

What Happens in the Pain Clinic? How to Prepare and Review

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Yellow Flags—the warning signs

- Unexpected levels of pain-related disability
- Frequent attendance at GP and at A & E with pain
- Work absences due to pain
- Escalating doses of pain medication with no obvious benefit
- Sleep patterns in tatters
- Family and work life suffering
- Deconditioning and lack of basic fitness
- Secondary gain (child protection may feature here)

The Opioid Crisis (Not!)

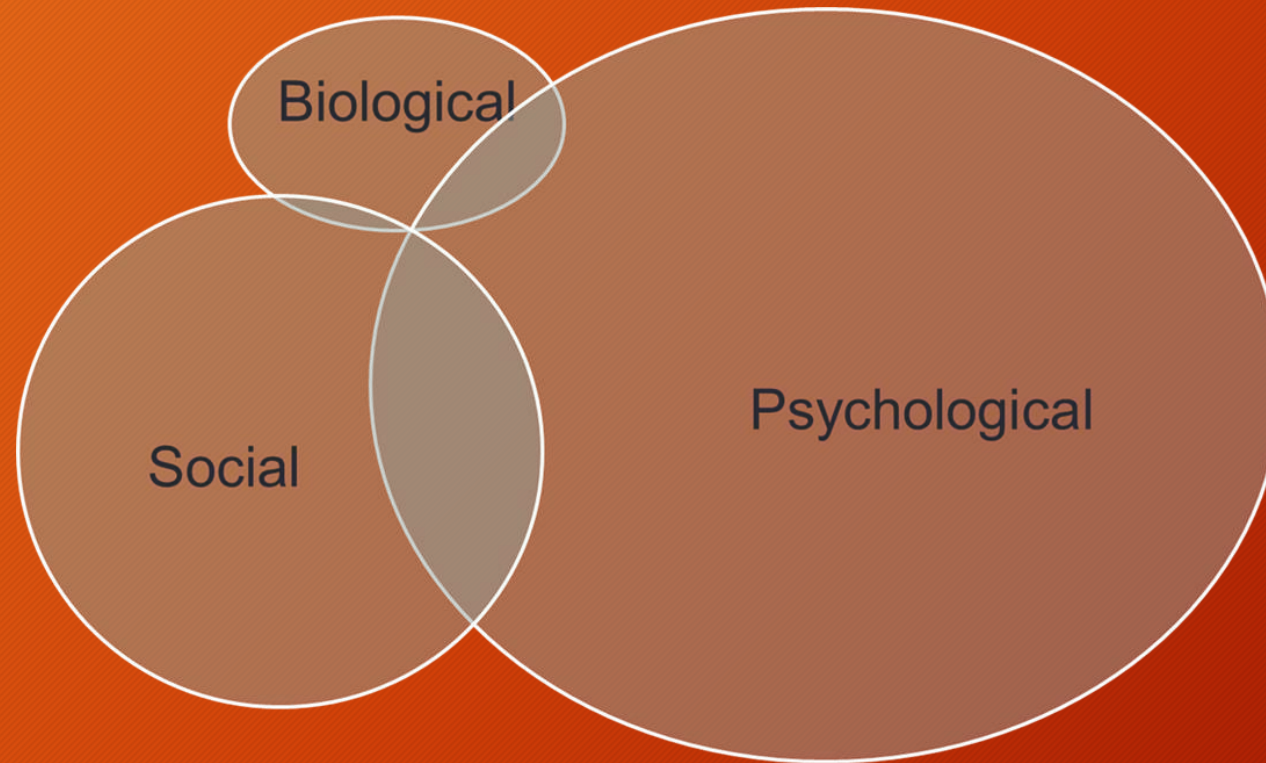
- USA is not UK 😊
- Single point of supply
- Patients presenting at A & E, MIU, OOH for prescriptions
- Escalating dose means that the pain is not responsive to opioids
- High doses may worsen pain
- Short-stay/Daycase surgery leads to strong opioid TTAs. Audit!!!
- Low doses that work should not cause concern
- Testosterone/oestrogen....



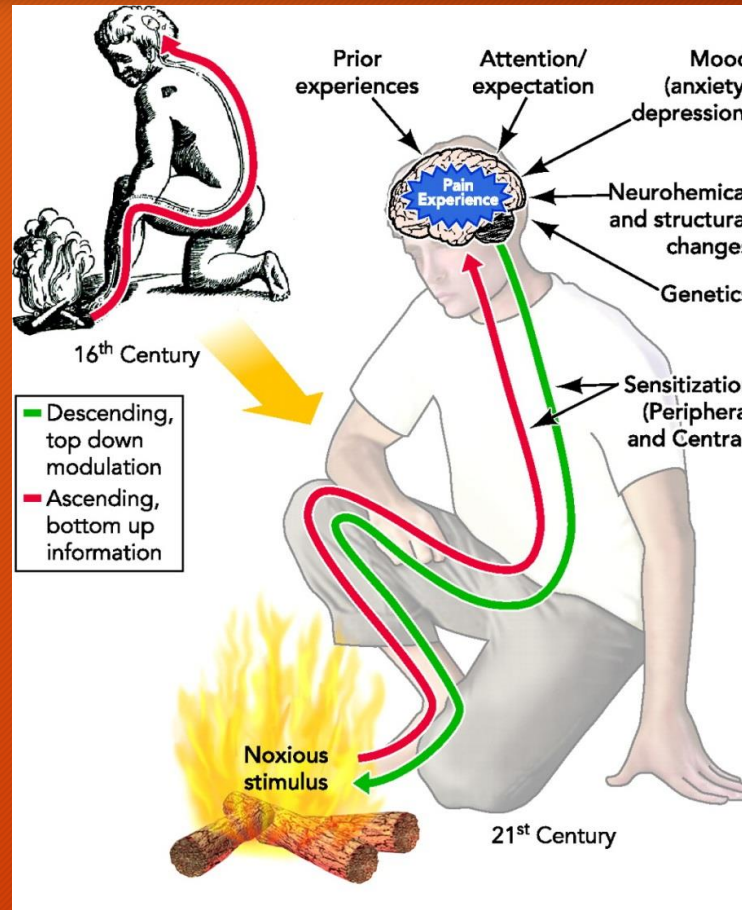
Biopsychosocial Approach to Pain



After a While



We Have Come Some Way Since Descartes



Central Sensitisation

- Pain hurts more than you would expect
- Can result in pain behaviours
 - Fear avoidant
 - Catastrophising
 - Physical deconditioning
 - Life falls apart
- Patient is on a vicious merry-go-round!

The Keele STarT Back Screening Tool

Patient name: _____ Date: _____

Thinking about the last 2 weeks tick your response to the following questions:

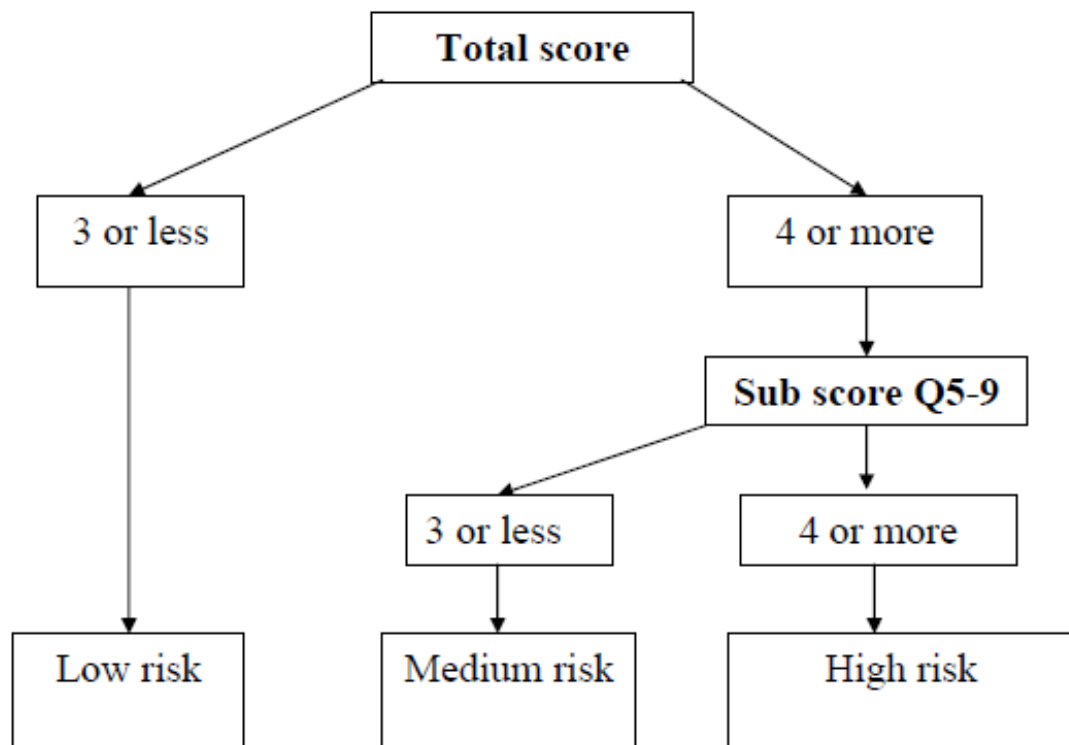
	Disagree 0	Agree 1
1 My back pain has spread down my leg(s) at some time in the last 2 weeks	<input type="checkbox"/>	<input type="checkbox"/>
2 I have had pain in the shoulder or neck at some time in the last 2 weeks	<input type="checkbox"/>	<input type="checkbox"/>
3 I have only walked short distances because of my back pain	<input type="checkbox"/>	<input type="checkbox"/>
4 In the last 2 weeks, I have dressed more slowly than usual because of back pain	<input type="checkbox"/>	<input type="checkbox"/>
5 It's not really safe for a person with a condition like mine to be physically active	<input type="checkbox"/>	<input type="checkbox"/>
6 Worrying thoughts have been going through my mind a lot of the time	<input type="checkbox"/>	<input type="checkbox"/>
7 I feel that my back pain is terrible and it's never going to get any better	<input type="checkbox"/>	<input type="checkbox"/>
8 In general I have not enjoyed all the things I used to enjoy	<input type="checkbox"/>	<input type="checkbox"/>

9. Overall, how **bothersome** has your back pain been in the **last 2 weeks**?

Not at all	Slightly	Moderately	Very much	Extremely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	0	0	1	1

Total score (all 9): _____ Sub Score (Q5-9): _____

The STarT Back Tool Scoring System



BackPack (North Bristol)

- For early intervention in relapsing-remitting back pain
- Once per week for 5 weeks
- Half day per week
- Group
- Clinical psychologist & CBT-trained physiotherapist
- Coping with pain, managing flare-ups, avoiding flare-ups
- No expectation of pain relief
- Referrals direct from primary care (Pain Management Office @ Cossham)

Fix the Thinking!

- Clinical psychologist (not counsellor)
- PTSD
- Jim will fix it...



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Pain from Cervical Facet Joints

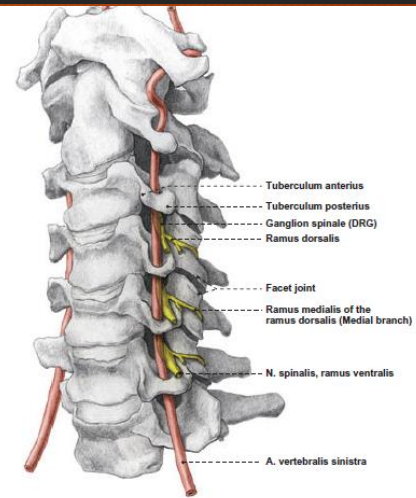


Figure 1. Innervation of the cervical vertebral column and the facet joints (Illustration: Rogier Trompert Medical Art. <http://www.medical-art.nl>).

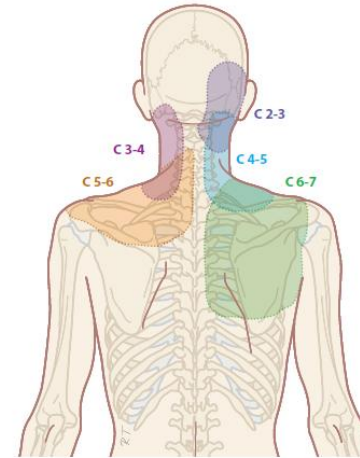
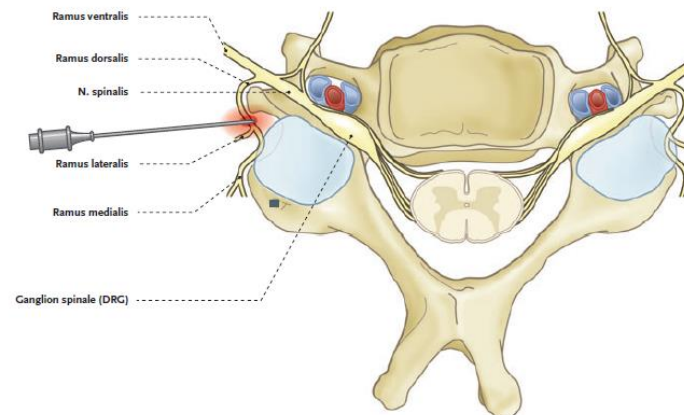


Figure 2. Radiation pattern of cervical facet pain (Illustration: Rogier Trompert Medical Art. <http://www.medical-art.nl>).



Pain from Lumbar Facet Joints

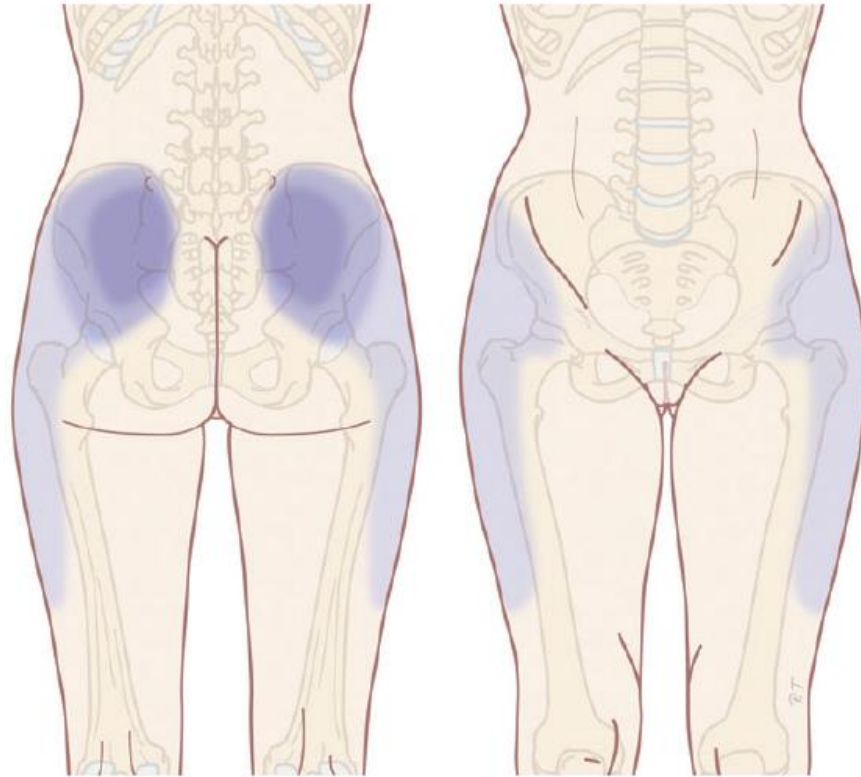
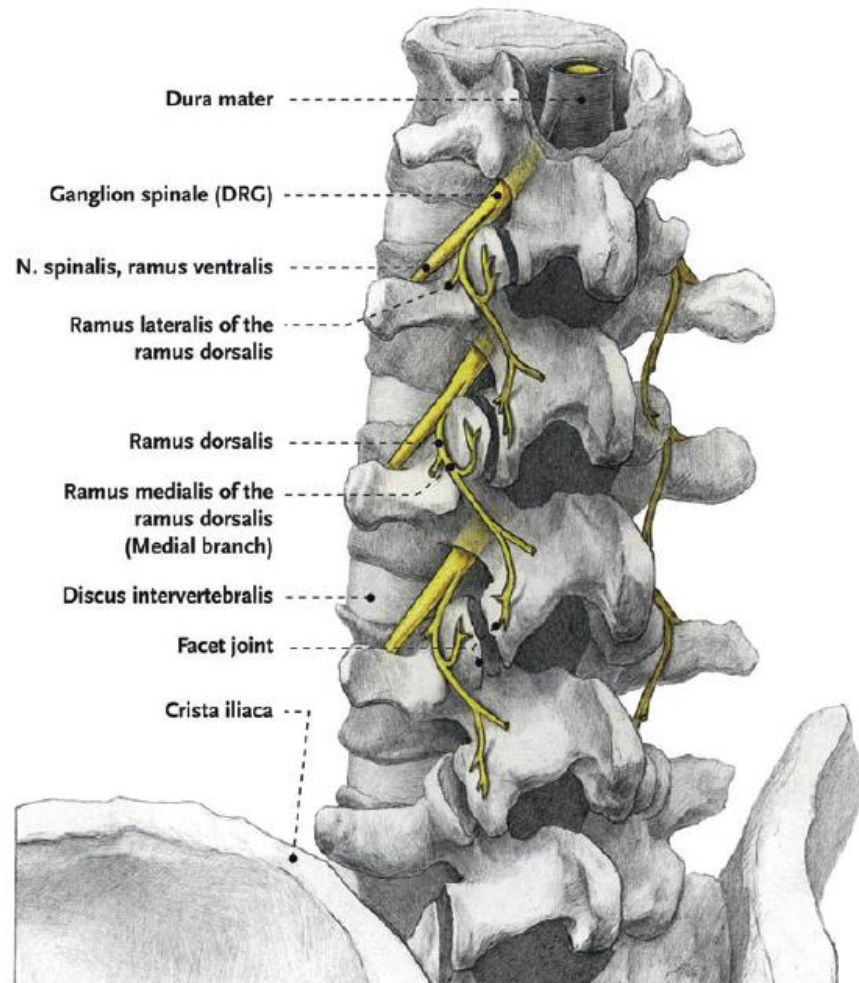


Figure 2. Pain referral pattern of lumbar facet pain adapted from McCall et al.²³ "Illustration: Rogier Trompert Medical Art. <http://www.medical-art.nl>."

Medication

- Amitriptyline low dose an hour before bedtime
- Pregabalin
- Simpler medicines: paracetamol, NSAIDS
- Avoid strong opioids (tramadol and tapentadol can help some patients).

- <http://www.fpm.ac.uk/faculty-of-pain-medicine/patient-information>

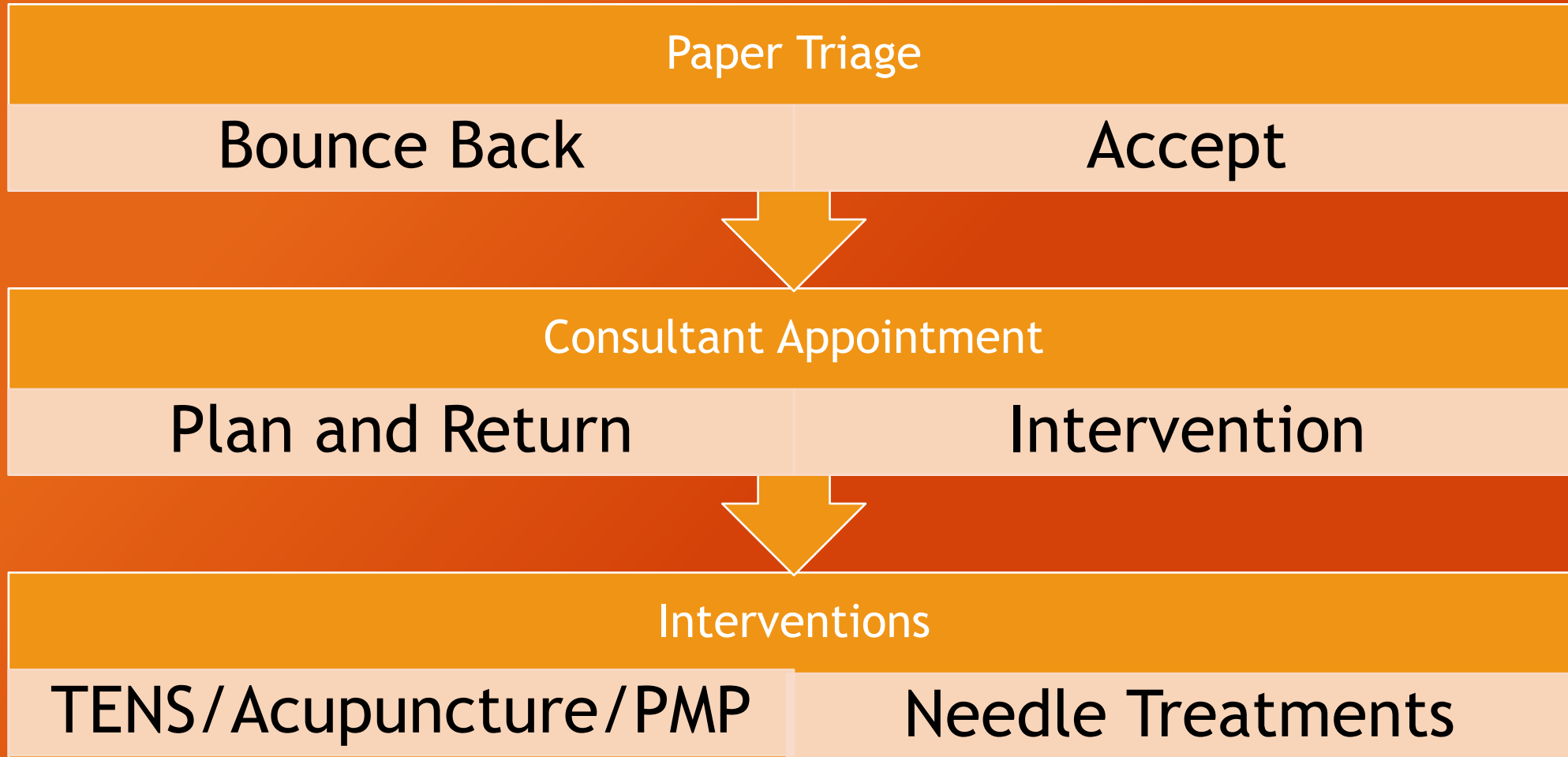
Are they Moving?

- If you have back pain see what happens if you stop using the buzzer
- Prize for underestimating physical activity levels!
- Motivational interviewing can get some moving
- Newer evidence suggests 10,000 paces not needed
- 10 minute interventions
- www.nhs.uk/oneyou/active10

Are they Sleeping?

- Tendency to have inverted days
- Growth hormone and deep, restorative sleep
- Sleep Cycle app
- <https://www.youtube.com/watch?v=ZKNQ6gsW45M>
- Follow Prof Walker's 5 top tips

The Pain Clinic Offering



Pain Clinic Review

- Specialist physiotherapists to coax movement
- Nurse acupuncturists/TENS clinic to coax movement
- Clinical psychologist to deal with:
 - Fear-avoidance
 - Catastrophisation
 - Unhelpful beliefs
- All much easier after consultant assessment
(CCG service reconfiguration may impact on the offering)

Further Options

- 1:1 clinical psychology
- Group work
 - Self Management Programme
 - Pain Management Programme
 - (BackPack)
- Medicines management/reduction
- Ultimately, the goal is self-management

The Bottom Line

- All treatments have one aim:
- GOYA and move
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