



How To Take Control of Pain

SPONSORED BY:



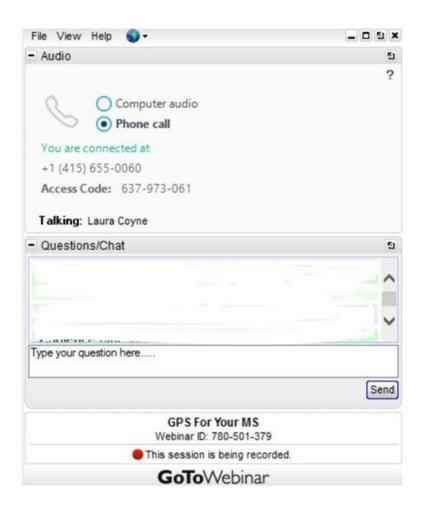




How To Ask Questions During the Webinar

Type in your questions using the **Questions/Chat** box









September PROGRAMS

Pain

Webinar – Sept 7 How to Take Control of Pain

> JUMPSTART – Sept 15 Get Started with Pain Management Strategies

YOUR QUESTIONS ANSWERED – Sept 20

Pain in MS





Dawn Ehde, PhD

- Clinical Psychologist
- Professor of Rehabilitation Medicine
- Nancy & Buster Alvord Endowed Professorship in MS Research

 Co-Director of the University of Washington MS Rehabilitation & Wellness Research Center, Seattle, WA

Do you have pain?

Interactive Poll

Yes No Unsure



Learning Objectives



Describe the types of pain that can occur in MS



What can you do right now to manage MS-related pain?

- Medical
- Rehabilitative
- Psychological





Pain Is Common In MS

- In a meta-analysis (Foley et al., 2013):
- 63% of adults with MS have pain
- 62% within the last month
- In a prospective epidemiologic study
- (Fiest et al., 2015):
- 74.1% had any pain
- 40.5% had disruptive pain

Fiest KM et al. Mult Scler 2015. Foley PL et al. Pain 2013.

CAN Multiple Sclerosis

Pain Has Adverse Effects

- Greater risk of falls
- Negative impact on other symptoms & function:
 - Can interfere with daily activities
 - Increased cognitive symptoms, including attention
 - Poorer sleep
 - Increased fatigue
 - Poorer mental health
 - Reduced social activities
- Higher level of healthcare use



Where do you have pain?

Interactive Poll

Arms / Legs

Back

Face/Head

Joints

Other (Write your answer in chat)

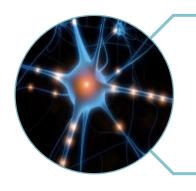


What Types of Pain Occur in MS?

FAMILIAR TERMS	MEDICAL TERMS
 Pains That Start/End Abruptly Stabbing facial pain "Electric shock" when bending the head forward "MS hug" Painful spasms in arms or legs 	 Acute Neuropathic Pain Trigeminal neuralgia Lhermitte's sign Squeezing sensation around the torso Paroxysmal spasms
 Ongoing Painful Sensations Burning, prickling, stabbing pain Muscle aches and pains 	Chronic Neuropathic PainDysesthesias
Muscle & Joint Aches and Pains	Musculoskeletal (Orthopedic) Pain



Pain Involves



Nociceptors (nerve cells all over body)



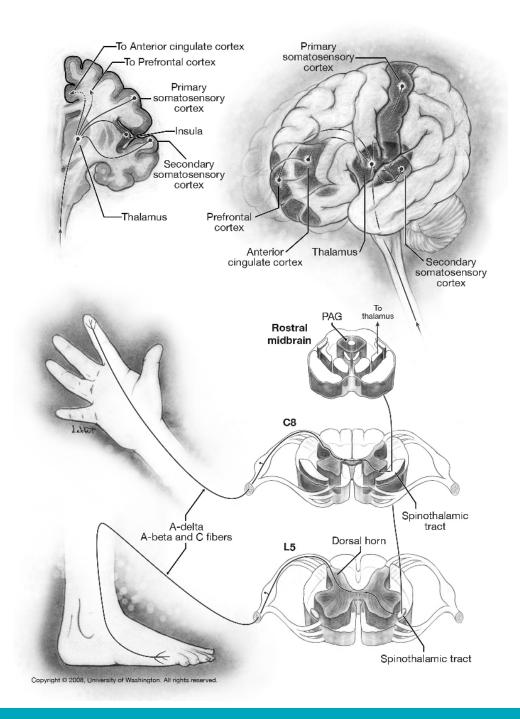
Spinal cord



Brain



"Pain is in my head" (the brain, that is)





Pain: Its Origins & Our Response are Complex

Biopsychosocial Model of Pain

Biological

Nociception, nervous system sensitization, illness





Psychological

Pain thoughts/
beliefs,
emotional response,
behavior

Social

Cultural influences, social support, environment, socio-economic status



Self-Assessment







WHERE DO YOU HURT?

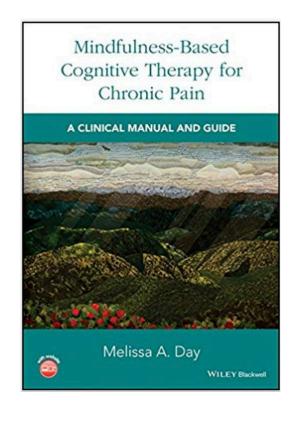
WHEN IS IT WORSE?
BETTER?

WHAT MIGHT BE CONTRIBUTING TO OR TRIGGERING PAIN?









Treatment & Pain Management Strategies



Medications

Most common method for managir

- Depends on pain type
 - Neuropathic pain medications
 - Non-steroidal anti-inflammatories (NS
 - Anti-depressants







Cannabis

- Braley et al. 2020 study in 1,027 adults with MS in USA:
 - 42% reported use in past year
 - Most commonly used for pain and sleep
 - Only 18% had discussed it with their healthcare provider
- Has potential benefits <u>and</u> adverse effects
- If considering cannabis; be informed!
 - See Dr. Allen Bowling's information sheet on cannabis use





Rehabilitation

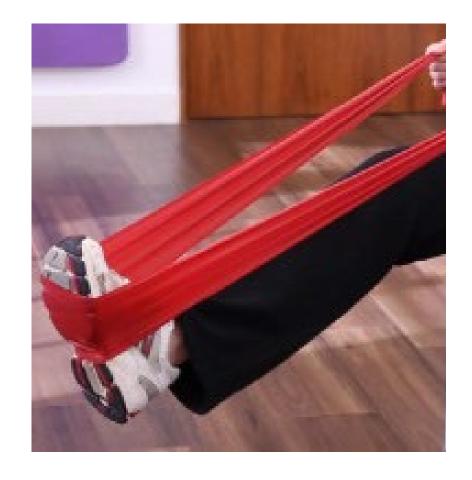
- May involve physical therapy, occupational therapy, and/or a physiatrist (rehabilitation medicine physician)
- Can include:
 - Exercises
 - Adaptive equipment
 - Massage
 - Hydrotherapy
 - And more



Exercise & Physical Activity

One of the most beneficial strategies for pain management

- Build muscle strength and flexibility
- Maintains functional movement
- Improves mood
- Decreases stress
- Reduce inflammation
- Reduce pain sensitivity in the brain
- Limits developing new sources of pain that may arise from inactivity or falls



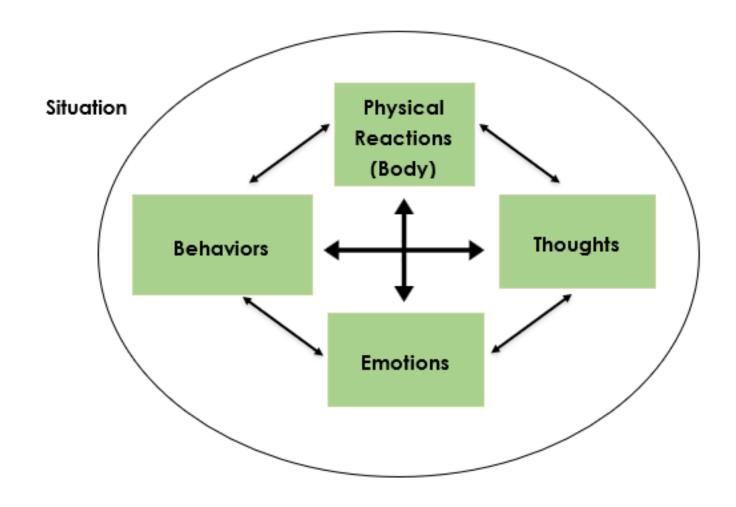
Exercise Guidelines for MS

- > 150 minutes of exercise or physical activity per week
- Build up exercise or physical activity gradually
- Many different activities are beneficial
- Consult with a provider or exercise specialist for guidance



Psychological Strategies:

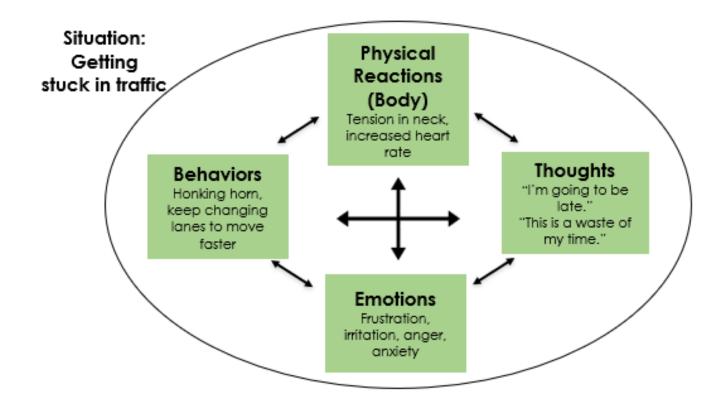
Cognitive Behavior Therapy





EXAMPLE

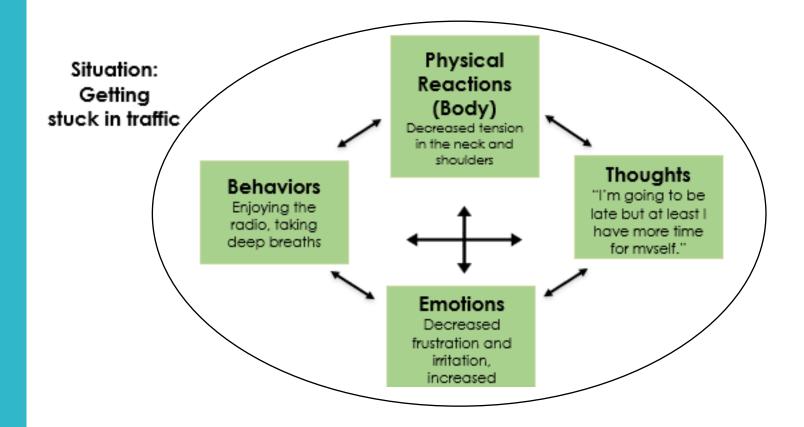
Getting Stuck In Traffic: Person A





EXAMPLE

Getting Stuck In Traffic: Person B



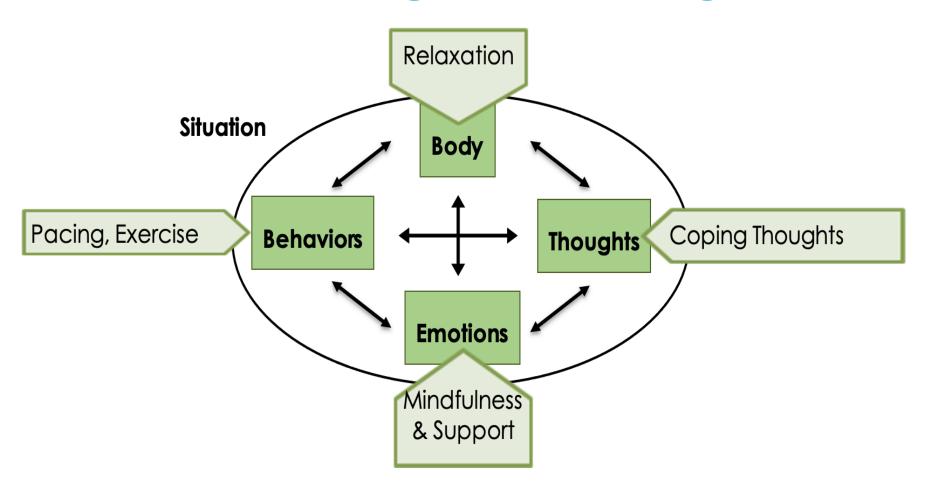


Self-Management Involves Tracking

- The physical sensations you experience in your body
- How you think about pain situations
- How you feel emotionally
- How you behave (act)
- Triggers in your environment that influence how you think, behave, and feel



Pain Management Targets





Interactive Poll

Rate your current pain on a 0 (no pain) to 10 (worst pain) scale. What is it?

Poll options:

0

1 - 3

4 – 6

7 – 9

10



Guided Relaxation Practice



Interactive Poll

Now rate your current pain again on a 0 (no pain) to 10 (worst pain imaginable) scale.

What is it?

Poll options:

0

1 - 3

4 - 6

7 – 9

10



Relaxation Strategies

- Elicits "relaxation response"
- Takes regular practice
- Many options
- See My MS Toolkit for instructions
- & recordings
- Mymstoolkit.[dot]com





How To Use Mindfulness For Pain

Regular practice

Many options for learning mindfulness meditation: classes, apps, guided audio recordings, psychotherapy



Example: Identifying Thoughts Worksheet

Pick a situation and identify your thoughts and corresponding reactions

Situation Date: Monday 3/15 Time: 9:15 am

I woke up late and realized that I was going to be late for my physical therapy appt.

Thoughts	Body (Physical Reactions)	Emotions	Behaviors
I'm not going to make it on time. My PT is going to be upset with me for being late. I should call my therapist to let her know I'm going to be late. My legs always <u>hurts</u> more during my PT sessions. I hate living with pain. I'm never going to get my life back.	Tense neck & shoulders Increased leg pain Headache starting Feeling tired Low energy	Frustrated Anxious Sad	Rushing around house Leave papers needed for therapy at home Stub toe rushing out the door
Pain Increased ☐ Pain Decreased □		Pain Did Not Change 🗆	



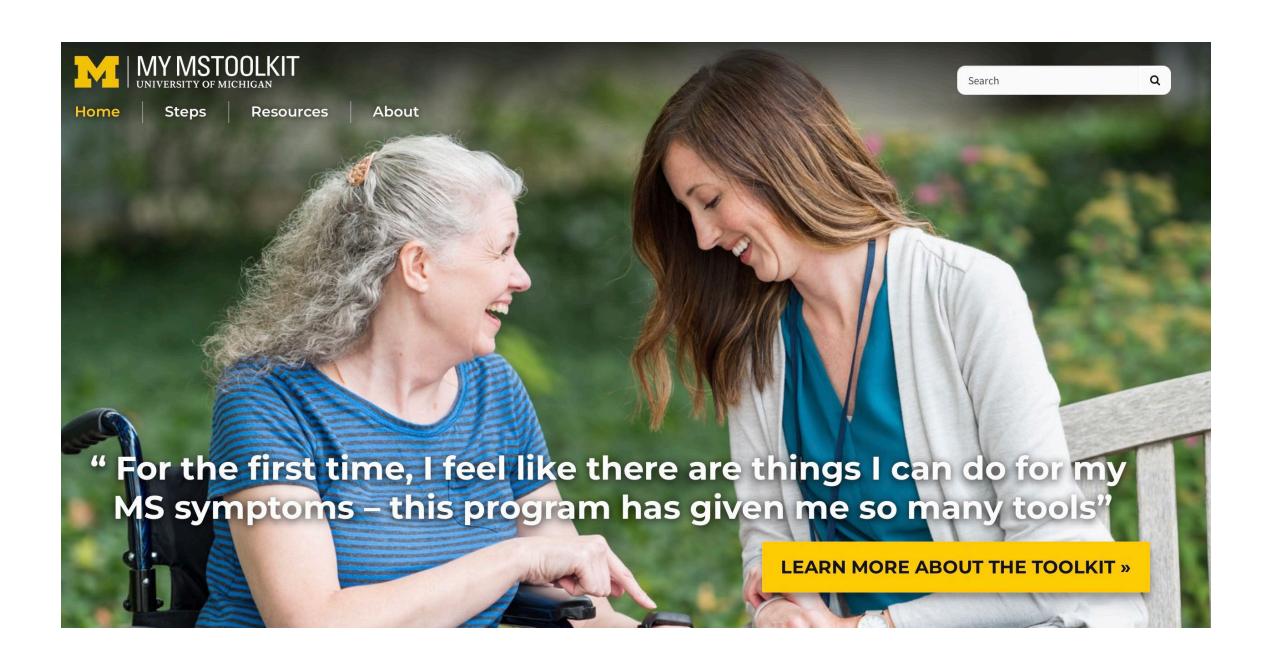
Working With Thoughts

- Cognitive Behavioral Therapy (CBT)
- Strategies for maximizing helpful thoughts and minimizing unhelpful thoughts on your own:
 - Recognizing & labeling automatic thoughts
 - Reframing
 - Letting go of thoughts
- See "Working with Thoughts" at My MS Toolkit for instructions & worksheets (Mymstoolkit.[dot]com)

Other Strategies

- Goal-setting
- Pacing activities
- Managing emotional triggers
- Stress management strategies
- Good sleep habits
- Communication strategies
- Building social connections & support





MANAGING PAIN & SLEEP ISSUES IN MULTIPLE SCLEROSIS



North American Education Program

https://www.nationalmssociety.org/Programs-and-Services/Resources/Managing-Pain-and-Sleep-Issues-in-MS-(dvd)?page=1&orderby=3&order=asc

https://www.nationalmssociety.org/Symptoms-Diagnosis/MS-Symptoms/Pain http://agerrtc.washington.edu/sites/agerrtc/files/files/Aging_Pain.pdf



Key Take Aways

- Pain is best understood & treated from a biopsychosocial perspective
- You have many options for pain management
- Experiment to find what works best for you & keep practicing your tools



Other Resources

- Anything by Can Do on Pain
- https://www.nationalmssociety.org/Symptoms-Diagnosis/MS-Symptoms/Pain
- http://agerrtc.washington.edu/sites/agerrtc/files/files/Aging Pain.p df
- https://multiplesclerosisnewstoday.com/expert-voices-pain-management-people-with-multiple-sclerosis/ (recent interview of me about pain in MS that has tips in it)
- Dr. Bowling's info on cannabis: http://neurologycare.net/mj2.html



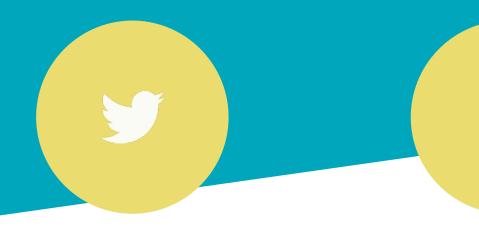
Q&A







Connect With Us





Twitter @CanDoMS

Facebook

@CanDoMultipleSclerosis

Instagram
@CanDoMultipleSclerosis







How to Fall Asleep and Stay Asleep

Thursday, October 6th

SPONSORED BY:







The preceding program is copyrighted by Can Do Multiple Sclerosis. It is provided for your personal educational and referential use only. Any repurposing or dissemination of its content requires the consent by Can Do Multiple Sclerosis.

© Can Do Multiple Sclerosis

