

Management of Chronic Pain

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When you think about chronic pain, what comes to mind? Those of us who have chronic pain know immediately what chronic pain means. Most of us agree that foremost, there is the overwhelming exhaustion that settles in disrupting mood, energy and ability. Then there is the frustration in trying to deal with the barriers that are created by the actual condition from not being able to open the milk to driving or getting in and out of a vehicle. So we are exhausted, frustrated, irritable and sore. Many of us also experience sadness, connected to a place of loss and grief for “what we were before” the pain.

How do we manage? There are various medications that are prescribed for management of pain and most of us are very thankful for these despite the side effects. But is this all we can do? Fortunately, there are many new options that are emerging based on sound research. Some of these options include the following:

Mindfulness Meditation:

How can this help? First, meditation has nothing to do with religion although specific religions may include types of meditation practice. What meditation can offer is based in science. New research indicates that meditation practice can activate parts of our brains that can “quiet” or bypass the pain in order to access different, more positive emotions thereby improving the quality of our thoughts, mood and improving the ability to rest and sleep. **What does it look like?** Meditation is a skill that is taught and improves with practice. It is the ability to learn to sit (in a chair or the floor), control our breathing and most importantly our thoughts. It is a skill that can be learned on an individual or group basis.

Hypnosis:

Hypnosis is also an effective tool that works for some people for pain control. Similar to meditation in that particular parts of the brain can be accessed that control pain, hypnosis holds considerable promise for many with chronic pain conditions. Recognized in the Eastern world for centuries, hypnosis began to gain credibility in the Western medical world in the 1960’s as doctors watched surgeons perform operations on patients using only hypnosis to control pain and possible shock and no anaesthesia. Since then, hypnosis has gained credibility for a wide variety of medical issues including treatment of depression and IBS (Irritable Bowel Syndrome). In fact, Britain’s Health Service has a specific protocol

that uses hypnosis for IBS. The protocol for this treatment is similar to Michael Yapko's "ice glove" technique where people are taught to hypnotize themselves, turning their own hand into an "ice glove" that they then can use to turn off pain by touching painful areas of their own body. A deep state of relaxation and guided visualization are important components of hypnotherapy. One does not lose consciousness or control and remains awake throughout the process.

EMDR:

EMDR refers to "Eye Movement Sensitization Reprocessing". Originally designed to treat psychological trauma by using bilateral stimulation of the brain through eye movement, this treatment has now shown promise to treat chronic pain. **How does it work?** The theory, very simply put, is that bilateral (two-sided) stimulation of the brain while using a structured (verbal) process results in a "clearing" of negative emotional interpretations of such issues as self, the world and others. Even during the treatment of psychological trauma, people are asked to scan their body for various sensations which can manifest as a pain in the knee or tightness in the chest. Treatment then focuses on these specific areas until a low level or no pain is reported.

Holistic practitioners and massage therapists have long reported that emotions are released through physical touch. Commercials on TV now state that "depression hurts" so the possible interplay between emotions (the brain) and physical pain (the body) is now discussed. **What would a session of EMDR look like?** The EMDR therapist sits beside the person receiving the therapy but faces the opposite direction. An object such as a pen or finger is used to perform various eye movements in certain directions while talking about specific topics that were pre-identified in an interview. For some people, sound can work better and an audio tape that directs sound from one ear to the other is used while others respond better to touch-one hand then the other is lightly tapped by the therapist. EMDR does not work for everyone, but if it does work for you the results can be very positive. A screening interview is necessary before EMDR is used.

Summary: These are only a few of the techniques currently emerging to manage chronic pain. Currently Gentle Path has several practitioners trained in hypnosis and EMDR and is considering the formation of a group to address chronic pain if there is sufficient interest. Let us know what you think!

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