

Chronic Pain & Depression: A Roller Coaster Ride

Lori Higa, BSN, RN-BC

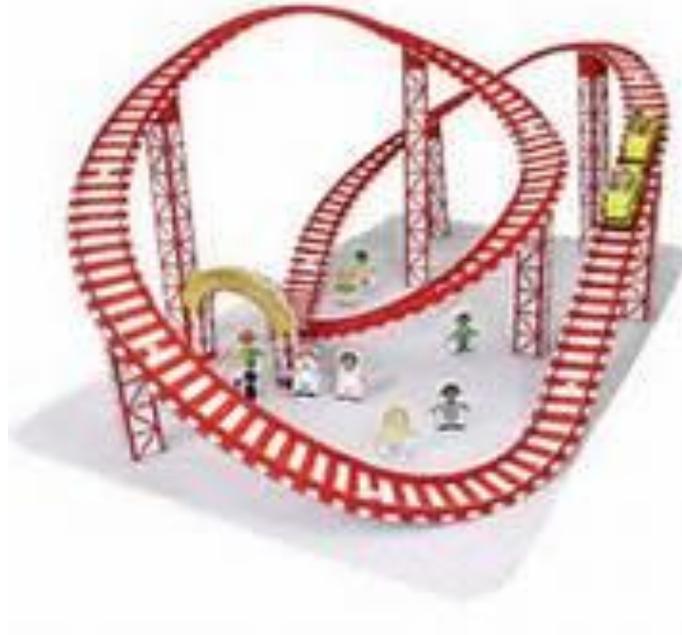


Objectives

By the end of this Webinar you will be able to:

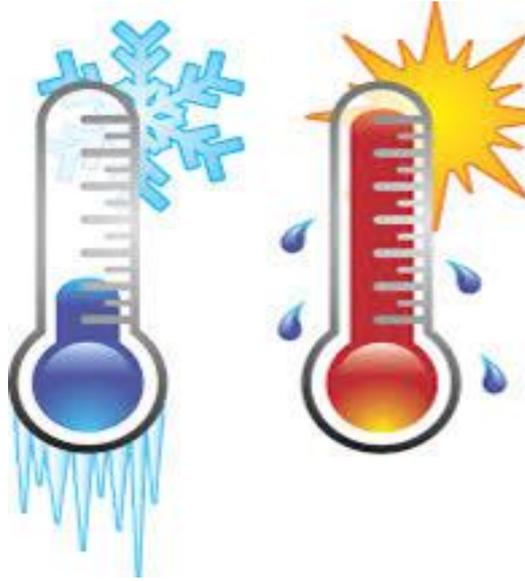
- Help patient to be a good self-advocate
- Discuss treatment options with patients
- Understand your role with chronic pain patients

The Roller Coaster of Pain



Gauging Your Comfort Level

- Uncomfortable
- Dread
- Uneasy



- **Very comfortable**
- **Relaxed**
- **At Ease**
- **Very experienced**

- **Comfortable**
- **Neutral**
- **Could use more tips**



Chronic Pain Mysteries

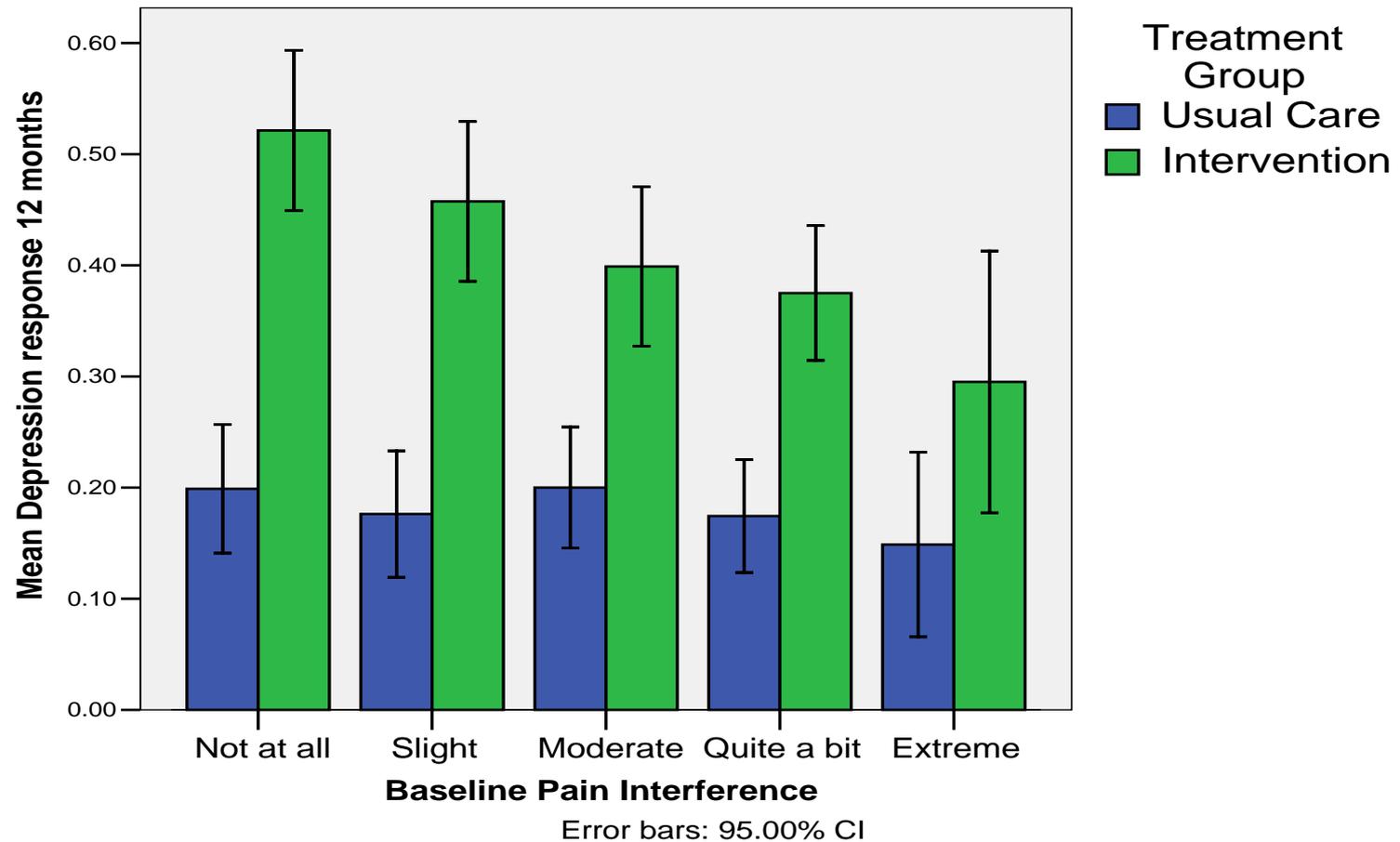
- Many patients never get a clear answer as to “why” they hurt
- Chronic pain sensitizes people to pain stimuli
 - chronic pain causes other pain to hurt more
- Chronic pain increases risk of depression
- **VALIDATE, VALIDATE, VALIDATE**



Impact Study

- **50% of IMPACT participants had functional impairment from pain**
- **Only 50% of those with persistent pain received analgesics**
- **Pain and depression interact and contribute to disability or chronic pain**
- **Pain limits depression treatment response**

Pain Impedes Improvements in Depression





Bias & Beliefs about Pain

- **What bias does patient have about pain?**
- **How does culture, age, personal beliefs impact how patient manages pain?**
- **What bias or belief do you as a clinician have about pain?**



Pain & Depression



Bi-directional Relationship



Pain & Depression

Don't argue about what came first...

- **Depression and anxiety are common and can exacerbate pain**
- **Pain complaints can be a way to communicate psychological distress**
- **Persistent pain can exacerbate depression**



Create a Partnership

- **Educate patients**
- **All pain is real**
- **Engage patient to be an active partner**
- **Explain provider's role**
- **Focus on functional Impairment**



Changes in Definitions

- **DSM-5 has eliminated categories that define substance abuse and dependence by combining them into a single diagnostic entity of Substance Use Disorder.**
- **The disorder is measured on a continuum from mild to severe.**



Terminology

- **Painkiller** - Negative use by media in reports of opioid addiction and overdose. Best replace with **pain reliever**.
- **Addiction** - Frequently misused by those untrained to make the diagnosis, not all that abuse are addicted.
- **Narcotic** - Should not be used in clinical setting or in education context d/t emotional association and crime, addiction and death. Replace with **opioid**.
- **Drug-seeking** - should be replaced with **relief-seeking**.
- **Addictive** - False when describing a substance. Addiction resides within the person and not the substance used.

10. Federation of State Medical Boards. *Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain*. Washington, DC: Federation of State Medical Boards; 2013.

21. Prince V. Pain management in patients with substance-use disorders. In: *Chronic Illnesses I, II, and III—PSAF-VII, Book 5*. Lenexa, KS: American College of Clinical Pharmacology; 2011.

22. Utah Department of Health. *Utah Clinical Guidelines on Prescribing Opioids for Treatment of Pain*. Salt Lake City, UT: Utah Department of Health; 2009.



Chronic Pain and Depression

- **Bodily aches and pains are a common symptom of depression**
- **Studies show that people with more severe depression feel more intense pain**
- **Not known how or if depression and chronic pain are linked, but the illnesses are known to occur together**
- **Chronic pain can worsen depression symptoms and is a risk factor for suicide in people who are depressed**

Pain is REAL

“In their brain, but not in their head”



The Key of Chronic Pain Management



- The ultimate goal of chronic pain care **is not reducing pain, but improving life**
- If the patient's pain is reduced, but the patient's life does not move forward, then the treatment has not succeeded
- If the patient's life moves forward, even if pain intensity is not reduced, then the treatment has succeeded

Treatment

- **Option, idea, solution, election, alternative, preference, possibility**





Scope of Practice

- **Gather Information about pain, treatments, function**
- **Read the PCP note with patient to explain treatment**
- **Use screeners**
- **Provide written material on use of medications**
- **Behavioral activation**



Messages to Patients about How to Use Pain Medications

- **Regular times rather than as needed or when pain is high**
- **Use/change one drug at a time**
- **Be careful with total doses**
- **Start low but go to target doses**
- **Give adequate trial**
- **We can talk to PCP about changing treatment if no effect after a 7-10 day trial**



“Boom or Bust” Activity Patterns

- **Pacing**
 - do a little, then rest
- **Pt will overdo, leading them to pain - “bust”**
- **Make activity consistent**
- **Less dependent on pt feeling**
 - do a little each day

Windows of Pain Relief

- **Work towards concentrating activity and decreasing pain for a “window of time”**
- **Concentrate medication peaks activate during that “window of time”**
- **Breaking down a 24 hour day to smaller parts, looking for targets of 1-2 hours**



OF



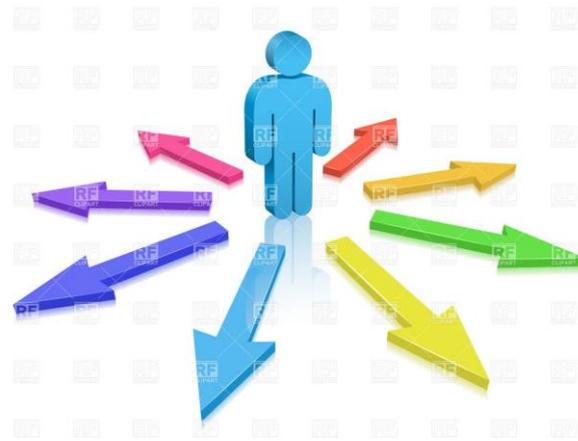


Routines are Important to Good Health

- **Highly overlooked, but so important....**
 - Sleep
 - Diet
 - Exercise
 - Socialization
 - Care & Support
 - Taking medications



What is Your Role?



- **Provide support**
- **Teach the patient to be a good self-advocate**
- **Provide clarity**
- **Provide a plan**



Describing Pain

- **Identify pain intensity**
 - 1-10 pain scale
- **Types of pain**
 - sharp, tingling, throbbing
- **Pain history**
 - How long? When did it start?
- **Treatment history**
 - What has been tried? Did it help?
 - What non-medication and medication has been tried?



Pain Distorts Memory

- **Provide patients with tools to monitor pain**
- **Identify which period of pain they are reporting on, now?**
 - **Vs. past (last week, a month ago, a year ago)**
- **Write things down for them to refer to**



Measure their Function

- **How is it working?**
 - Pain function
- **Measuring pain improvement through function**
 - What did you do this week that you weren't able to do last week?
 - Compare and contrast last week to this week
 - Based on intervention
 - after start of X treatment
 - Look for correlations between intervention's effectiveness and functional improvement
- **How much has pain interfered with your quality of life during the last week?**
 - Work, sleep, activity, relationships, exercise, pleasurable activities



Relapse Prevention Plans

- **Address pain management here as well as depression management**
 - Things that have helped to improve their functioning
 - Pain medications and routines for taking them
 - Pain symptoms that indicate relapse



Managing the Roller Coaster Ride

- **You can help patients have a smoother pain management plan with less up and downs, less run arounds, and more direction.**





Discussion

- **What will you add to your tool box?**





DISCUSSION

- **How does your own experience (or lack of experience) with pain impact how you provide support for a patient with pain?**



Resources & Non-Pharmacological Treatment Options

- **Other ideas?**



Pain Medication Categories

- **Acetaminophen**
- **Non steroidal Anti-inflammatory Drugs (NSAIDS), Aspirin**
- **Antidepressants**
- **Opioids**
- **Adjuvant medications--anticonvulsants, stimulants, antidepressants**
- **Cannabis**



Cognitive Behavioral Therapy for Chronic Pain

- **Self management focused**
- **Modifying thoughts, feelings and behaviors**
- **Thoughts about pain can be changed**
- **Promotes change of thoughts and behavior**



Relaxation

- <http://theacpa.org/Relaxation-Guide>
 - Video visual, audio and body relaxation guide
- **Relaxation for natural pain relief**
- **Music, prayer, gardening, going for a walk, talking with a friend on the phone**
- **Deep breathing, guided imagery, self-talk, mindfulness meditation**



Other Treatment Modalities

- **Acupuncture**
- **Massage**
- **Therapeutic touch**
- **Alternative options**



The American Academy of Pain Medicine

Tools to use with patients available:

<http://www.painmed.org/patientcenter/tools/>

- [Daily Activity Checklist](#) (PDF)
- [Prepare For Your Healthcare Visit](#) (PDF)
- [ACPA MedCard](#) (PDF)
- [Pain Log](#) (Online Tool)
- [Pain Log](#) (PDF)
- [CARE Card](#) (PDF)
- [Follow-Up From Your Visit](#) (PDF)
- [Quality of Life Scale - Graphical Format](#) (PDF)
- [Quality of Life Scale - Text Format](#) (PDF)