



# Know your pace and manage your pain

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## Definition of Pain

A negative sensory  
and emotional  
experience

Therefore

Your pain belongs to  
you.

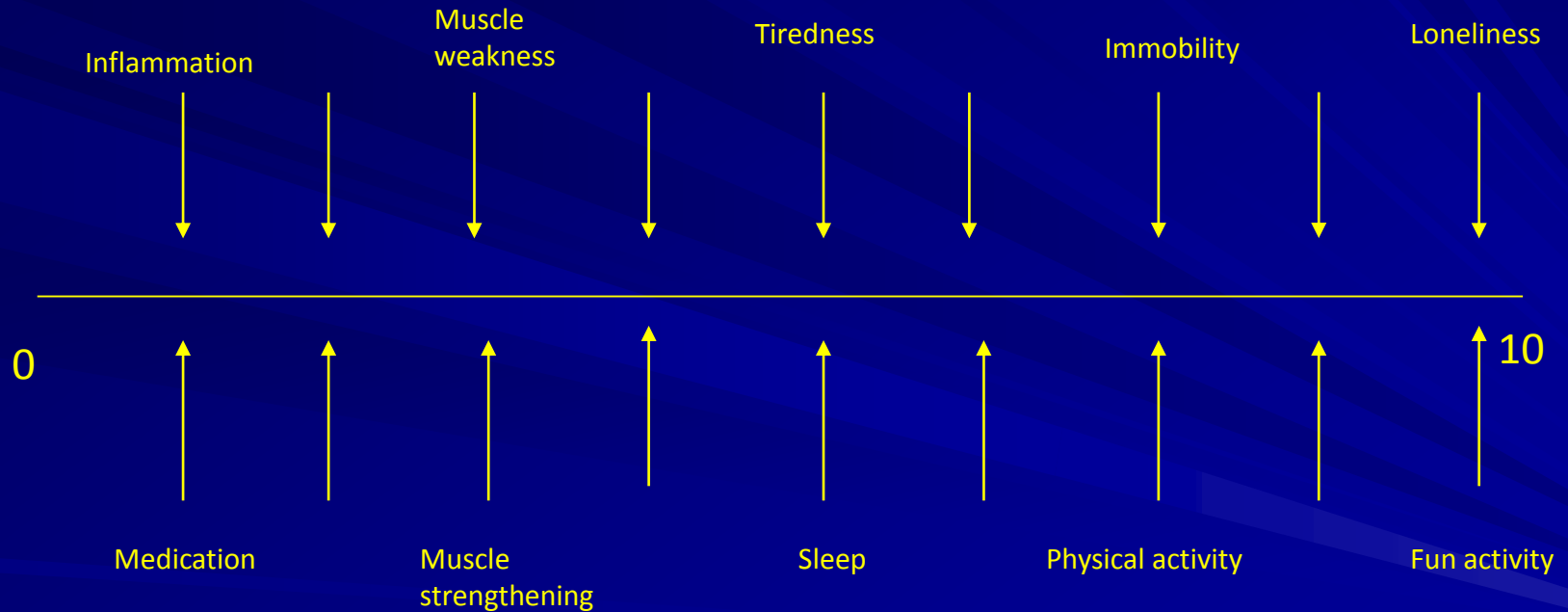
If **YOU** can control my  
pain  
Then  
**I** can use my body

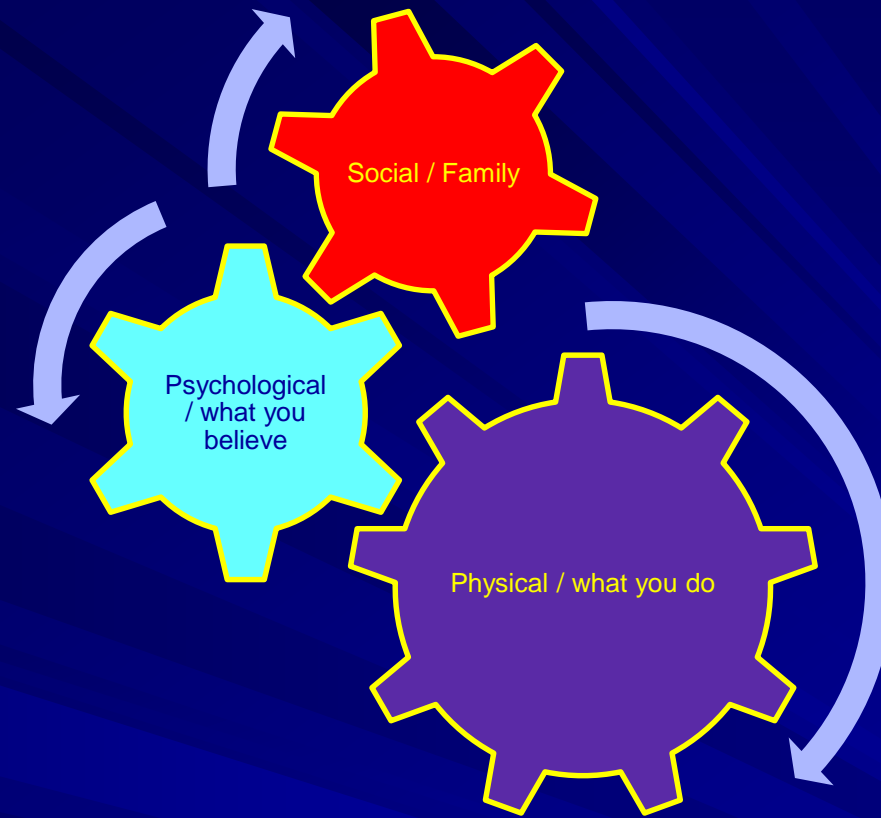
If I can control my pain  
Then  
I can use my body

# Goals

- Defined, shared and held by everyone
- American Pain Society (2012)
  - Improve all domains of functioning and quality of life
- For you and your family
  - Facilitate change in relationship to pain
  - Optimise quality of life
  - Increase function despite pain
  - Facilitate adoption of self-management approach
  - Enhance well-being

# Complexity of Pain



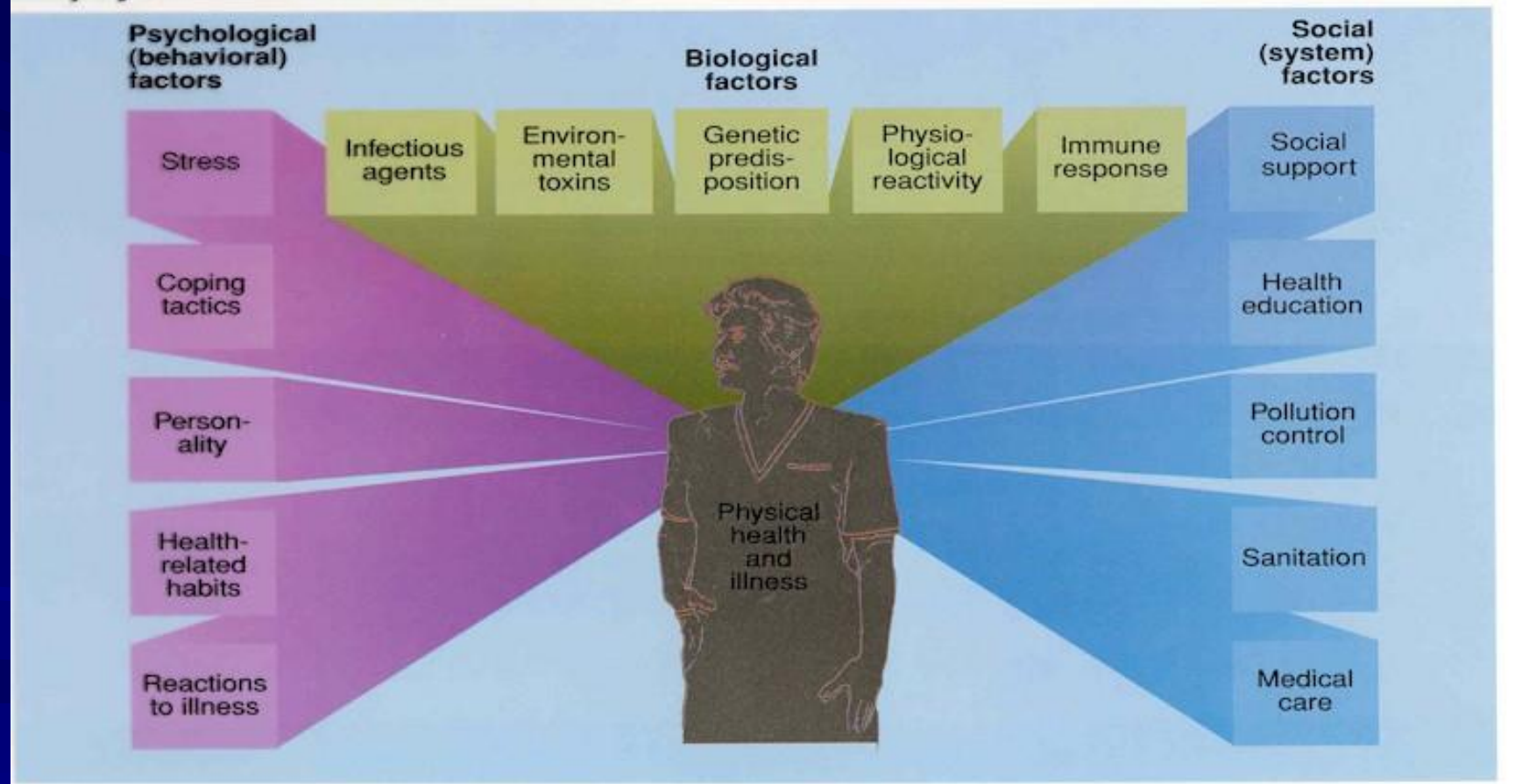


# BIO-PSYCHOSOCIAL MODEL OF MANAGEMENT



# Biopsychosocial model applied to chronic pain

## Biopsychosocial factors in health





**Bio**  
Central  
sensitisation  
Disease process  
Physical  
deconditioning

Biological factors to consider in the formulation of chronic pain

## Psychological

Cognitions (illness beliefs,  
cognitive distortions,  
hypervigilance)

Mood (anxiety, frustration,  
hopelessness, fear of pain)

Coping (avoidance, boom-  
bust, coping style)

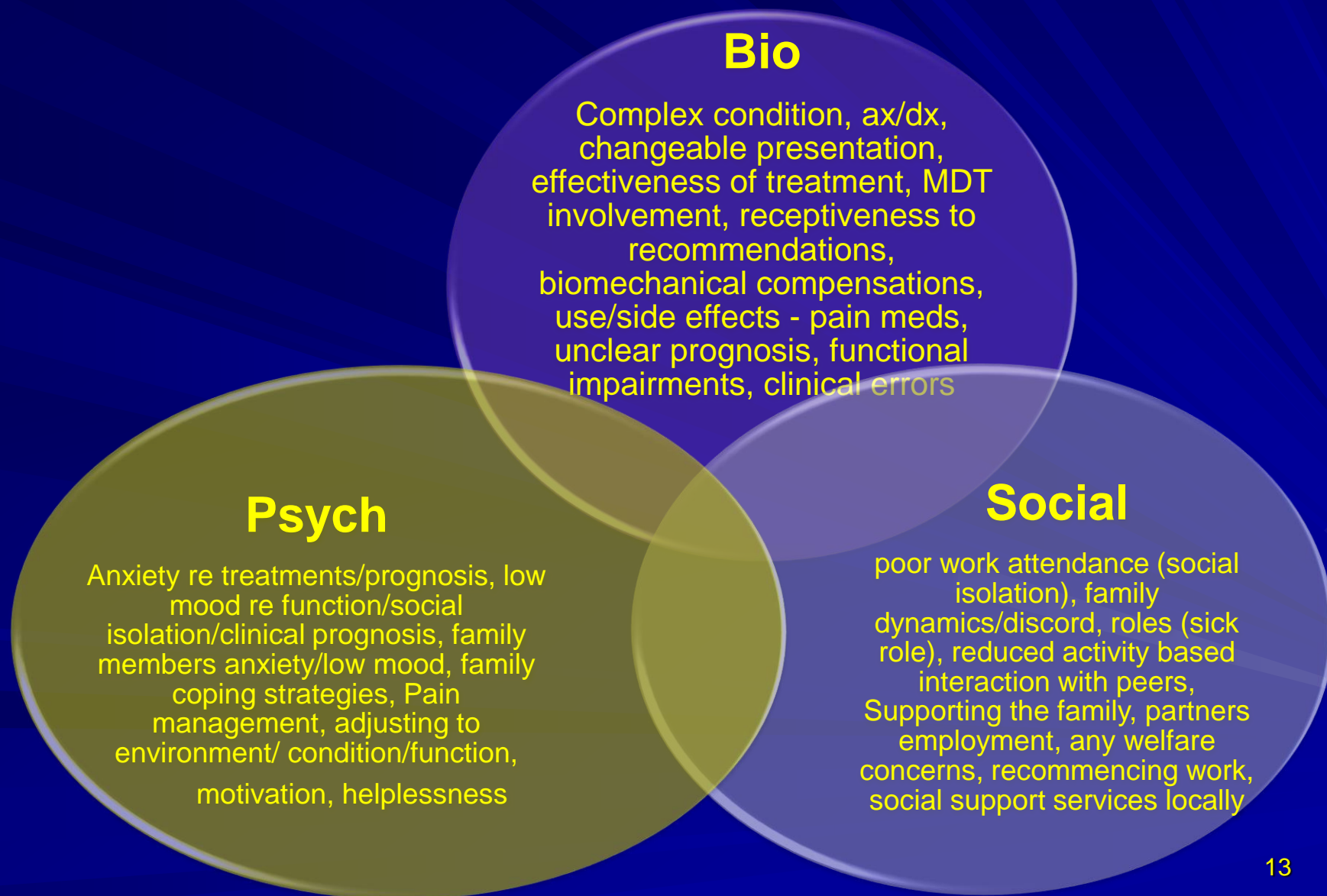
Psychological factors to consider in the formulation of chronic pain

## Social

Partner behaviours  
Work (cognitive functioning,  
attendance, pressure)  
Healthcare experience (e.g.  
disbelief, conflicting messages)  
Cultural beliefs about  
pain/disability  
Economic factors (e.g. DLA)  
Previous harm/abuse

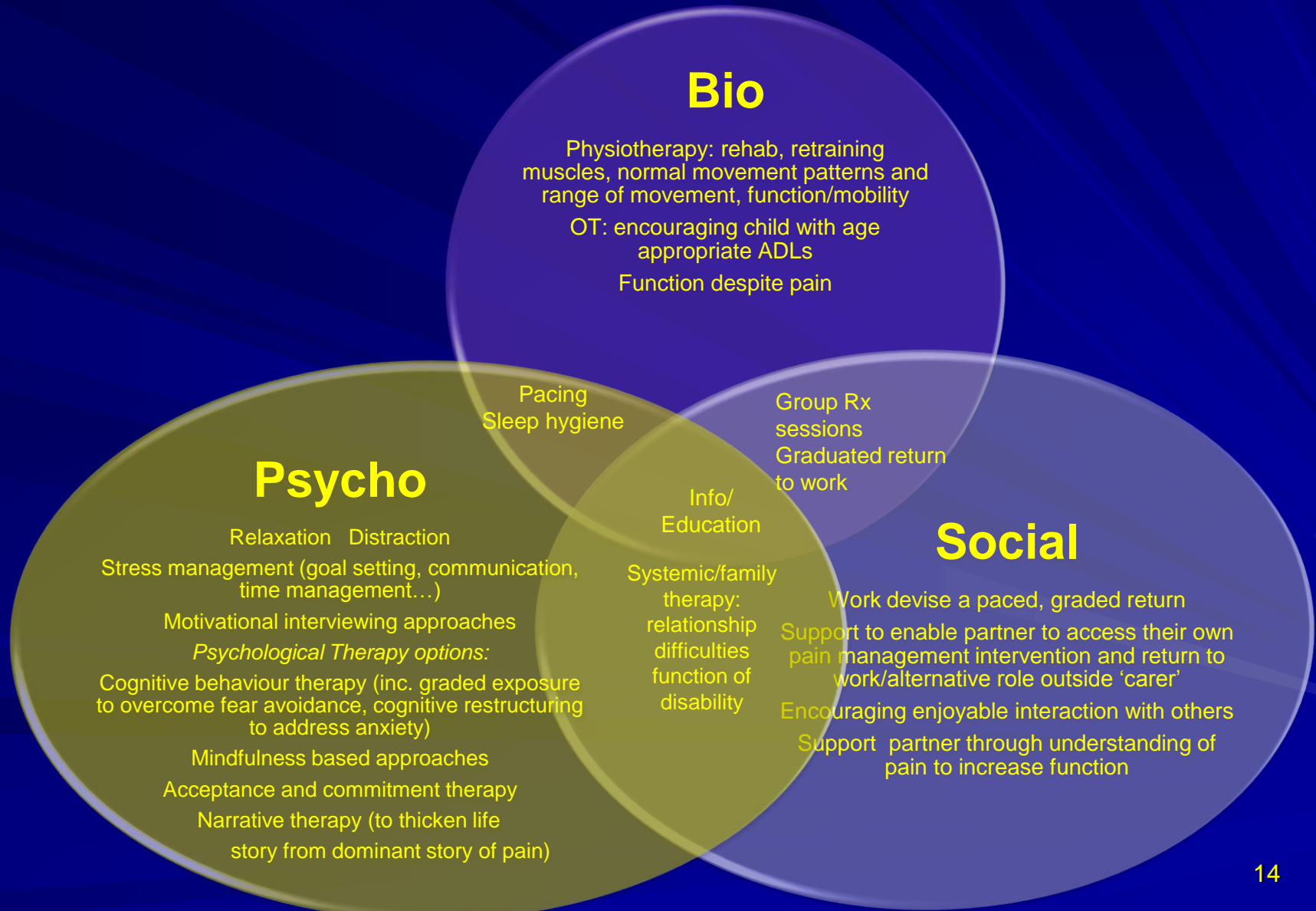
Social factors to consider in the formulation of chronic pain

# Obstacles to effective self-management/recovery





# Approaches to managing obstacles



# Explanation – Active Participation

## ■ Biomechanics of pain

- Muscle control is the key

## ■ Science of pain

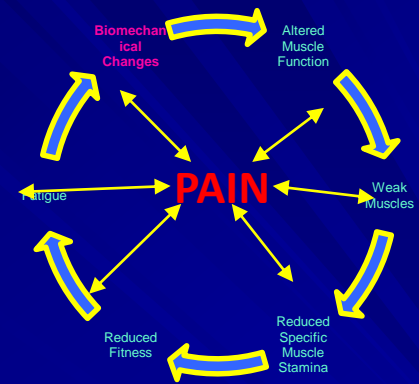
- Building on ideas gradually

## ■ Understand helpful action vs unhelpful

- ie. Not moving increases the pain

## ■ Moving your focus away from the pain

## ■ Normal activity

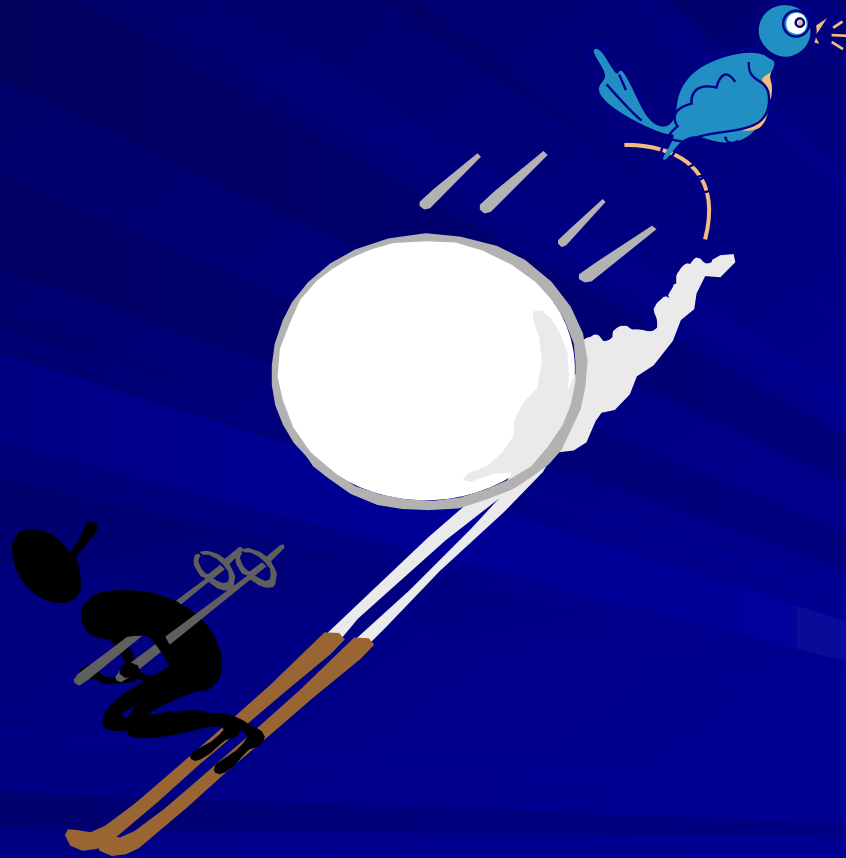


# Listen and Believe but do not focus!

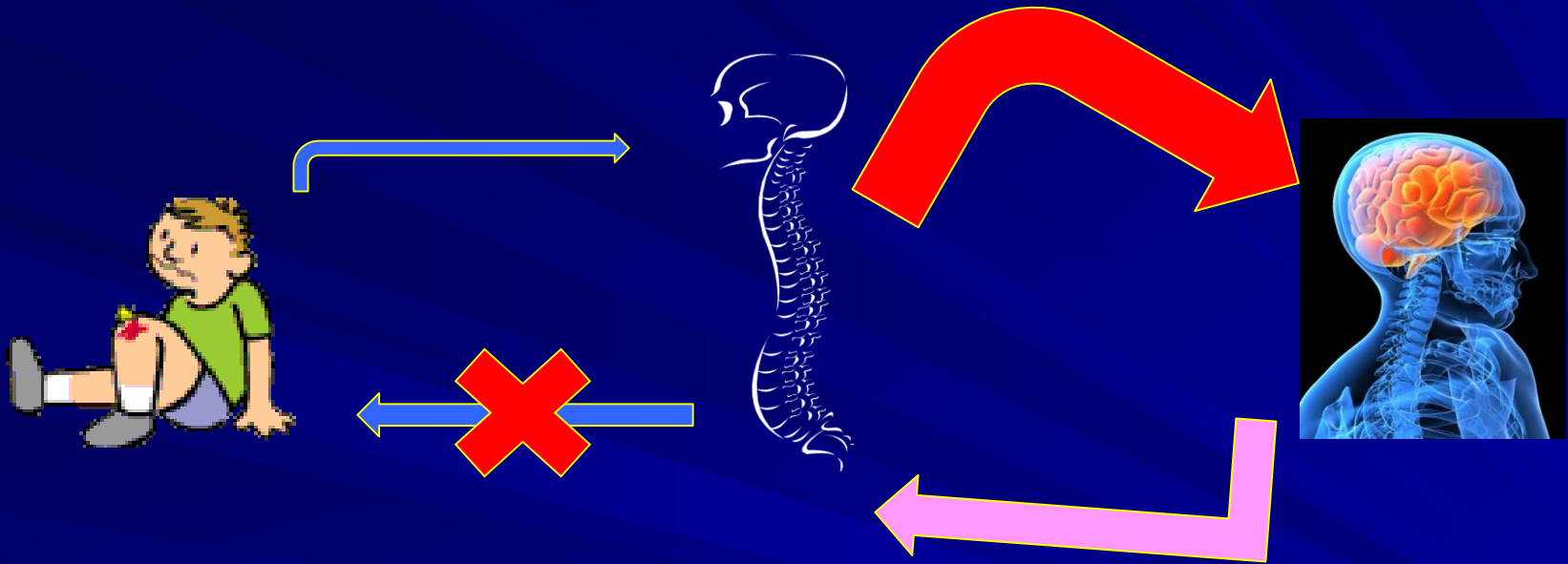
- Focusing and talking about the pain increases it
- But it is important that the struggle against the pain is acknowledged
- Distraction
- Active relaxation techniques
- Imagery



# Initial Onset is Different to the Maintaining Factors



# Central Sensitization



- Pain amplification.
- Pain Centre becomes hyper-sensitive
- Increased local sensitivity
- Loss of inhibitory signals

# Psychological and Physical

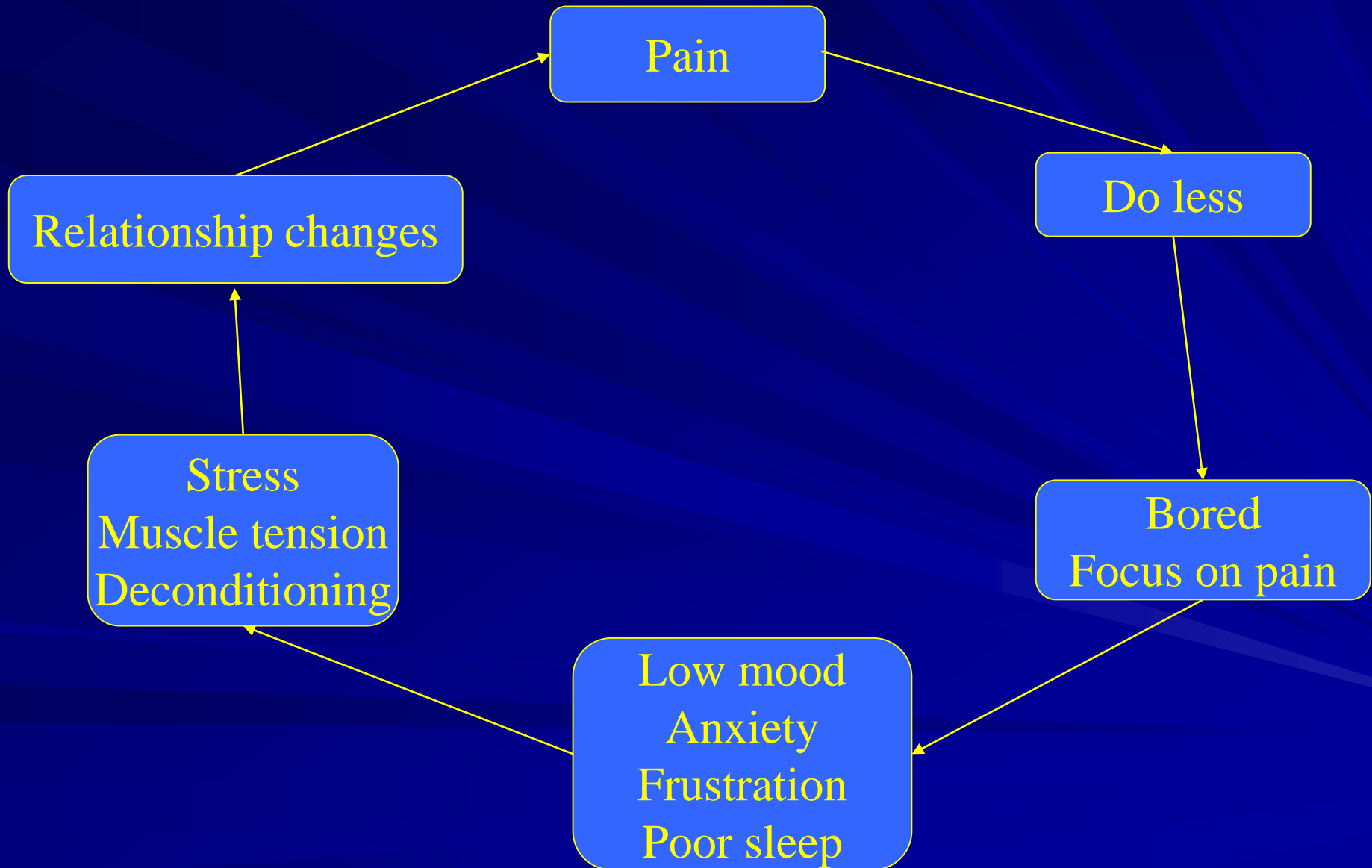
- Physical Pain Pathway



- Psychological coping of Pain



# The Cycle of Pain



# Things that Increase Pain

- Immobility / Rest
- Focusing on the Pain
- Fatigue
- Not being believed
- Negative thoughts/feelings/emotions
- Muscle weakness
- Abnormal movement patterns

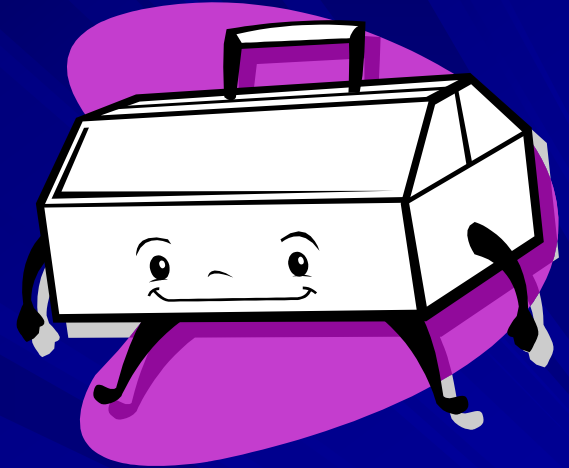
# Things that decrease the Pain

- Exercise / Movement
- Distraction
- Positive thoughts / feelings / emotions
- Sleep
- Being believed
- Good muscle strength
- Normal movement patterns



# Comfort Tool Box

- Exercises and physical activity
- Distractions
  - Games
  - Crafts
  - Movies
  - Reading
- **Going to work**
- Positive statements
- Coping statements
- Imagery
  - Safe/happy place
  - Changing the pain image
- Relaxation
  - Guided Imagery
  - Progressive Muscle Relaxation
  - Controlled Breathing
- Comfort items (marbles/ velvet etc)
- Self hypnosis
- Hobbies/activities
- Friends and families
- etc





# Partners as coaches

- Encouraging
- Supportive
- Confident
- Enthusiastic
- Acknowledging pain but not listening to it
- Taking care of themselves





**FUNCTION**

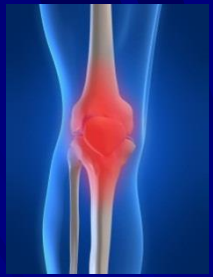
**DESPITE**

**PAIN**

# Desensitisation

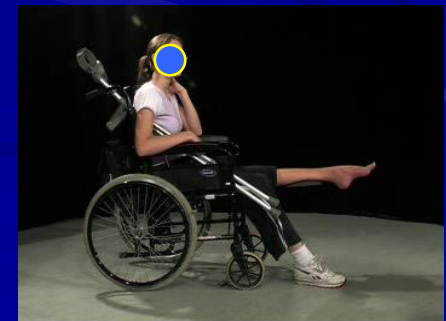
- Best method is regaining normal active movement as soon as possible!
- Massage
  - Goal is to regain some active movement - not a time limit
- Touch with different textures
- Eg Pins and Needles

# Exercise reduces Pain



- **Correcting Biomechanical Dysfunction**
  - Correct altered patterns of movement
  - Correct altered function
- **Increases mobility**
- **Reduces Pain Amplification**
- **Reduces Central sensitisation**
- **Increases Inhibitory fibre Function**
  - Aerobic exercise
  - Strengthening exercise
- **Reduces low mood**

Lumley M 2011; Carville 2008; Busche 2007 & 2008; Buckhardt 2005; Goldenberg 2004





# Emotional Affects of Exercise



- Confidence
- Self - Esteem
- Inclusion
  
- Individual programme
- Group Physio Sessions
- Group sport / training
  - Care is needed to ensure inclusion and not exclusion!



# Simple vs Complex Exercise

## ■ Complex exercise (General fitness)

- Walking
- Running
- Football

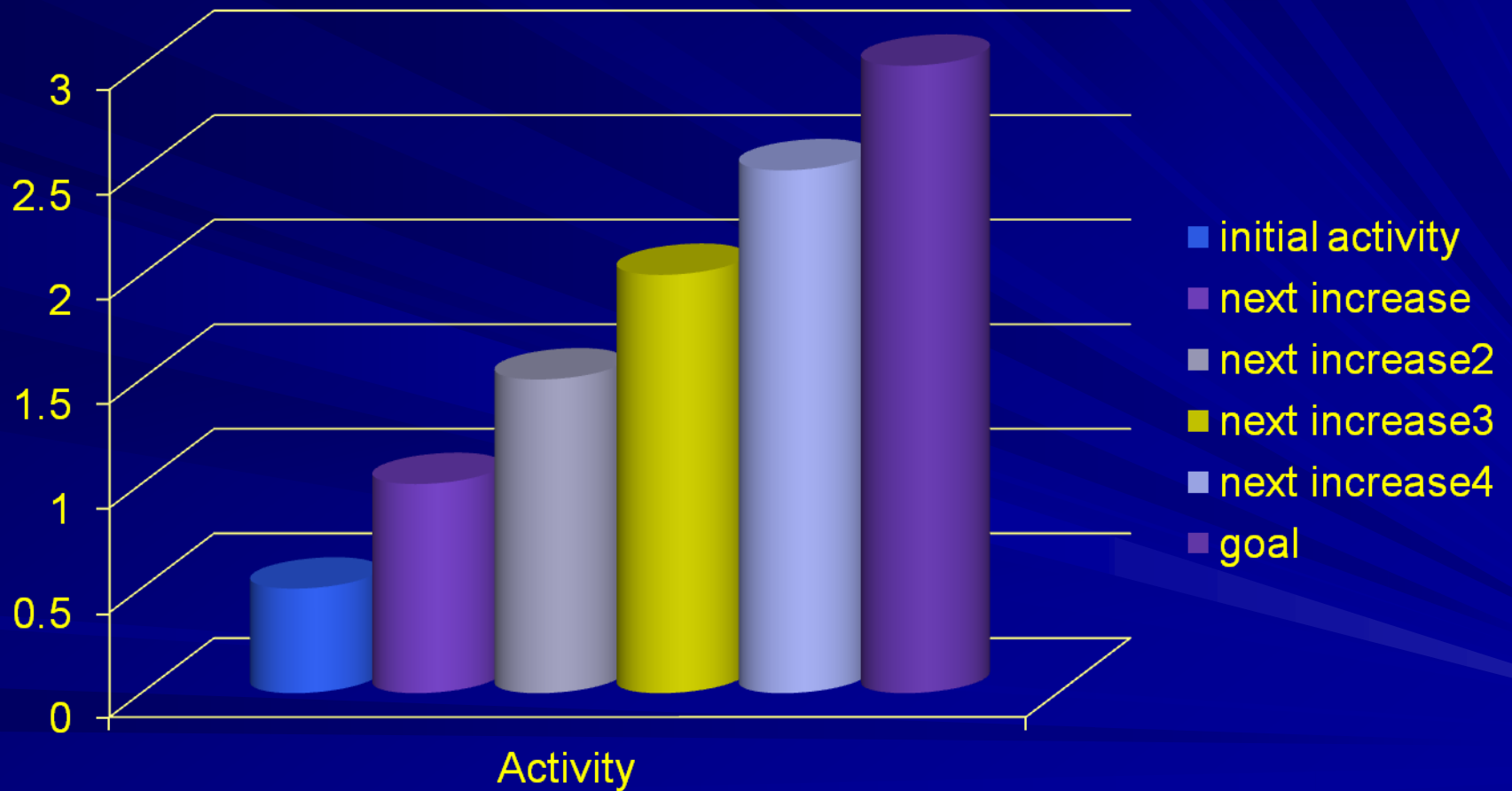


## ■ Simple Exercise (Correct biomechanics)

- Hip abduction
- Straight leg raise



# Pacing



# Consistent Pacing

On GOOD days do not do more

On BAD days do not do less



# Changing the focus of pain in your life.

## ■ Write lists:

- What you would like to do in your life?
- What is stopping you achieve this?
- How are you going to overcome these issues?
- What do you need to overcome these?
- Who do you need?



# Example:

- I want to walk the dog:
  - Too much pain in my legs
  - My muscles are too weak
  - I get out of breath easily
  - I am nervous the dog is going to pull me over
  - I am nervous about going out on my own

(How / what / who!)

# Philosophy

Everyone should learn to  
**actively** self manage their  
pain, with the support of their family.

The Therapists are there to provide the tools.



# Conclusion



- Active participation
- Exercise is vital in the management of pain
- Pain management techniques
  - Distraction
  - Active relaxation
- Normal function
- Alter focus/thoughts about pain
- Mindfulness

