

Patient Information

Living with Chronic Pain

veryone experiences pain at times. Often, this pain is short-lived, or acute, and results from an injury or infection. Acute pain is useful in that it alerts us to problems in the body, and it usually disappears within a reasonable amount of time as the body heals.

Sometimes, though, pain continues for months or even years. This long-term pain, known as chronic pain, serves no useful purpose. And the longer it lasts, the more it can interfere with your daily life.

The experience of chronic pain varies from person to person. Some people feel the pain constantly, while others find that it comes and goes. For some, the pain is caused by a known condition (such as arthritis or cancer), while others never learn the exact cause of their pain.

Living with chronic pain can be very frustrating, but your pain doesn't have to rule your life. By taking an active role in the recovery process, working with your health care providers to explore all your options, and seeking support from others, you can take control.

How will my doctor evaluate my pain?

To help determine the best treatment, your doctor will ask you to describe your pain in detail—where it's located, how severe it is, what it feels like (sharp, dull, burning, or aching), how long it lasts, what makes it feel better or worse, and how it affects your daily activities. He or she probably will ask about your medical history and whether you've had any mood changes or sleeping difficulties. If the source of the pain is unclear, your

doctor may try to locate it with tests, such as x-rays or magnetic resonance imaging, better known as MRI. These tests aren't always helpful, though, and your doctor may not recommend them in your case.

What treatments are available?

There are a variety of options for treating chronic pain, including medications and other therapies. In many cases, a combination of treatments works best.

Medications for chronic pain fall into three cateogories: nonopioid (non-oh-peeoyd), opioid (oh-pee-oyd), and adjuvant (ahj-uh-vuhnt) medications. Nonopioid medications include acetaminophen (uhseet-uh-min-uh-fuhn) and nonsteroidal anti-inflammatory (non-stuh-rovd-al antie-in-flam-uh-tor-ee) drugs, or NSAIDs. Acetaminophen often is used for mild pain or along with other medications for more severe pain. NSAIDs reduce swelling, irritation, and pain. Acetaminophen and NSAIDs can be found in both overthe-counter and prescription medications. Because they can cause serious side effects, though, your doctor should instruct you on their proper use.

Opioids, which are available only by prescription in the United States, are effective against more severe pain. Some people worry that they will become addicted to opioids, but this is very unlikely to happen as long as you take your medication as directed by your doctor. It's true that your opioid dosage might become less effective over time, but your doctor can adjust the dosage or switch your medication. It's also true that stopping opioids suddenly



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can cause "withdrawal" symptoms, such as stomach cramps and sweating. These physical reactions are normal, though, and do not signal addiction.

Adjuvant medications are drugs that were developed for treating other problems but also can relieve certain types of chronic pain. For example, some medications used for depression can reduce pain through their effects on brain chemicals, and others used to treat seizures can reduce the pain caused by damaged nerves.

Other therapies for chronic pain include nerve blocks, electrical stimulation, and physical therapy. Nerve blocks involve the injection of a local anesthetic (an-usthet-ihk)—a drug that causes a temporary loss of feeling in a limited area of the body-through a needle into muscles or areas around nerve roots that are causing pain. Electrical stimulation uses mild electricity to block pain signals from reaching the brain. It can be delivered to nerves through electrodes that are placed on the skin or directly to the spinal cord through a surgically implanted device. If you are referred to a physical therapist, he or she may provide both "passive" treatments, such as applying heat or ice packs to painful areas of your body, and "active" treatments, such as stretching and strengthening exercises.

Surgery can help reduce certain types of chronic pain. Surgical procedures used for chronic pain include removal of a damaged disk (a pad that cushions the bones of the spine), separation of blood vessels from surrounding nerves, and destruction of nerves that transmit pain signals.

Some people find relief from complementary and alternative therapies, such as acupuncture, mind-body therapies (including meditation, biofeedback, and hypnosis), chiropractic treatments, massage, and herbal or nutritional supplements. It's best to talk to your doctor before beginning any new therapy, though. Also, be aware that herbal products, like other medications, can cause side effects.

What can I do to cope?

Even if your treatments don't relieve your pain completely, you can take additional steps to improve your quality of life. Try to stay healthy by eating a nutritious diet, getting plenty of sleep, and engaging regularly in light or moderate exercise. Since stress can worsen pain, keep your stress levels low with relaxation techniques. If you're struggling with anger, depression, or other negative emotions, a counselor or psychologist may be able to help you adjust your thought and behavioral patterns to improve your sense of well-being.

People often feel isolated by their chronic pain. Communicating with your loved ones, getting them involved in your pain management, and talking to others with chronic pain can ease this sense of isolation. To learn more about chronic pain and to access online discussion groups, visit the American Pain Foundation web site (www.painfoundation.org). The American Chronic Pain Association web site (www.theacpa.org) also contains helpful resources, including a "Medications and Chronic Pain Supplement" that is updated annually.



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