

Transcript for On-line Pain Management Information Meeting

1. Welcome

Thank you for accepting this invitation, to view an online Pain Management Information meeting.

2. Aims

In the next 20 minutes, we aim to provide you with sufficient information to assist you in making an informed decision about opting into the Pain Management service. In other words, we aim to empower you to make an informed choice.

3. Pain Management:- Is it for me?

What is pain management and is this the right approach for me. This is a very natural question to ask?

Pain is a very real experience but it is very subjective so it will vary between individuals. A recent epidemiological study suggested that 8 million people in the UK are living with chronic pain and it is starting to be recognised as an important cause of distress and disability, in the general population.

Often people will seek medicines and treatment to take away the pain but a Pain Management approach is more about helping you with the problems of day to day life. We do recognise this approach is not for everyone, it requires time and commitment so it may not be the best time for you, at the moment.

Unfortunately, we know it can take a considerable amount of time to be referred to Pain Management services and it is highly likely that you have already seen doctors and health professionals within various departments.

Q. Spend a few moments, considering who else you have seen

Perhaps Musculoskeletal Teams; Orthopaedics; Rheumatology; Neurology or Neurosurgery; Physiotherapy departments; numerous visits to your GP

The list goes on

Q. Now consider what kind of feelings and emotions have developed with you, over time?

For example, people coming into the service often speak about rising levels of frustration; anger or rage; a sense of disappointment and feeling let down; feelings of despair, lack of self-worth and helplessness which can all contribute to depression.

These are all normal responses when faced with these experiences and the pain management staff will understand as they have worked in this speciality for a number of years.

4. Chronic pain seems invisible to others

One of the phrases we here, over and over again is “people just don’t understand my pain”, it is like.. “my pain is invisible”.

Chronic pain could perhaps be visualised as a massive iceberg, floating in the depths of an ocean. Only the small part above the surface, is visible to others. This may be represented as physical manifestations of your pain, altered posture, use of walking aids and mobility equipment. Perhaps it is also visible in changes of your behaviour, like not going outside anymore or suddenly losing your temper. Emotions may have risen to the surface or are hidden, deep down in the depths.

BUT the impact of living with pain on a daily basis is more than this - there are many facets that are hidden on this iceberg, submerged, deep below the water line. Chronic pain does not seem to fit well within the norms of our society. Have you been faced with the phrase: “Heh, you look all right to me, why are you not working? Why are you not going out any more? Why are you not contributing to family life? Many patients have reported this to us. Perhaps you have been unable to maintain your work role or needed to change working hours, perhaps you have experienced dismissal, unemployment and difficulties claiming benefits. This can all result in the burden of ongoing financial worries. No doubt there have been other changes affecting the roles you play in life, as a parent/grandparent/partner/friend..

The list goes on and on and we know that over time, the level of suffering tends to increase for people.

5. How has chronic pain impacted on your life?

Spend a little time now and later considering: How has chronic pain impacted on your life?

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We asked this question to some people at the start of attending a Pain Management Programme. These are the various points that they told us about.

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Can you relate to any of the points they have raised?

6. Would you be interested...

Would you be interested in changing any of these aspects of your life, as the focus of pain management does not revolve around pain relieving treatments. Instead it encourages you to explore ways you could reduce the distressing impact of living with pain whilst embracing aspects of life you place most value on.

Group participants often describe it as developing their **personal pain management toolkit** and filling it with lots of suggestions and practical tools, to practice and implement into their own lives. It will vary as the pain experience is very individual.

7. What is the difference between Acute and Chronic Pain

We often find that people are confused about why they are still experiencing pain and why treatments do not seem to offer any long-lasting benefit. Often it can be helpful to explore the differences between acute and chronic pain.

8. Key Differences

Acute pain is often easier to understand as it is familiar to most of us. For example, if you placed your hand on a hot plate, you would soon feel pain and quickly withdraw your hand to prevent further damage to the tissues. This is the nervous system operating normally, providing a warning signal to avert further problems. It encourages us to rest and protect the injured part of the body, in the early stages of healing, which lasts for a set time. We will notice that the pain will reduce and function will improve during the recovery period. For example, if you have an operation, you know there will be a certain timeframe but you will see progress and so recovery has a positive outlook.

The experience of chronic pain however, is different. Healing of tissues can take up to 3 months and if it persists, it is termed chronic pain, as it is persisting longer than the healing times of the tissue. This has now become an unhelpful experience as it is unpleasant and can be counterproductive, as too much rest can lead to physical deconditioning. You may be confused what to do for the best but ask yourself, does a little exercise or activity make any real difference to my pain? Overall, the outlook is less positive and as pain persists over time, the distress and suffering you experience, is also likely to increase.

9. Change in management of pain

You will be more familiar with the acute pain focus, as this clearly relates to a more medical focus of trying to find the cause of the pain and fix it. This may involve diagnostic tests and investigations and then interventions to try to remove or reduce the pain. Sometimes however, no direct cause can be identified, which is confusing. Whilst it is reassuring not to have any serious problems that need urgent treatment, it still leaves you trying to cope with the pain and accept that this pain is not going to go away!

10. Chronic pain focus

Managing chronic pain will have to take a different approach, if it is going to have any impact. This change of focus involves looking at the wider impact of pain on your life and will require a larger team of pain specialists. Remember that chronic pain is a very individual experience and so no, "one solution" will suit everyone. It will therefore encourage everyone to build up a range of self-management skills. People often describe it as, building up the tools to place in your personal, self-management toolbox.

11. Your Journey through pain service

Many of you may have been through pain clinic already and have tried some of the options listed, if they were appropriate in your case. It is important that you have an explanation about why your pain is persisting and explore what factors can influence your chronic pain experience. This process will start moving you towards a pain management approach.

12. Diagram around Individual patient

The Key principles of the pain management approach, ensure the patient is placed at the centre, it acknowledges the contributions played by those closest to them and also involves working in partnership with a wider, multi-disciplinary team. This includes patient volunteers who have completed pain management groups and wish to share their experiences of what they have learnt about self-management.

Pain is a very individual experience so pain management has to focus around the individual. In other words, it is **your** pain management journey. The clinical psychologist is best placed to explore this with you at first, as they understand how thoughts, feelings and emotions can impact on our behaviour. It is important to appreciate this role is different to a psychiatrist, who is a medical doctor that specialises in treating and supporting patients with severe mental illness. That is not to say that many of our patients do not experience depression, as this tends to go hand in hand, with chronic pain.

13. Your Journey

Hopefully you can now appreciate that the balance is changing, moving further away from the medical model. Pain management involves every moment of your day so the focus is on empowering you to manage things the best way you can, with ongoing support from the multi-disciplinary team. They will offer wide reaching ideas and suggestions and are working as your guide, as you experiment with making some changes in your life.

14. Evidence based approach

People coming into the service are often curious and want to know, does this approach work? All interventions in the NHS, are evidence-based and this will change and evolve as new evidence comes to light from research studies. There is strong evidence that pain management works and there are clear, national guidelines from the British Pain Society, describing how Pain management groups are run and who is involved. It will be no surprise that the approach is based around psychological models, especially Cognitive Behavioural therapy and Acceptance Commitment therapy. A Biopsychosocial assessment is important in this approach. Yes, we need to understand the biology behind the pain but also how it is impacting on your thinking, mental wellbeing and social roles in life. Partnership working is important and it starts with discussing the best management plan for you.

People coming into the service often experience low mood and anxiety. Some may be very apprehensive being in contact with others but we will support you in this, as there is very strong evidence that a group format is best for pain management and it provides a strong basis for ongoing support.

15. What did others say...

We asked our patient volunteers what they would like to say to you now, as you are considering opting into to the pain management service?

1. There is no quick fix, to getting rid of chronic pain
2. Pain management is a process, it takes time for things to “click” and it involves a journey, learning more about yourself
3. You may be sceptical about this approach others have but the important thing is starting with an open mind. Give it a go, experiment, give yourself the opportunity to try new ideas, find out what works best for you, gain support from others and make new friends.

16. Options available ...

Let’s talk through some of the options that are available within the Pain Management service at Bristol. It will be no surprise, that most of our interventions are group based but there is some availability for individual work, if this is needed and identified at assessment.

Pain Management Programmes have the longest duration and involves a wider team which includes a Physiotherapist, Occupational Therapist, Clinical Psychologist and patient volunteers. So, this programme gives you maximum support for the longest time.

Self-management Programmes are shorter and involve a member of the Pain Management service and a patient volunteer, who has been trained as a tutor. There is no exercise component and it is more suited to people who feel they are self-managing quite well but are looking for more support and ideas.

There are other group possibilities that have a more specific focus. For example, an exercise group; sleep group; Mindfulness group and our Occupational Therapists run Employment workshops on a regular basis, updating us on current Employment law.

17. Options available 2

The Pain Management Programmes runs for 12 weeks. They are held at Gloucester House at Southmead hospital on Wednesday and Monday mornings and Tuesday afternoon at Cossham hospital.

Self-management programmes run for 8 weeks at Southmead and Cosham hospitals and in the Weston area.

All groups are held on a weekly basis and run for 2 and a half hours, with a comfort/refreshment break half way through.

Hopefully you will already have some ideas and you can discuss all the options at your first individual appointment.

18. Choose Physiotherapy option

There is another option available, an individual appointment with one of our physiotherapists, who specialise in supporting people with self-managing their chronic pain. This is for people who feel they are self-managing fairly well and their current needs are more focused around PHYSICAL issues.

Consider the points and see if you feel this is a more suitable choice for you.

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After a detailed assessment, the physiotherapist will then be able to give you some tailored advice and this will be followed with some review appointments.

19. Your Next steps

We will give you some time to think about the information given to you today and to consider, how this relates to you and your present circumstances.

If we do not hear from you, we will understand you have decided this is not the best option for you at the moment but you now have information about what the service can offer.

If you would like to opt-in to the pain management service, you can contact us and request an individual pain management assessment, to discuss the most suitable ongoing plan and talk about the availability of relevant groups. This can be offered via telephone and video conferencing options, at the present time.

Alternatively, you can contact us and request an individual appointment with a Pain specialist Physiotherapist. This can be offered via telephone and video conferencing options, at the present time.

20. Let us know

Let us know your decision within the next 2 weeks

You can contact us by email: painmanagementcentre@nbt.nhs.uk

Or by telephone: 0117 4147357

Or by post: complete the Opt-in Form and return to the address given

21. Primrose's story

Finally, we have provided a link to a video from one of our patient volunteers. Primrose explains what life was like before attending a Pain Management Programme and how she recognised it was important to change her mind set, in order to gain the most from this group opportunity.

We hope you find this useful and look forward to welcoming you soon.