

PATIENT INFORMATION ON PAIN MANAGEMENT



MANAGING PAIN: A COMPLETE GUIDE

Pain can affect every aspect of your life but understanding it and taking a structured approach can help you regain control. This leaflet provides an overview of pain types, treatments, and lifestyle strategies.

What Is Pain?

Pain is a signal from your nervous system alerting you to potential problems.

- **Acute Pain:** Temporary, caused by injury or surgery, and often resolves with treatment.
- **Chronic Pain:** Lasting over three months, often due to ongoing conditions, and may not respond fully to medication.

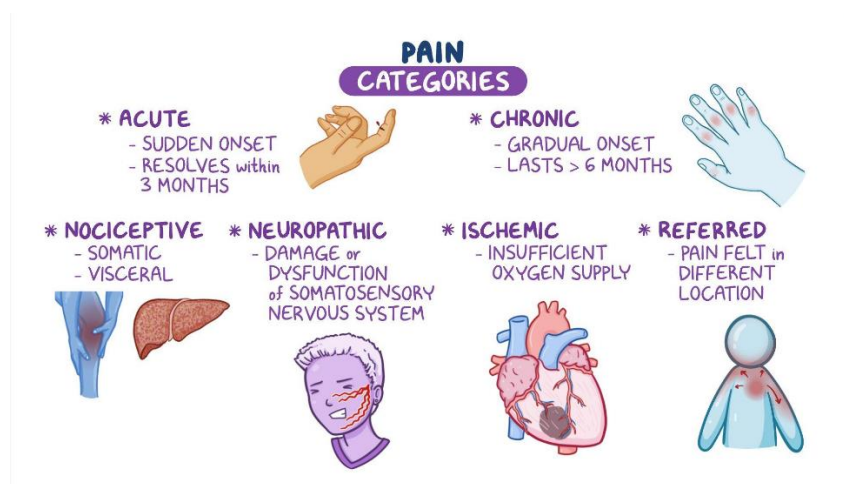
	VS	
Acute Pain		Chronic Pain
<ul style="list-style-type: none">• Begins suddenly• Feels sharp, severe, or intense• Caused by something specific (illness, injury)• Warns us that something is wrong• Lasts less than 3 months• Treatment might include bandage, cast, surgery, physical therapy		<ul style="list-style-type: none">• May be constant or intermittent• Varies in intensity• A condition independent of a specific illness or injury• Not connected to any perceived threat or danger• Lasts more than 3 months• Treatment requires addressing physical, mental, and social factors

Understanding Pain: Why Do We Feel it?

Pain is a complex experience influenced by physical, neurological, and psychological factors. It acts as an alarm system, warning the body of potential harm. However, in some cases, the pain system becomes overly sensitive, leading to persistent discomfort even when no ongoing injury is present.

Pain can be classified into different types based on its cause and underlying mechanisms. However, pain often involves a combination of these categories, making it important to take a **multifaceted approach** to management.

- **Nociceptive Pain:** Caused by injury or tissue damage (e.g., arthritis, sprains, fractures). Typically responds well to anti-inflammatory drugs, physiotherapy, and heat/cold therapy.
- **Neuropathic Pain:** Results from nerve damage or dysfunction (e.g., sciatica, diabetic neuropathy, post-herpetic neuralgia). Best managed with nerve-modulating medications such as amitriptyline, gabapentin, or duloxetine.
- **Ischaemic Pain:** Occurs when tissues don't get enough oxygen due to poor blood supply (e.g., angina, peripheral arterial disease). Managed through vascular treatments, lifestyle changes, and medications like statins and antiplatelets.
- **Central Sensitisation Pain:** Involves changes in the nervous system that amplify pain signals (e.g., fibromyalgia, complex regional pain syndrome). Best managed with a multimodal approach, including graded exercise, cognitive therapies, relaxation techniques, and sometimes low-dose medication.
- **Visceral Pain:** Originates from internal organs (e.g., irritable bowel syndrome, endometriosis). Can be vague or poorly localised and may respond to specific medications targeting gut health or hormone regulation.
- **Mixed Pain:** Involves multiple mechanisms (e.g., back pain with both muscular and nerve involvement). Requires a tailored combination of treatments.



The Pain Ladder: A Stepwise Approach to Treatment

The pain ladder is a simple way to manage pain by starting with mild treatments and moving to stronger ones if needed. You don't have to stay on stronger medications forever—work with your doctor to adjust treatment as your pain changes.

Step 1: Mild Pain

- Paracetamol
- NSAIDs (ibuprofen, naproxen)
- Topical treatments (Ibuprofen Gel, capsaicin cream)

Step 2: Moderate Pain

- Weak opioids (codeine, dihydrocodeine, tramadol)
- Combination therapy (paracetamol + codeine)
- Non-drug approaches (physiotherapy, heat therapy, relaxation techniques)

Step 3: Severe Pain

- Strong opioids (morphine, oxycodone, fentanyl, buprenorphine patches) – used cautiously for cancer pain or short-term severe pain
- Specialist interventions (pain clinic, nerve blocks, ketamine infusions)

Always discuss any pain medication changes with your doctor.


Understanding Opioids and Their Risks

Opioids can be effective for severe pain but require careful use.

Benefits: Immediate relief for acute or cancer-related pain.

Risks:

- **Tolerance:** Over time, higher doses may be needed for the same effect.
- **Dependence:** Long-term use can lead to withdrawal symptoms.
- **Side Effects:** Constipation, drowsiness, nausea, dizziness.
- **Withdrawal & Tapering:** If stopping opioids, gradual reduction is essential to prevent withdrawal symptoms.

 *Opioids are generally not recommended for chronic non-cancer pain.* Discuss any concerns with your GP. If you experience side effects from your current medication, seek medical advice.

Psychological Approaches and Lifestyle Strategies

Pain is not just a physical experience—it has strong psychological and emotional components. Addressing these aspects can help improve pain management.

- **Cognitive Behavioural Therapy (CBT):** Helps reframe how pain is perceived and managed.
- **Acceptance and Commitment Therapy (ACT):** Focuses on living well despite pain.
- **Mindfulness & Meditation:** Can reduce stress and pain intensity.
- **Graded Exposure Therapy:** Helps reduce fear of movement and increase activity levels over time.

Other lifestyle strategies that can support pain management include:

- **Exercise:** Low-impact activities like swimming, yoga, and walking improve flexibility and reduce stiffness.
- **Physiotherapy:** Helps improve strength, posture, and mobility.
- **TENS (Transcutaneous Electrical Nerve Stimulation):** Sends mild electrical pulses to block pain signals.
- **Diet & Hydration:** An anti-inflammatory diet rich in omega-3, turmeric, and whole foods can support pain management.
- **Pacing & Energy Management:** Avoiding the 'boom-and-bust' cycle by balancing activity with rest.
- **Improving Sleep:** Good sleep hygiene can help reduce pain sensitivity and fatigue.



Creating a Personal Pain Management Plan

Your pain management plan should be tailored to your needs. It may include:

- ✓ Medications tailored to your type of pain.
- ✓ Psychological support to improve coping strategies.
- ✓ Lifestyle changes such as regular exercise and relaxation.
- ✓ Access to therapies like acupuncture or TENS.
- ✓ Regular reviews with your GP or pain specialist.

When to Seek Help

- If your pain is ***new, severe, or worsening*** despite treatment.
- If you experience ***weight loss, fever, or neurological symptoms*** (e.g., weakness, numbness).
- If your pain ***significantly affects your quality of life***.
- If you experience ***side effects from your current medication*** that affect your well-being.
- If you need ***specialist pain management*** (ask about a referral).

Where to Get Support

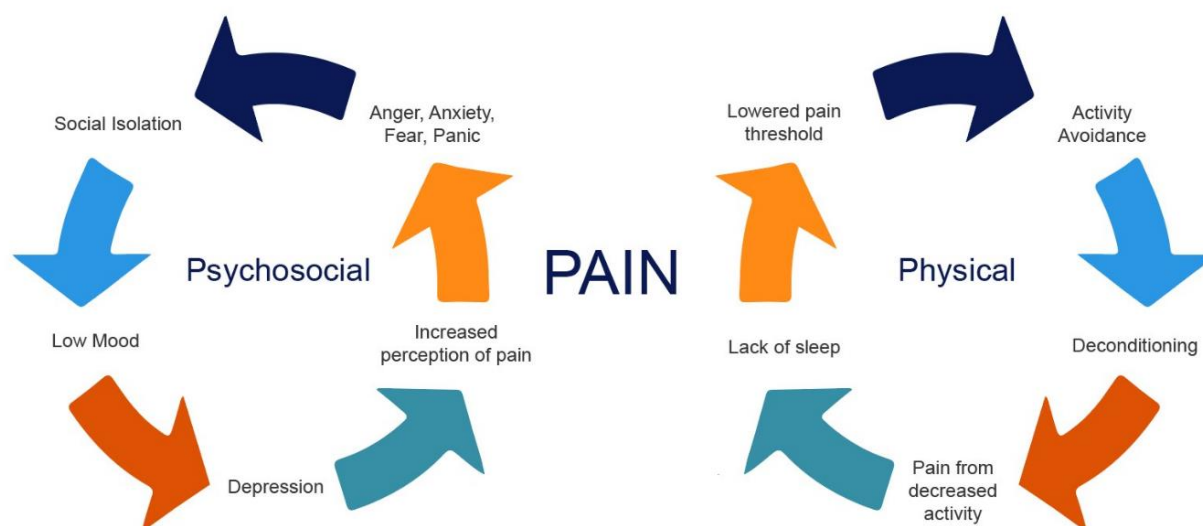
- **NHS Pain Management Programmes:** <https://www.nhs.uk/live-well/pain/how-to-get-nhs-help-for-your-pain/>
- **Live Well with Pain Resources:** <https://livewellwithpain.co.uk/>
- **SIRPA (Chronic Pain Support):** <https://www.sirpa.org/>
- **British Pain Society:** <https://www.britishpainsociety.org/>
- **Pain Concern:** <https://painconcern.org.uk/>
- **Flippin' Pain:** <https://www.flippinpain.co.uk/>
- **Mind UK (Pain & Mental Health):** <https://www.mind.org.uk/>

Recommended Reading

- 📖 **Explain Pain** – David Butler & Lorimer Moseley
- 📖 **The Pain Management Workbook** – Rachel Zoffness
- 📖 **Overcoming Chronic Pain: A Self-Help Guide** – Frances Cole et al.
- 📖 **The Way Out** – Alan Gordon

Take Control of Your Pain

Pain management is a journey that requires a combination of medical treatment, lifestyle strategies, and emotional resilience. By staying informed and working with your healthcare team, you can take steps to break the pain cycles and improve your well-being and quality of life.



If you have further questions:

Fill out a **triage form** on our **website:** www.cirencesterhealthgroup.co.uk

Call the **practice** on **01285 653184** or **01285 653122**

If you require **urgent** medical advice, call **111 (24 Hrs)**

In an **emergency** call **999**