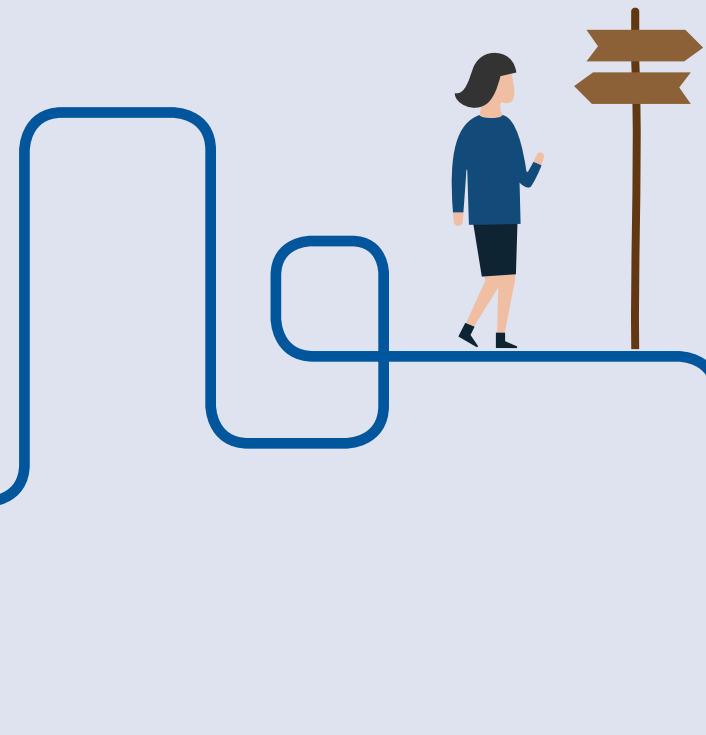
All of these difficulties start to add up over time - pain, having less fun, endless trips to health professionals - leaving people feeling out of control.

It is normal to worry about pain and wonder "what is wrong with me?", "will I ever get better?" or "what if it gets worse?". Sometimes people find themselves stuck on those questions. People also describe anticipating what might cause pain and starting to avoid doing things, just in case.

It makes sense that people with persistent pain have more anxiety and depression. Life with pain is harder and not so enjoyable. However there is hope.

Understanding your situation

Understanding how pain works can help you understand your own pain. There are three other important things that may also help you make sense of your situation.



1: Pain is personal

Pain is defined as:

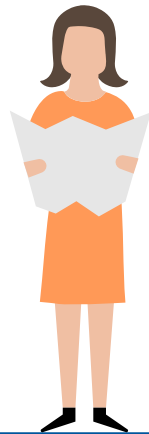
“An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage.”

As it is an experience, pain can be a tricky thing to measure and make sense of. We don't have a pain thermometer and you can't see pain on scans like x-rays or MRIs. Each person experiences pain slightly differently. What feels like a deep, dull pain to me might feel more aching or burning to you. Pain can also be difficult to treat. What works for one person, might not be helpful for another. It can take time to figure out what works for you.

Investigations and tests, such as scans can be helpful to rule out any 'issues in the tissues'. Often though, scans and tests will appear 'normal' to your doctor, even though you are in pain. This is because you can't see a sensitive

nervous system on a scan. Having lots of tests that don't show the problem can be frustrating, instead of reassuring. It can leave you feeling lost and confused.

Scans and tests are most useful as a way of checking that it is safe for you to be more active. It is important to talk with your doctor about exactly what any changes seen on scans might mean. It is important to know that many people who do not have pain have changes on scans too. These are often normal findings that aren't necessarily a problem.



Because pain is complex, it can take time to figure out what exactly is going on for you.

2: Pain is complex

Pain is more complex than just what is going on in the tissues.

Pain involves all the body's systems: our emotions, our thoughts and even our immune system gets involved to help get us out of trouble. Because of this, pain can affect every area of life – from work to family, to general health. The complexity of this can make pain feel overwhelming – everything can seem to be packing up! You may get more tired, be irritable, be more susceptible to colds and flu or have funny things happening with other areas of your health.

There are no 'magic fix' treatments for persistent pain.

There are some medications that are used to manage persistent pain. Often these are medications that were originally developed for treating other conditions (such as depression or epilepsy). These medications can be somewhat helpful in some situations, but medication is usually less effective for persistent pain than acute pain, because of the changes in the



There are no 'magic fix' treatments for persistent pain.

nervous system. In fact, some pain medications can have downsides in persistent pain and can make the situation worse. Medication can be helpful for some people, some of the time, but in the longer term, good pain management often requires more than just medication.

Because pain is complex, it can take time to figure out what exactly is going on for you. Figuring out exactly what should be in your own personal pain management plan can take time.

You might feel like you have seen every health professional there is. This can make it difficult to feel hopeful. Sometimes it feels like two steps forward, one step back. This is normal, and often part of living with pain. However, there is good news...

3: It is possible to live well with pain

It often isn't possible to completely eliminate pain. But it is possible to live well, even if the pain sticks around. It is possible to do the things you want to be able to do, even if you have to take your pain along with you for the ride.

Just like you would fix a faulty car alarm by resetting the alarm, you can work towards resetting a sensitive pain system. The ideas in this book will show you how.

The point at which this is the right decision for you will depend on your situation. You will need to be confident that it is safe for you to do so. Some of the ideas in this booklet may be useful while you go through this process. Try them and see if they help, even if you are still being checked out.

Once given the 'all clear' the focus can change from fixing the tissues, to living well with pain.

Key points:

1. Pain is personal, and so is management – there is unlikely to be a magic fix out there.
2. Pain is complex – putting together a pain management plan can take time.
3. It is possible to live well with pain.

Movement

When we are in pain we often stop moving as much or we start to move in very different ways. This is a protective response and is useful for acute pain. It helps look after the injured area while it heals. But after a while a lack of movement or unusual ways of moving, can start to cause more pain. Getting moving is an important part of a pain management plan.



Movement

Humans are designed to move. In fact, we are actually very good at it. We may not be the fastest or strongest in the animal kingdom, but we are pretty clever when it comes to moving. We can run, jump, dance, backflip, skateboard, windsurf and walk a tightrope. We are the Swiss army knives of movement!⁸

When we stop doing things because they hurt we lose fitness. Activities we did easily every day, suddenly become something we haven't done in weeks. Everything gets harder, especially exercise. Even everyday tasks such as carrying the washing basket or climbing a flight of stairs can become a challenge. When we start doing these things again our muscles will complain, just as they do at the start of a sports season or when we begin a training programme. This is normal and doesn't mean there is damage to our body, but it can be worrisome.

When we have pain, we often change not only how much we move, but how we move as well. Instead of easily bending over to pick something up without thinking about it, we might have



to hold onto something and squat down to reach it. This can be helpful when our back is 'newly sore' but over time we can get stuck in these unusual movement patterns. We may no longer have the movement freedom we were designed to have.

We can also develop a fear of some movements, especially if these have hurt us in the past. We might stop doing things 'just in case' it hurts. Because we are afraid of the pain, or damage it might cause, we may never test this movement out again, 'just in case'. This can greatly limit what we are able to do.

A plan to keep you active and moving is one of the most important parts of a pain management plan.

Physical activity has many other health benefits - if exercise came in a pill format everyone would be taking it!⁹

Physical activity:

- › Keeps muscles strong and joints moving.
- › Keeps our heart and lungs healthy and protects against chronic diseases such as diabetes and heart disease.
- › Gets us out and about so we spend more time with other people.
- › Can help settle a sensitive nervous system by releasing 'feel good' hormones (called endorphins) which also boost mood.
- › Improves sleep.
- › Keeps us fit enough to do the things we want to be able to do.

Physical activity isn't only "huffy and puffy" exercise such as going out for a run, or going to an exercise class. It can be as simple as finding ways of moving more and sitting less during the day.⁹ Most activities people love and enjoy involve some physical activity. For example, golf, gardening or playing with the grandchildren all require you to be physically active. All of these activities count towards your daily activity, just like going to the gym does.

General guidelines suggest aiming for at least 30 minutes of moderate physical activity on most days of the week.¹⁰ These 30 minutes don't have to be

completed all in one block to get the benefits. Short, physical activity 'snacks' of 10 minutes repeated during the day also count.

If you have had pain for a while you may need to take time building your activity levels up. Adding more movement should help you feel better and be more motivated to move more. It will get easier with time.

It is important you feel safe when you start being more active. If you need help developing a plan, your pain management team can help. Physiotherapists and occupational therapists are specially trained to help with physical activity and exercise.

The following tips might also help you get started:

- › **Understanding pain** (see page 05). Understanding how a sensitive alarm system might be contributing to pain with movement, even when the movement is safe for you, can help.
- › **Understanding your situation** (see page 11). Being sure it is safe for you to become more active will help to increase your confidence, especially in the early stages of getting more active again.
- › **Pacing** (see page 30). Starting with what you can manage now without difficulty, and slowly building on this can be an effective strategy.
- › **Choose something you really enjoy**. There is no one right type of activity for pain management, the most important thing is that it is enjoyable.

Key points:

1. Pain can make being physically active more difficult.
2. Physical activity and exercise are an important part of a good pain management plan.
3. Understanding pain and using the tools in this resource can help you become more active again.

The best type of activity is the type that gets done!



Sleeping well

Everything feels better after a good night's sleep. Sadly though, for many people with pain, good sleep can be tricky to get.



Sleeping well

Studies show that the majority of people with persistent pain also have trouble sleeping well. Improving sleep is a critical step for improving persistent pain.

Quality sleep is important for general wellbeing. While we sleep, our brain is very busy storing memories and doing repair work that prepares us for the day ahead. It is a myth that we need less sleep as we get older. The average adult needs around eight hours sleep per night to function at their best.

When you are in pain it can be difficult to get comfortable, fall asleep and stay asleep. Sometimes pain seems to be worse at night, perhaps because there is nothing else occupying your attention. It is normal to wake during the night. Most people are able to roll over and go straight back to sleep. But if you have pain, and maybe a lot of worries on your mind, it can be difficult to get back to sleep when you wake. People with pain may not sleep as deeply and may therefore miss out on the deeper, more refreshing stages of sleep.

Studies show that a poor night's sleep can make you more sensitive to pain. This can mean that on top of being tired, you also have to deal with an increase in pain the next day. This can make you feel both tired and irritable, and may make you feel you need to have a nap during the day. You then may have trouble getting to sleep that night. Having to sleep during the day to keep on top of pain and fatigue may interfere with other things that you need to do.

This can be a vicious cycle: poor sleep leading to more pain, which leads to disturbed sleep which results in more pain.

There are many different ways to approach the issue of sleep. If you need help developing a plan your pain management team can help. Psychologists and occupational therapists are trained to help with sleep skills.

Changing sleep patterns takes time. Sleep is a habit, so you may need to stick with any changes for a while. When you have succeeded in making changes, you may find your

sleep gets worse again if you are busy or stressed. You can take the same steps to improve it again.

Often developing an effective sleep plan will require using more than one approach. Here are some ways to improve sleep.

CBT and ACT (see page 23 'Helpful Thinking')

Changing negative thoughts about sleep is important – if you expect to not be able to sleep you will probably be right! Thinking therapies, such as Cognitive Behavioural Therapy (CBT) and Acceptance and Commitment Therapy (ACT) can help change thinking around sleep, which can be very helpful. These therapies can also help reduce stress which may mean you have less on your mind to keep you up if you do wake in the small hours.



Exercise and activity (see page 15 'Movement')

Being active during the day helps to physically tire you out, promoting a good night sleep. Physical activity also helps regulate hormones that help you fall asleep at night and wake you up in the morning. Getting in some form of physical activity each day is an important step to managing sleep. Being physically active in the morning is particularly helpful.

Relaxation skills (see page 23 'Helpful Thinking')

In order to sleep we need to switch from our active 'fight or flight' state over into our relaxed 'rest and digest' state. Establishing a bedtime routine, such as taking a warm shower or spending some time winding down at the end of the day using a relaxation technique can help us to move from a busy day into sleep mode. Alternatively, using techniques such as breathing or meditation regularly during the day can mean we get to the evening having had less of an overwhelming 'crazy' day, which makes it easier to wind down when it is time to head to bed.

Sleep Hygiene/Education

Learning the 'do's and don'ts' of sleep, also called 'sleep hygiene' can be helpful. For example, it is recommended that you:

- › Keep your bedroom just for sleep. Do not work, watch TV or surf the web.
- › Establish a regular bed time and wake time.
- › Limit naps during the day. If you do have to nap try to keep it to less than an hour.
- › Don't stay in bed if you have not fallen asleep within 30 minutes at night. Get up, do something quiet and relaxing until you feel sleepy again and then go back to bed again.

There are many good websites that discuss tips for good sleep. Trying these tips and tricks out can be helpful.

Medication for sleep

Medication alone is unlikely to be a long-term solution to poor sleep associated with pain. However, some pain medications can also help with sleep, and may be an option to add to the tips and techniques above. The timing of when during the day you take your pain medications can also make a difference. Talk to your healthcare professional if you have concerns about medication and sleep.

Key points:

1. Persistent pain and difficulty sleeping go hand in hand.
2. Good 'sleep hygiene', relaxation skills and exercise can help improve sleep.

Helpful thinking

The thoughts and beliefs we have about pain have a very real impact on the body. Understanding our thinking is a very powerful pain management tool.



Helpful thinking

We think all the time. Thoughts help us understand the world, solve problems and communicate with others. Our thoughts trigger feelings and our body reacts to what we are thinking. For example - when we think about going to a job interview, we feel nervous and our heart rate goes up. When we think about patting a pet, we feel affection and our body calms down. In this way, our thoughts have a very real impact on our body. Changing how we think can change our pain.

There are several approaches to understanding our thinking that are worth investigating.

Talking Therapies

Cognitive Behaviour Therapy (CBT), and Acceptance and Commitment Therapy (ACT) are two approaches that people often find helpful in managing pain. These techniques offer a range of skills to help improve life with pain. You can learn more about CBT and ACT via web-based programmes, or by working one-on-one with a psychologist who specialises in pain management.

Mindfulness

Mindfulness is another thinking approach that can be helpful for pain. Mindfulness is defined as “paying attention in a particular way: on purpose, in the present moment, and non-judgmentally”.¹¹ Mindfulness techniques aim to reduce the unpleasantness of pain. There are many mindfulness websites and there may also be mindfulness groups in your community.

Relaxation

Techniques, such as calm breathing, progressive muscle relaxation or imagery, can help turn off our fight-flight (preparation for danger) system and switch us back into rest mode. Relaxation can also help reduce muscle tension that may result from altered ways of moving. Practicing a relaxation technique that suits you can be a really useful skill to add to your pain management plan. You can download relaxation recordings from the internet.

Getting support

Persistent pain doesn't only affect the person with pain. Pain changes the way we interact with other people and often forces us to change the way we live our lives. In this way, it also impacts on our family, friends and colleagues.



Getting support

One of the challenges of persistent pain is losing connections with others. This is because it is often the fun things that we cut out of our life first. Think about where your connections to others occur. Are you still doing the things you love and seeing the people who are important to you?

Learning to live well with pain means involving the people close to you in making positive changes. Surrounding yourself with layers of support works better than relying on just one or two people. Getting support from loved ones will make it much more likely that you succeed in managing your pain well.

Your family, and other people close to you, may find it helpful to read this information booklet. Just as we need to respond differently to persistent pain than acute pain, our family also need to change the way they support us. For example, when we have an injury, such

as a sprained ankle, loved ones often help by taking over jobs and encouraging us to rest while the ankle heals. This approach is usually less helpful when pain persists. A different approach may be needed.

The best way people close to us can be supportive is by helping us identify what matters most and by working with us to find ways to put these things back into our life. It is important that our loved ones know about skills such as relaxation and pacing and that we have ways to communicate how they can help us with our goals. We need family and friends to be our support crew as we work on getting back to living life.

Your support team will be very important during challenging times and they can enjoy your achievements along with you.

Young people and pain

Children and young people are also affected by persistent pain. When children have pain, it is often family members that manage day to day decisions about what activities are safe, how the days are organised, or what medications are due. The strategies described in this book can be adapted to help young people keep doing what is important to them. School is an important part of our lives when we are young. It is also important young people have time with other people their age, and do things that help them feel good. Thinking about pacing and prioritising (see page 30) can help young people stay at school and reduce low mood and worry.

It can also be extremely helpful to involve the school in managing pain. It is difficult for adults to tell other people about their pain, and because pain is invisible, often people don't feel that they are believed. This may be even harder for a young person who needs to

try and teach adults about their pain. The school may have a health service, or it may be the classroom teacher that needs to get involved. Giving the school a copy of this booklet may help. Your GP may be able to support the school to gain the information they need. You can also write down a plan including warning signs when pain gets worse, what helps the pain and who to contact for more help.

As they go through the teenage years it becomes important for young people to begin to talk with health professionals and to feel able to ask questions. During these years, family members can experiment with stepping back and giving the young person confidence that they can manage their own pain.



Dealing with healthcare professionals

Health professionals are also a key part of your support network. Whether it is a specialist pain management team, your GP, or another health professional, it is important to find someone you trust to help you as you figure out how to manage your pain.

To get the most from your time with health professionals, consider writing down questions in advance. It can also help to be clear about what you want to get from your appointment before you arrive. This might be an update to your treatment plan, a physical check when things have changed, or simply reassurance that you are on the right track. Your healthcare team will also enjoy celebrating your success with you and can help remind you how far you have come.

Don't forget that you are the most important person in your pain management team. No one else knows exactly what you are experiencing. It is your priorities that matter. Make sure you are at the centre of the decision making and that your health team understand what is important to you.

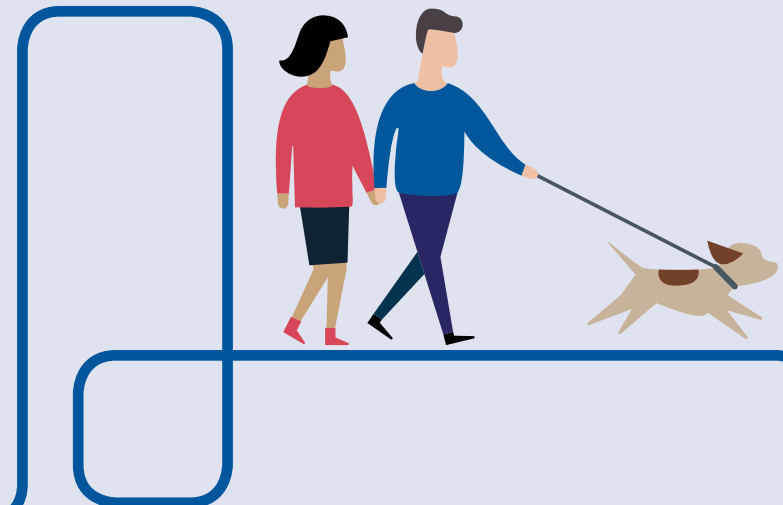
Work with your healthcare team to make sure they understand your priorities so that they can help you work towards a pain management plan that is right for you.

Key points:

1. Learning to live well with pain involves changes for you and also for the people close to you.
2. Loved ones are an important support network to help you get back to living your life, especially if you are a young person with pain.
3. Recruit a healthcare team who understand your priorities and can help you work towards a pain management plan that is right for you.

Living your life

It is possible to live well with pain. This often means actively looking for ways to live a good life, even when the pain is still present.



Living your life

To make the big step toward living well with pain you need to feel confident that returning to doing things won't cause damage. If you don't yet feel confident about this, ask your healthcare provider if it is safe for you to start to do more.

When we have pain, the first things we stop doing are often the fun things, the extras that make our life worthwhile. We may keep going to work, but stop playing sport. We may still do the dishes, but stop doing art. We may make sure the children get off to school, but stop going on family picnics.

Think about what matters to you most. Are you still doing the things that are important for you to enjoy life?

Sometimes to be able to do the things we want in the presence of pain, we need to change the way in which we do things. For example, you may be asked to go out for dinner with friends at a new restaurant in town. You may be tempted to say 'no' because you are often sore and tired at night, you know you will have to park and walk a distance to the restaurant, or because there will

be a big group there and it may be overwhelming. But this means you don't see your friends. If seeing your friends is important, you could think about how to make a social get together less difficult. For example, you might meet for lunch when you are less tired, or you could meet at a friend's house so it is more comfortable and informal. You might suggest a smaller get together so you can start seeing people more gradually.

This approach involves problem solving. It can be easier to work through problems with someone else. Consider asking a family member, a friend, a healthcare professional or a telephone counselling service to talk through how to solve problems to put important things back into your life.

The "four Ps" – **pacing, persistence, passion and praise** – may also help you do the things you want to in the presence of pain.

Pacing

Pacing is the one tool that people often says helps them the most in managing pain. People often talk about taking 'baby steps' to build meaning back into their life. This means taking it slow and doing

things one step, or one chunk at a time. Pacing can also help us regain strength by starting with what our body can manage now without difficulty, and slowly building on this.

When we have pain, there are often good days and bad days.

Or it may be that we feel better in the morning, and really exhausted after dinner. If there is something we really want to get done, sometimes we will work hard to get it done during these good times. But sometimes this is not the best approach.

An example of pacing:

Jane feels very frustrated because the lawns need mowing. She likes to keep the garden tidy and worries about what the neighbours think if the gardening isn't done. In the morning Jane feels a bit better so she rushes out and mows the lawns, pushing to get the whole job done. Afterwards Jane feels really pleased the job is finished, but she is also very sore and for the next few days she can't do much at all.

A few weeks later the lawns are long again and Jane decides to take a different approach. She decides to only mow for 10 minutes and then to have a 10-minute break. Jane also decides to only mow the front lawn. The back lawn can be

mowed on a different day, again, taking breaks and resting between activity.

When Jane takes this approach, she finds she still feels satisfied because she has achieved a tidy lawn and she isn't exhausted, sore and upset afterwards. After mowing the lawns, Jane feels a bit tired, but not so tired that she can't do what she needs to do. She plans to have a quieter day the next day and makes sure she still does some simple activity because she knows this will help her recover.

Pacing is not only helpful for physical tasks, such as mowing the lawn, but also works for increasing social time, concentration, or even doing housework.

Persistence, Passion and Praise

Learning to manage your pain is hard. It can be very frustrating to have to take things slow, and annoying to learn to do things new ways. This is what persistence is all about. Persistence is about keeping going, even when you wonder if this will make a difference. Accepting that managing pain well is often 'two steps forward, one step back' can help.

Passion refers to choosing goals that matter to you. If your physiotherapist suggests you do sit ups, and you don't enjoy sit ups, you probably won't keep doing them. But if you find an exercise that will help you to lift and cuddle your grandchild then you are much more likely to keep going with the exercise, even if it is hard. In the same way, we may be more motivated to be able to stand and hold a fishing rod, than stand to do dishes. Choosing goals that matter to us helps to improve our life and this helps our mood.

Most of us are very good at criticising what we do, but not very good at praising ourselves. Since childhood we are asked to do our best, and we are told off when we get it wrong. Over time, we learn to

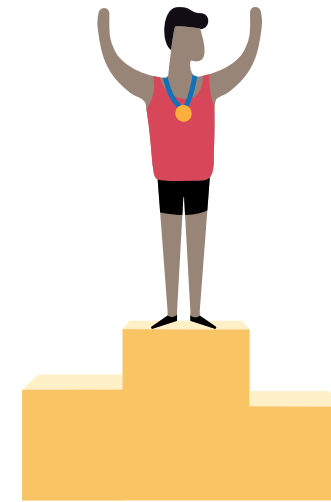
Choosing goals that matter to us also helps to improve our life and this helps our mood.

do this ourselves. This 'inner critic' can be really hard on us when we have pain. We often compare what we are able to do now, with what we could do in the past. Then we feel like our efforts are not good enough. Instead it can be more helpful to compare what we can do today, to what we could do yesterday or last week and praise our efforts to move forward.



Key points:

1. It is possible to live well even when pain is still present.
2. To bring meaning back to your life, think about what is most important to you.
3. The 4 Ps can help:
 - › **Pacing:** taking it slow, spreading the effort or building up with little steps.
 - › **Persistence:** accepting that sometimes managing pain can be 'two steps forward and one step back'.
 - › **Passion:** spending your time and energy on the most important things to you.
 - › **Praise:** being proud of what you do achieve.



It can be helpful to reflect on what you can do today compared with last week, and praise your efforts.

References

- 1 Louw, A., Diener, I., et al. (2011). "The effect of Neuroscience Education on Pain, Disability, and Stress in Chronic Musculoskeletal Pain." *Archives of Physical Medicine and Rehabilitation* 92 (12): 2041-2056.
- 2 Clarke, C. L., Ryan, C. G., et al. (2011). "Pain neurophysiology education for the management of individuals with chronic low back pain: systematic review and meta-analysis." *Manual therapy* 16(6): 544-549.
- 3 Nijs, J., Van Oosterwijck, J., et al. (2011). Pain neurophysiology education improves cognitions, pain thresholds, and movement performance in people with chronic whiplash: A pilot study." *Journal of Rehabilitation Research and Development* 48(8): 1153-1159.
- 4 Meeus, M., Nijs J., et al. (2010). Pain physiology education improves pain beliefs in patients with chronic fatigue syndrome compared with pacing and self-management education: a double-blind randomized controlled trial." *Arch Phys Med Rehabil* 91(8): 1153-1159.
- 5 The Explain Pain Handbook: Protectometer, Moseley and Butler, Noigroup Publications (2015), 48 pages, ISBN: 978-0-9750910-9-8: <http://www.noigroup.com/en/Product/EPEPHPX>
- 6 Hunter Integrated Pain Service Video: https://www.youtube.com/watch?v=C_3phB93rvI
- 7 IASP - Part III: Pain Terms, A Current List with Definitions and Notes on Usage" (pp 209-214) *Classification of Chronic Pain, Second Edition*, IASP Task Force on Taxonomy, edited by H. Merskey and N. Bogduk, IASP Press, Seattle, © 1994.
- 8 Daniel Wolpert: The real reason for brains (TED Talk) <https://youtu.be/7s0CpRfyYp8>
- 9 23 ½ hours Dr Mike Evans (video) <https://youtu.be/aUaInS6HIGo>
- 10 ACSM Position Stand: Quantity and Quality of Exercise for Developing and Maintaining Cardiorespiratory, Musculoskeletal, and Neuromotor Fitness in Apparently Healthy Adults: Guidance for Prescribing Exercise (2011) http://journals.lww.com/acsm-msse/Fulltext/2011/07000/Quantity_and_Quality_of_Exercise_for_Developing.26.aspx
- 11 Kabat-Zinn J. *Wherever you go, there you are: mindfulness meditation in everyday life*. New York: Hyperion; 1994.

Supported by ACC

