A Chronic Pain Management Guide

According to the National Institutes of Health, over 100 million adults in the US experience chronic pain. Among them, 40 million experience severe pain and 25 million have daily pain.

Treating chronic pain is complex and requires a multi-pronged approach.

In order to work with your doctor to find the best chronic pain management for your condition, it helps to be able to describe your pain in detail. Just saying ‘it hurts’ is often not enough.

After I developed fibromyalgia, I struggled to communicate my symptoms in a way that I felt my doctors really understood. Keeping a pain diary for a few weeks can help provide more detailed information about your symptoms.

Try using the LOCATES scale to explain your pain to your doctor:

- **L** – Location of the pain and whether it travels to other body parts.
- **O** – Other associated symptoms such as nausea, numbness, or weakness.
- **C** – Character of the pain, whether it’s throbbing, sharp, dull, or burning.
- **A** – Aggravating and alleviating factors. What makes the pain better or worse?
- **T** – Timing of the pain, how long it lasts, is it constant or intermittent?
- **E** – Environment where the pain occurs, for example, while working or at home.
- **S** – Severity of the pain. Use a 0-to-10 pain scale from no pain to worst ever.

Common Medications for Chronic Pain Management

Pain medications can play a crucial role in chronic pain management. Some people with chronic pain report feeling criticized for taking pain medications.

I believe there should be no stigma about needing to take pain-relieving medications as part of an overall pain management program. Science supports the point of view that, when taken as prescribed, medications can significantly reduce pain levels.

I take medications for pain and they definitely improve my ability to function day-to-day.

However, in most cases, there is no ‘magic bullet’ medication that completely relieves pain. Prescription drugs are most effective when they are used in combination with lifestyle changes and other treatments.

Medications can also cause side effects, so deciding what to take and how much is often a trial and error process. When starting a new medication, start low and go slow when it comes to dose increases in order to reduce the
impact of side effects.

Of course, it’s always important to take your medications as prescribed by your healthcare provider.

You can find below different types of pain medications to discuss with your doctor.

**Anti-inflammatories (NSAIDs)**

Include over-the-counter or prescription medication may help reduce inflammation, swelling, pain, and fever.

They are most effective for inflammatory pain caused by conditions like arthritis, autoimmune diseases, endometriosis and some types of low-back pain. They are associated with side effects like stomach or intestinal bleeding and heart attack and stroke – especially if you have heart disease.

**Antidepressants**

Some doctors may even prescribe antidepressants to those suffering from chronic pain and depression. Although antidepressants were originally created to treat depression, these medications are frequently prescribed for chronic pain even when depression is not a factor.

According to the Mayo Clinic, antidepressants seem to work best for neuropathic pain (diabetes, shingles, spinal cord injury), fibromyalgia, migraines, and headaches. They are believed to work by increasing levels of neurotransmitters, like serotonin, in the brain and spinal cord that regulate pain sensations from the body.

There are actually two categories of antidepressants: cyclic antidepressants like amitriptyline and SNRIs (serotonin and norepinephrine reuptake inhibitors) like Cymbalta.

**Anti-seizure Medication**

Including gabapentin and pregabalin, are another class of repurposed medications used to treat chronic pain. The research found that these prescriptions are most effective for neuropathic pain and fibromyalgia because they appear to have nerve-calming qualities.

*Next page: Discover more chronic pain management medications and alternative therapy options.*

**Common Medications for Chronic Pain Management**

**Medical Marijuana**

While one of the more polarizing pain medications, some people report feeling significant relief from this treatment option.

A benchmark study conducted in Canada found that the medical use of cannabis can safely help reduce pain.

Side effects included drowsiness, dizziness, and headache, but patients did not experience any increase in serious side effects. In addition, pain patients who used cannabis saw significant improvements in pain levels, mood, and quality of life compared to the group who didn’t use cannabis.

However, there has been contradictory evidence on the benefit of medical marijuana for different chronic pain conditions. This option should only be used where legal and on the advice of a medical practitioner.

**Opioids**

These medications work by mimicking your body’s natural opioid pain relief system and include tramadol,
morphine, oxycontin, fentanyl, and others, which range in strength.

Opioids are one of the most controversial pain medications. Some argue that over-prescription has led to an addiction epidemic. Others point out that people with chronic pain have taken opioids at a stable dose for many years without abusing them.

Regardless of where you come down on this debate, it’s best to use these drugs in close consultation with your doctor.

**Alternative Therapies for Chronic Pain Management**

If you’re interested in using alternative therapies with the conjunction of pain medications, or not, for chronic pain management, I suggest trying or looking into these therapies that I’ve listed below.

**Manual Therapies**

When it comes to hands-on treatments like massage, physical therapy, and acupuncture, the National Centre for Complementary and Integrative Health notes that “a growing body of evidence suggests that some complementary approaches … may help to manage some painful conditions.”

Finding the right therapist is key to getting the most benefit from your treatment sessions.

For example, I have had healing, therapeutic massages and painful, flare-inducing massages. Through trial and error, I learned that the primary difference was the training and experience of the massage therapist. When you contact a prospective therapist, ask whether they have experience treating clients who have similar chronic pain conditions to yours.

Do not go to a spa or aesthetician for pain treatment.

Always ask a potential therapist if they are a member in good standing of a professional association to ensure that they have a high level of certification and ongoing training.

**Physical Therapy (Physiotherapy)**

Treats chronic pain through evidence-based “strengthening and flexibility exercises, manual therapy, posture awareness, and body mechanics instruction.” Physical therapy helped me overcome my lower back pain, which was one of the most debilitating symptoms of my fibromyalgia.

**Massage Therapy**

Can relieve pain because it increases blood circulation, encourages cell oxygenation and nutrition, relieves muscle tension, and releases natural painkillers like serotonin (Prevention). For example, massage has been found to improve pain levels, sleep, and mood in people living with fibromyalgia.

*Next Page: See how alternative therapies and mind-body medicine for chronic pain management can help.*

**Alternative Therapies for Chronic Pain Management**

**Acupuncture**

Acupuncture is the therapeutic use of skinny, hair-width needles to stimulate specific points on the body to reduce pain or disease and promote well-being. After trying it myself, I have realized that it is a valuable tool in my chronic pain treatment toolbox.
The National Centre for Complementary and Integrative Health explains that “Results from a number of studies suggest acupuncture may help ... types of pain that are often chronic,” including fibromyalgia, headache, low-back pain, neck pain, and osteoarthritis.

**Exercise Therapy**

Put simply, exercise is one of the best treatments for relieving chronic pain. When I got diagnosed with my chronic condition all the information about exercise seemed so out of touch with the reality of my life.

I thought, “If I’m already sore and fatigued then I’m not going to be able to go to the gym!” I knew that I should exercise but I felt like I couldn’t.

If you haven’t been able to move very much, it’s best to start with flexibility or range of motion exercises because “limited flexibility can cause pain, lead to injury, and make muscles work harder and tire more quickly.” This is what I did and it has enabled me to begin moving more despite my pain.

Stretching, yoga, tai chi, and qi gong are all range-of-motion/flexibility exercises. Research is clearly on the side of trying these practices to manage your chronic pain.

For fibromyalgia alone, studies have found that qigong, tai chi, and yoga all reduce pain levels.

I was inspired to begin stretching by a physiotherapist (physical therapist). Every morning, I spend about half an hour stretching every major muscle group. Once I started doing this daily, I began to notice improvements in my physical abilities.

Now I can get up and down comfortably from the floor, easily bend forward, and do more activities without tiring as quickly.

**Aerobic or Endurance Exercise**

Endurance exercise includes walking and aquatic activities, has been found to significantly relieve pain levels in people living with chronic pain.

Aerobic fitness refers to the efficiency of your heart and lungs to send oxygen-rich blood to your muscles (cardiovascular fitness) and the fitness of your muscles to use that oxygen for continuous activity.

Aquatic activity can greatly benefit people living with pain. Exercising in water is low-impact but provides gentle resistance, a win-win for chronic pain sufferers. It’s important to only sign up for low impact classes like “Aqua Arthritis” or “Range of Motion Aquafit”.

Aerobic activity doesn’t need to be intensive to be effective.

One study looked at the impact of increasing “lifestyle physical activity” in patients with fibromyalgia. This included activities like gentle housework, doing short errands, or just walking around a room periodically.

The study found that “Accumulating 30 minutes of Lifestyle Physical Activity throughout the day produces clinically relevant changes in physical function and pain in previously minimally active adults with FM.”

*Next page: Read how mind-body medicine can not only reduce chronic pain but improve mental health.*

**Mind-Body Medicine**

This might sound like a strange term if you haven’t come across it before. Mind-body medicine is the art and science of regulating thoughts and feelings in order to improve mental and physical well-being.
As Hippocrates once wrote, “The natural healing force within each one of us is the greatest force in getting well.’
This is mind-body medicine in a nutshell.”

Mind-body practices not only reduce pain, but are especially effective at improving depression, anxiety, and stress associated with chronic conditions.

**Mindfulness meditation**

“Mindfulness is awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally,” according to Jon Kabat-Zinn, a pioneer of mindfulness in medicine.

The Mindfulness Based Stress Reduction (MBSR) program created by Jon Kabat-Zinn to teach mindfulness to patients has demonstrated remarkable benefits for reducing chronic pain as well as anxiety and depression in fibromyalgia.

You can find an MBSR program in your community, or there is a free version online here.

Alternatively, you can learn meditation using a free app on your phone. Two of my favorites include the Insight Timer and The Meaning of Life Experiment. You can practice mindfulness through meditation, body scans, mindful eating, or mindful movements like yoga or Tai Chi.

**Cognitive Behavioural Therapy**

Studies have found that participating in CBT can help reduce pain, depressive thoughts, and improve quality of life for people with chronic pain. (Holmes et al.) One of the core parts of the program is learning to identify negative thinking traps or ‘cognitive distortions.’

These are thoughts that “sound rational and accurate, but really only serve to keep us feeling bad about ourselves”

CBT programs also focus on helpful behavior changes like learning deep relaxation as well as pacing activities.

**The Bottom Line…**

While there are many different types of chronic pain management techniques, you may find that some may work for you while the others listed above don’t – and that’s okay too!

Living with chronic pain isn’t easy, some days will be good and others not so good, but we must not give up and continue to fight. Keep searching for chronic pain management strategies – whether it’s from other chronic pain warriors or doing research. You will find a chronic pain management technique that will work for you!