

Orientation to the Chronic Pain Clinic



About the GV Health Chronic Pain Clinic

Our team consists of several different health professionals:

- Medical Specialist
- Clinical Nurse Coordinator
- Physiotherapist
- Psychologist
- Social Worker
- Exercise Physiologists
- Allied Health Assistant
- Enrolled Nurses
- Dietician

More importantly other people involved in your treatment:

- You and your family!



Opioids and Pain

- Although opioids can be an effective treatment component, for many chronic pain patients they are insufficient.
- Patients with chronic non-cancer pain can develop hyperalgesia , tolerance and dependence issues with opioids.
- Studies indicate opioid therapy rarely shows more than 1/3 pain reduction beyond 18 months, therefore opioids are best used as part of a multidimensional approach for chronic pain ([Reid et al., 2002](#)).



GVHealth

The Psychology of Pain



Chronic Pain Traps

- The Medical Intervention Trap
- The Medication Trap
- The Take It Easy Trap
- The Boom Bust Trap

- Resentment/ Frustration/ Helplessness
- Depression and Anxiety
- Rumination and Perseveration
- Excessive magnification of emotions

The Chronic Pain Clinic aims to reduce the SUBJECTIVE experience of pain by improving quality of life and self efficacy in patients



The Impact of Pain and Suffering

*Environmental

Sources of positive reinforcement are reduced, meaning less pleasure and achievement related activities- this promotes **AVOIDANCE**

*Relationships with others

Change in roles and identity, how you are perceived by others, family dynamics, aversive nature may lead to intolerance by others.

*Changes in self

Reduction of self esteem, person may see themselves as useless, self directed attention can become negative- this promotes **HYPERVIGILANCE**



Why do we have pain?

- Avoid danger
- To motivate us to do something different
- To protect us- Protect by pain is an effective system.

If we didn't have pain, we wouldn't survive very long!

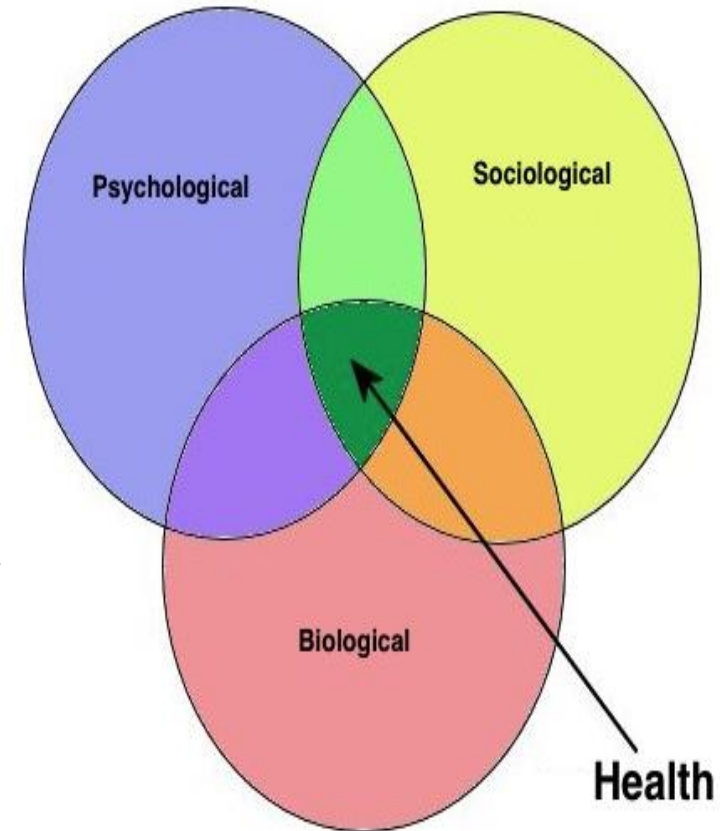
(Hereditary sensory & Autonomic neuropathy)



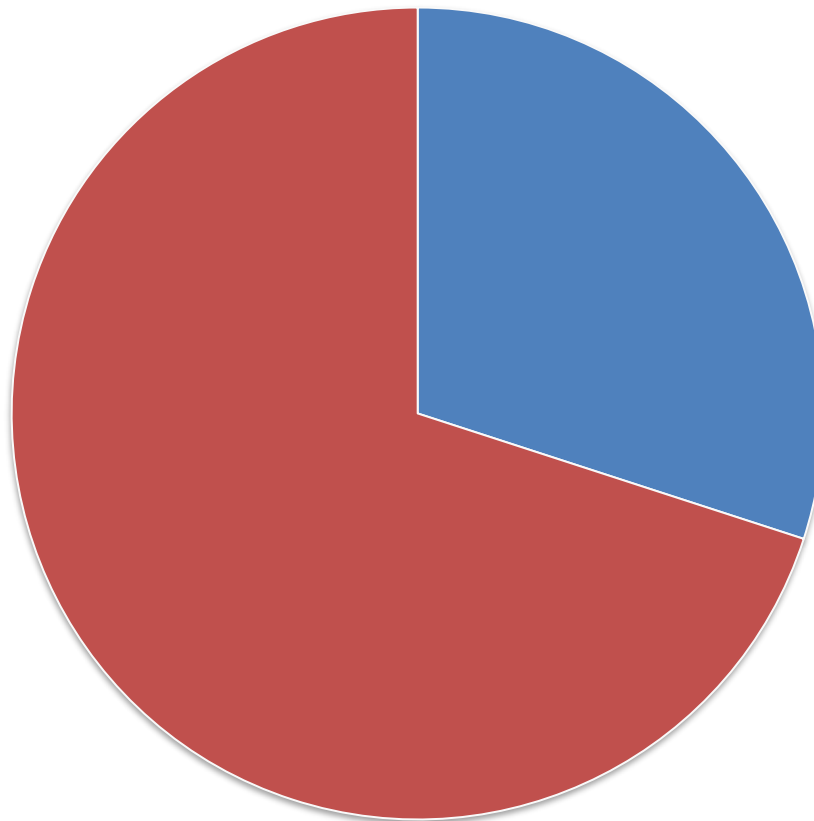
The Whole Person

We take a bio-psycho-social approach to pain management.

- **BIOLOGICALLY:** Physical health, physical function, fitness, energy, etc.
- **PSYCHOLOGICALLY:** Emotions, thoughts, beliefs, habits
- **SOCIALLY:** Home life, relationships and family, work leisure activities, etc.



Pain “management” now...?



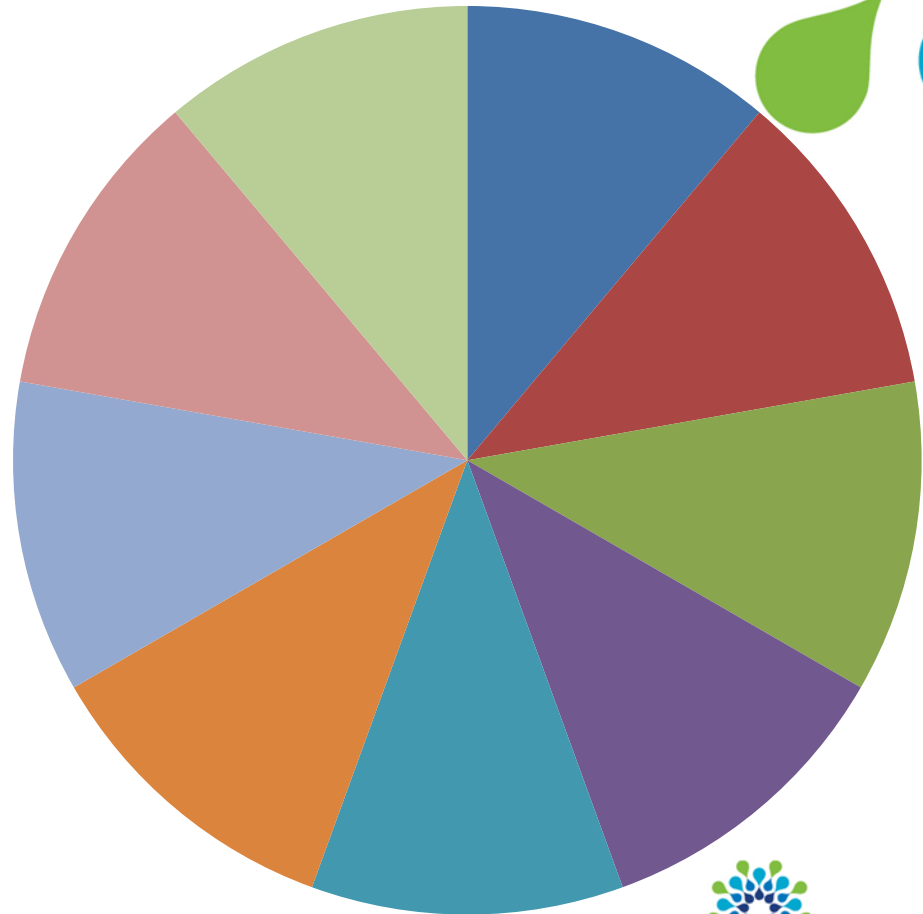
■ medication

■ rest

Persistent Pain Management

Multiple Strategies

- Medication
- Self Management & Health changes
- Body Map- Neuroplasticity
- Sleep Hygiene
- Physical activity & Pacing
- Relaxation & Mindfulness
- Stress Management
- Cognitive Behavioral therapy (CBT)
- Acceptance & Commitment Therapy (ACT)



STEP-UP Program structure

- ❖ GP Referral to Chronic Pain Clinic- GV Health
- ❖ PEP-UP- Introductory Session
- ❖ Multidisciplinary Pain Team Assessments

8 week Therapy Program : 1 day per week

- 45 mins of group exercises (Individual Plan)
- 45 mins of education group (Evidence Based)
- Hydrotherapy 2 supervised sessions
- Tai-Chi 4 week program post Step-up

- Individual Specialist appointments as required



Summary:

1. Although Opioids can be effective a Bio/Psycho/Social approach is more beneficial in non cancer pain management
2. Pain is subjective, it's experienced in the body and produced by the brain
3. Chronic pain is due to changes and sensitisation in the central and peripheral nervous system
4. To find the pathway out of pain, STEP-UP focus on a Holistic approach

QUESTIONS?



Healthy Communities