



**BEAUMONT
HOSPITAL
FOUNDATION**

PAIN MANAGEMENT

**A Beaumont Hospital
Patient Information Booklet**



Presented by
Dept. of Pain Medicine
Dept. of Physiotherapy
Dept. of Psychology
Dept. of Occupational Therapy

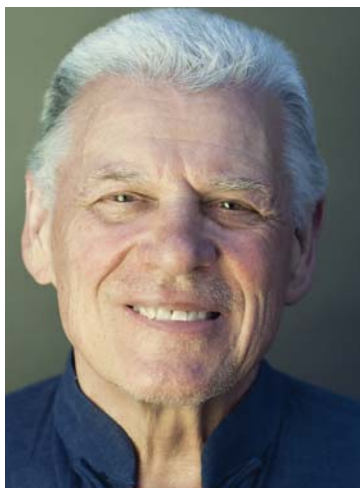


Welcome



Welcome to our information booklet.

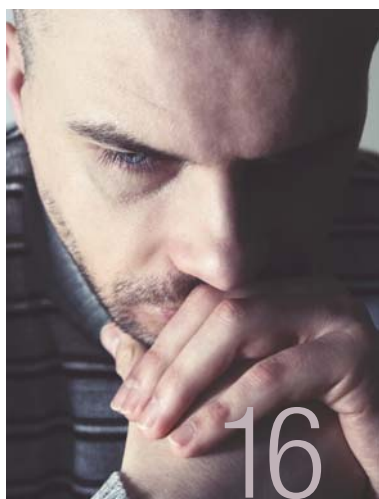
Many people experience chronic pain as part of their lives and learn how to manage it and maintain or improve their quality of life. This booklet is designed to explain the common issues experienced by those who have chronic pain.



We use stories throughout the booklet to help explain these issues. These stories may not be your story, but they are based on the experiences of patients attending Beaumont Hospital and may be of assistance to you in understanding chronic pain.

You can read their stories or go directly to the information you are looking for from the contents list on the next page.





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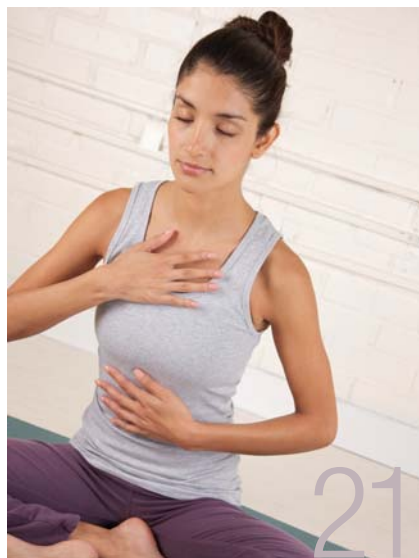
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What is Chronic Pain?

We normally think that pain is there for a reason and will be of some biological value or warning system. Chronic pain is different from this as it often lasts beyond the normal healing time and seems to be of little use to us. It can affect our day-to-day life, which is very frustrating, causes suffering and can lead to low mood.

Chronic pain is pain which lasts longer than 3 months, or what we believe would be the normal length of time for an injury to heal. The actual cause of your pain may be unknown; perhaps it started gradually or was a sudden onset by some emotional or traumatic event in the past. It may be as a result of a chronic condition. It may start with a definite problem at a certain time or come on gradually, perhaps for no obvious reason. It may even come on some time after an event – where you have managed an activity at the time but you feel pain afterwards.



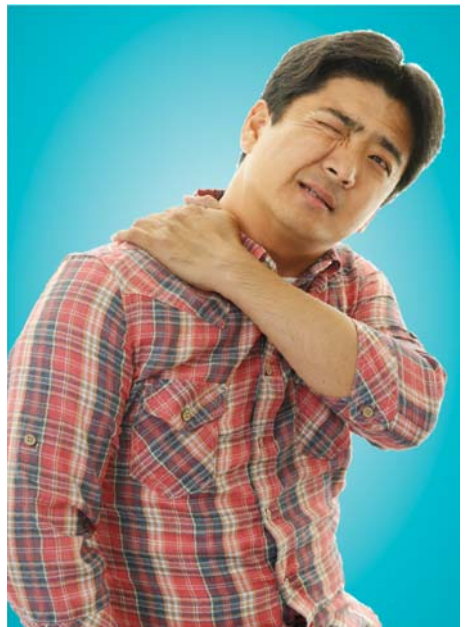
Chronic pain can be felt in a specific part of the body, e.g. back, shoulder, legs, or more generalised, throughout the body. Your pain may be continuous or intermittent and it may sometimes be prone to flaring up or getting worse very quickly.

Brian's story

Brian was on his way to his sister's wedding. He was excited and maybe a little nervous about standing with her at the top of the church. A busy man with a family of his own, it was great to take a little time out to concentrate on a happy occasion.

Then, out of nowhere, Brian's car was involved in an accident. Two years on, and Brian still has pain that begins in his neck and radiates down his right arm. Sometimes the pain is uncomfortable, and sometimes it is unbearable.

Brian has had one treatment after another and now he is being told he has 'chronic pain.'



WHAT DOES THAT MEAN?

Anna's story

Anna has no idea what caused her initial back pain. She wasn't involved in an accident and doesn't remember doing anything to hurt herself.



Anna's pain started in her lower back and just seemed to get worse and worse. As a mother, wife, and employee in a law firm, Anna has just tried to get on with things and push through the pain. After a year of attending her G.P. with the pain, Anna is feeling frustrated and upset. She feels like she has failed. Her doctors have recommended that she learn how to 'manage' her pain.

WHAT DOES THAT MEAN?



Living with chronic pain can be stressful. You may feel you have no control over the pain or feel like you can't cope.

Worrying about the future and communicating about your pain at home or work can be difficult. Frustration, troubling thoughts, and feeling hopeless or down are often feelings people with chronic pain report. Not only can pain affect how you feel; how you feel can affect your pain. It can become like a vicious cycle.

Learning to manage your pain often involves learning life skills about things such as pacing, goals setting, and communication.

Learning these skills does not necessarily change your pain, however you can learn to manage your life.

Mary's story



Mary had surgery two years ago to remove a tumour from her breast. Unfortunately this proved to be cancer, but following radiotherapy and chemotherapy treatment Mary was now doing very well and her prognosis was excellent.

Unfortunately Mary has a terrible burning sensation over her surgical scar, and finds it difficult to wear loose

clothing as the feel of anything brushing against the area is awful. She feels guilty complaining because after all she is now cancer free, but the burning pain is disturbing her sleep and she is not inclined to go out anymore.

Why does her scar feel like it is burning and sending out electric shocks? It is not like any pain she has ever known before.

I feel trapped by my scar – the cancer is gone, I should be able to go out and enjoy life...how can I get my family to understand how unpleasant this feeling is, it's constant, consuming. It's all I can think about.

Are there Different Types of Pain?

Yes there are 3 categories of pain.

- **Nociceptive Pain** – this pain is divided into pain of the body surface, muscle, joints, bones and ligaments and pain associated with the internal organs and is typically described as sore or aching in nature.
- **Neuropathic Pain** – occurs following direct injury to the nerves in the peripheral or central nervous systems. Neuropathic pain can result from complete or partial nerve transection (when a nerve is cut), nerve compression (when something is pressing on the nerve) or infection, inflammation or ischemia (when there has been reduced blood supply to an area). This pain is often described as a burning, hot, crawling or electric shock sensation
- **Idiopathic Pain** – this is the term for pain that has no apparent underlying cause. This type of pain is not **nociceptive**, **neuropathic** or even **psychogenic**. Though its origin is often a mystery, idiopathic pain is very real and is not all in your head.

Mixed Category Pain – This is the term for pain that appears to be caused by a mixture of nociceptive, neuropathic and idiopathic pain



Peter's story

Peter had very serious surgery following a major illness and was treated for pain in hospital and then later on as an outpatient. In hospital, he had a mixture of pain medications that were managed by the hospital staff. Following his discharge, Peter was given a number of prescriptions to manage both his physical symptoms of illness and his pain.

Sometimes, Peter can go for a stretch without any pain, but when his pain returns he reaches for his medication. Over time though, Peter feels his pain medication isn't working as well as it did and that has him worried. Peter doesn't want to become dependent on his pain medication and the idea of having to take medication for a long time is frightening.



Medication

Regular medication can help ease the pain and your doctor will be able to advise you on this. Unfortunately it can sometimes be a bit of a struggle finding the right medication to suit you.



It is a common misconception that taking regular painkillers will mask pain and make you more vulnerable to damage – this is not the case. If painkillers help ease your pain you should be able to be slightly more active which will reduce your risk of long term pain.

It is important to remember to take your pain relief medications regularly – don't wait until the pain is really bad because then you are playing catch up with your pain relief and this is often when patients think a pain medication has not worked – the result of which is you might decide this pain medication is no good and look for something stronger.

Stronger medications often have difficult side effects which can be avoided by taking simpler medication more regularly.

What Medication is Available to Help My Pain?



Short-term pain, which will disappear by itself over time, is normally treated with standard painkillers such as paracetamol or anti-inflammatories like ibuprofen. You can buy these over the counter from pharmacies.

Your own GP may also prescribe stronger medication which may be opioid-based (for example codeine and tramadol). Some of this medication may help in managing chronic pain, and sometimes medication not typically associated with pain may be used. These medications include anti-depressants and anti-convulsants which are known to be of benefit in some types of chronic pain – for example nerve pain which is burning or crawling in nature.

No medication is effective for everyone and all medication can have side effects, sometimes to the point that you cannot continue to take it. Give your body a chance to get used to side effects before making a decision to stop taking

medication. Usually the benefits of medication are more important than minor side effects, which sometimes go away after a short while.

Most people though, get some benefit from at least one medication. You may need to go through a lot of trial and error to get the best medication for you.

When you take medication for pain, it is important to remember that it might not relieve your pain straightaway. It may take some time, perhaps even several weeks, for medication to work and you may have to start at a low dose and build this up. You should not stop taking your medication or change the amount you take without discussing this with your doctor.

Stopping some medication suddenly can cause withdrawal symptoms such as sleep problems, feeling sick, dizziness and headaches.

Exercise

Teresa's story

Teresa is a mother of five and a grandmother of twins. She does as much as she can for her family but finds that the only thing that helps her pain is rest. Teresa has pain in her joints, especially in her wrists and ankles, that keeps her from doing what she would like to.

At her last few appointments with the GP, Teresa's doctor suggested that she would benefit from some gentle exercise, and told her that regular exercise can actually improve pain over time. After the first suggestion, Teresa tried taking a walk with her daughter and the next day, she paid the price! Her joints felt sore and swollen and she was exhausted.

Since then, her doctor has recommended that she meet with a physiotherapist, but Teresa wonders, "What is the point?"



The doctor is right that gentle and regular exercise is recommended for people who live with chronic pain. The key is to find a balance so you don't flare your pain up or become inactive. Inactivity can cause stiff joints and sore muscles.

A Chartered Physiotherapist can teach you about different forms of physical activity including aerobic exercise such as walking, strength exercises such as repeatedly sitting and standing from a chair, and flexibility exercises such as a calf muscle stretch. Mostly, a physiotherapist will help a person to understand what amount of physical activity they are able to do without flaring their pain up and to make goals around this to slowly and gently build up fitness.

Common Barriers to Exercising

Common barriers to starting exercise include thinking that you don't have time, that exercise will make you more tired or more sore, or that exercise needs special equipment or gym membership.

Exercise doesn't need to take a lot of time, even 10 or 15 minutes a day is a great start. An important tip is to set aside a regular time on most days of the week to build exercise into your routine. It is also advisable to keep a record of your exercises so you can record your progress, and learn about what suits you. Most people use a diary for this purpose.

Exercise can actually give you energy and help you to feel less listless and tired, especially as you get fitter. If you feel more fatigued or pain when you finish exercising than before you started, you may need to be less vigorous the next time. Seek the advice of a Chartered Physiotherapist or a doctor who can help you choose specific exercises suitable for you and guide you towards starting levels. It is okay to feel slightly more sore or more tired during and shortly after exercise. Physical activity should be planned so it does not continuously increase your fatigue or pain intensity.

Exercise can really be done anywhere. For example neck and shoulder stretches can be carried out on the bus or at your desk at work, leg stretches can be done by the sink as you brush your teeth, and taking the stairs instead of the lift is a great way to get physical activity into your day. Walking is one of the best forms of physical activity and only requires a comfortable pair of shoes or runners.

Common Problems	Possible solutions?
Fear of worsening pain	It's OK to feel slightly more sore during and shortly after exercise. The key is to plan physical activity so it does not continuously flare up your pain.
No time	Even 10 or 15 minutes a day is a great start. Set aside a regular time on most days of the week to build exercise into your routine. Use a diary to record your progress.
Too tired	Exercise can give you energy and help you to feel less listless . You will need to use pacing in your day to have enough energy for exercise and everyday activities.
No money for expensive equipment	Free exercise can be done anywhere if you prioritise it, e.g. neck stretches at your desk, leg stretches as you brush your teeth, taking the stairs instead of the lift. Walking is a great exercise that only requires a comfortable pair of shoes or runners.

Exercise

As little as 15 minutes of moderate intensity activity every day can have long-term benefits.



Getting Started – 5 Key Points

1. It's **OKAY** to have some pain during and shortly after exercise, but physical activity should be planned so it does not continuously increase pain intensity.
2. **START LOW AND BUILD SLOW.** Begin with low intensity movements that are within your capabilities. Slowly increase the frequency, intensity or amount of time you spend on the movement.
3. Take **BREAKS** in between exercise for recovery.
4. Make it **FUN.** Do something you enjoy.
5. Mix your exercises so you are getting a **BALANCE** of aerobic, strengthening and stretching.



The 3 Main Types of Exercise

1. Aerobic Exercise

This type of exercise makes your heart and lungs fitter, and can release the body's natural painkillers called endorphins. It includes activities such as walking or taking the stairs. You can start with as little as 5 or 10 minutes of walking, and aim to build up your fitness over a few months to 30 minutes of walking most days.

2. Strengthening Exercise

This type of exercise makes muscles stronger by challenging them to work harder than they are currently able. It includes exercises such as sitting and standing from a chair, gradually increasing the number of repetitions. Aim to get to between 6 and 10 repetitions of a strengthening exercises for 3 sets, approximately 2 to 3 days per week.

3. Stretching Exercise

This type of exercise loosens out tight muscles and stiff joints. It includes turning your head to try look behind you, bringing your knee to your chest, or calf muscle stretches. Gentle stretches are usually held for at least 5 seconds, but can be up to 30 seconds and repeated a number of times.



Pacing and Lifestyle Change

Tadhg's story

Tadhg has been treated for Crohn's disease for the past ten years. He has times when the condition does not affect his lifestyle and other times when he is hospitalised due to a flare-up.

Over the past 18 months Tadhg has had constant pain in his stomach and bowel that he has had to manage on top of everything else going on in his busy life. Tadhg is exhausted. He knows he should be exercising and so sometimes he pushes himself to do a big run or workout but it doesn't seem to help.



On days when he feels okay he tries to get as much done as he can, but when he isn't well every little thing seems overwhelming. Even going to bed at night has become a chore, as he sometimes finds it impossible to sleep even though he is so tired all the time. On his bad days, Tadhg spends his time on the couch, watching television or resting.

What is Pacing?

Pacing is a technique that you can use to gradually increase your level of activity.

Many people find that they have good days and bad days. You may feel that on bad days all you can do is rest. However doing this for more than a few days means you lose fitness, and pain and fatigue can worsen.

On good days the temptation is to try to do everything: catch up on housework, meet friends, dig the garden. However, it's easy to overdo it, making yourself more tired or sore and needing to rest again. A vicious cycle develops.

Pacing your activities breaks this cycle. It is not an easy skill to learn as we all like to get things done quickly.

How Do I Use Pacing In My Life?

1. Pick an activity that you find difficult, but not impossible, eg. walking, gardening, driving.
2. You may have to break down an activity into manageable chunks.
3. Decide the amount of time that you can easily and comfortably do this activity (or part of it).
4. Practice doing the activity for that amount of time every day, on good days and bad days.
5. Then gradually build up the amount of time you spend on the activity.
6. Never do more than you have planned.
7. Keeping a written account of your times will help you to see how much you are improving.
8. Practicing how to set **GOALS** can make sure you achieve what you have set out to do.



How Do I Set Goals?

Goals need to be realistic and achievable. If you are not confident that you can achieve your goal, don't worry – just change it to make it more realistic!

I felt so guilty for not being able to pull my weight around the house. When I had a good day I would do as much as I could. I would always be more exhausted and sore the day after. Dividing up tasks and doing only what I had planned to do meant I was able to do something every day. Pacing really does work!



Sleep



When we sleep, our bodies secrete hormones that help the body heal and repair. Quality sleep is important for people with chronic pain as it helps the body and mind to recover.

However, people with chronic pain often find that they have trouble sleeping. Getting good sleep is not always easy. Sometimes the more you try to sleep, the harder it becomes. This can increase stress levels, which in turn makes it more difficult to sleep. It's like a vicious circle. Developing good sleeping habits can help.



I used to get anxious about going to bed as I knew I would be lying there awake for hours. Now I do breathing exercises in bed and even if I don't sleep for the full night I feel more relaxed and rested



If I don't get a good night's sleep I find it hard to cope with the children and then I sometimes get short tempered.

10 Healthy Habits for Good Sleep

1. Go to bed at the same time every night.
2. Get up at the same time every morning. Even on weekends.
3. Avoid tea, coffee, alcohol and cigarettes for 4 hours before bedtime.
4. Try not to nap during the day.
5. Wait until you feel tired before you go to bed. If you are not sleepy, do something else like read a book or listen to soft music to distract your mind.
6. If you are a light sleeper, use earplugs.
7. Find out what bedtime ritual helps you to relax before bed, it may be a warm bath, relaxation or breathing exercises.
8. Do not read, eat, or watch television in bed.
9. Be aware of the message you give yourself about bedtime – don't go to bed expecting not to sleep.
10. Try to deal with things that make you worry. If you tend to experience anxiety or depression talk to a health professional.



Coping Strategies

Mark's story

Since his knee injury, Mark has had to put up with a lot of change in his life. Cutting back at work, taking time out for doctor's appointments, dealing with medication, not being there for his family like he was before – at times it feels like he is a shadow of his old self.

Sometimes, Mark wonders what his life would be like without this pain that he has to manage every day. He misses playing football with his team and he doesn't even like to see his old friends anymore because he feels like he has let them down.

Mark doesn't want anyone's pity or concern. He wants to feel like a member of the team again, like nothing ever happened to his knee. It can be hard connecting with people again. He feels like he has nothing good to talk about.



Promoting Resilience

There are a number of things you can do to improve your ability to cope.



- Incorporate relaxation into your daily routine. Relaxation involves slow, deep breathing to release tension from muscles and relieve pain. Learning to relax takes practice, but over time relaxation training can focus attention away from pain. You will find relaxation resources and guided meditations at www.beaumont.ie/marc and www.beaumont.ie/painclinic
- Use imagery, such as visual, sound or other pictures and thoughts to provide a pleasant and relaxing experience and as a way to manage pain. Resources to help you develop these skills are again available at www.beaumont.ie/marc
- Develop a repertoire of coping statements. For example: "I have power over my situation to steadily change and improve it." "I can replace my losses with new things to do, and who knows, I may find something I like better!" "The pain comes and goes,

I know how to take care of it."
If stressed – tell yourself: "When I calm down and relax a little bit, I will assess my issue/situation again."

- Distraction, through learning to focus your attention outwards on other people, objects or events happening in your environment can be a good short-term strategy for managing



- pain.
- Make time to connect with others and ensure you have a regular social outlet. Connecting with others can take many forms, from meeting up with friends, to taking up a new activity or hobby. What's important is it's something that interests you and brings you joy.
- Sometimes when we have been burdened for long periods we can lose sight of the importance of kicking back and having fun. It is important to prioritise having fun, in whatever form

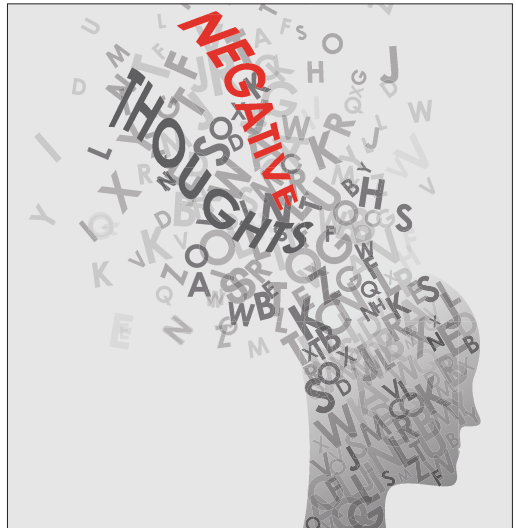
Hitting a Speedbump

When people are feeling low their thinking can become very biased and negative. These negative thoughts appear spontaneously and frequently. They are called negative automatic thoughts (NAT's) and are usually focused on one of three areas:

1. **Themselves** – typical thoughts are “I’m a loser”, or “I’m useless.”
2. **Their world** – typical thoughts are “No-one cares about me,” or “My job is crap.”
3. **Their future** – typical thoughts are “It will always be this way”, or “I’ll never find any friends.”

Negative automatic thoughts lead to depression, and depression leads to more negative automatic thoughts. This sets up a vicious cycle and a downward spiral. The depression then becomes self-sustaining. This is why it is important to learn how to overcome these negative automatic thoughts.

The first step is to become aware of these thoughts. To start to tune into these thoughts, notice what goes through your mind when you have a strong feeling or reaction to something. Ask yourself:



- What was going through my mind just before I started to feel this way?
- What does this say about me if it is true?
- What does this mean about me, my life, and my future?
- What am I afraid might happen?
- What is the worst thing that could happen if it is true?
- What does this mean about how the other person(s) feel(s)/think(s) about me?
- What does this mean about people in general?

Managing Thoughts and Moods

In managing our thoughts and mood, it can be helpful to become aware of, and tune into, some thinking traps that we can all fall into. Challenge your thinking by asking yourself, am I:

- **Catastrophising** (also called “fortune-telling”): predicting the future negatively without considering other, more likely outcomes.
- **Overgeneralising**: Expecting everything to be awful always because of one bad experience.
- **Thinking in Black-and-White**: This means losing sight of moderate or “grey” areas in life. For example, assuming that you have failed because you have not achieved 100% success or assuming that you have lost all control because you are not in complete control.
- Setting high standards or seeking **Perfectionism**: Expecting too much of yourself or others, e.g. *“I really should be able to...”*
- **Magnifying and Minimising**: Unreasonably magnifying the negative or unreasonably minimising the positive.
- **Mental filtering**: Paying undue attention to one negative detail instead of seeing the whole picture.
- **Personalisation**: Taking events too personally. You believe others are behaving negatively because of you, without considering more plausible explanations for their behaviour, e.g. *“My boss is in a really bad mood today, it must be something I’ve done.”*
- **Labelling**: When you attach a fixed, global label to yourself or others without considering that the evidence might more reasonably lead to a less disastrous conclusion. Labelling has the potential to become self-fulfilling, e.g. *“I’m a failure, therefore I’m not going to bother trying.”*
- **Emotional Reasoning**: You think something must be true because you “feel” it so strongly, but in doing so ignoring or discounting evidence to the contrary, e.g. *“I know I do a lot of things okay at work, but I still feel like I’m a failure.”*
- **“Should” and “must” statements**: You have a precise, fixed idea of how you or others should behave and you overestimate how bad it is that these expectations are not met. e.g. *“It’s terrible that I made a mistake. I should always get it right.”*



Managing Fear about the Future

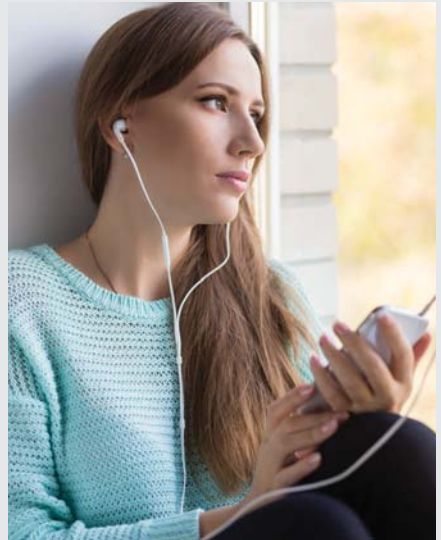
Develop your skills in staying present in the 'here-and-now' through the use of:

- Breathing
- Relaxation
- Imagery
- Distraction

Stick to a regular routine and structure. Look for connections between the activities you do and your mood.

Develop a repertoire of things you can do to soothe yourself during times of pain and distress (e.g. taking a bath, using incense, playing a game, listening to music, reading a book).

Learn to challenge your thinking over time. You can use Managing Thoughts and Moods, on previous page, as a tool to help you do this. There will also be a range of other self-help resources available in your local library.



STRESS

Living with long-term pain is very stressful.

How Does Stress Affect Our Lives?

- **Physical:** Aches and pains, dry mouth, feeling tired, muscle spasms, tight chest, easily startled, palpitations and headaches.
- **Behaviour:** Avoiding things that may make the pain worse, being restless, sleeping poorly, arguing with people.
- **Feelings:** Snappy, frustrated, angry, fearful, hopeless and lonely.
- **Thinking:** Worrying thoughts going around in your head, poor concentration and memory, negative thoughts.



Learning Relaxation

Holding tension in the body is a natural response to the body's alarm or danger system. When we feel anxious or stressed our breathing rate increases, as does our blood pressure, heart rate, muscle tension and adrenaline flow.

People with long-term pain usually have a heightened or sensitive "alarm" system, and therefore learning to unwind and bring tension or anxiety

under control is a useful tool. It is a good idea to practice regularly as, like fitness, relaxation is a skill that needs to be learned so you can call on it when you need it most.

A great tension releaser is learning to breathe in a relaxed fashion. If we are stressed or in danger, we tend to breathe in a shallow way.

How to Practice Relaxed Breathing

- Sit comfortably in a chair or on the floor, in an upright but relaxed position.
- Place one hand on your chest and one on your tummy around your navel.
- Take a slow and steady breath in.
- Feel your tummy expand while you breathe in.
- Breathe out slowly, emptying your lungs completely. Don't exaggerate the breath, just let it happen but as you practice you should find that your breath is a little slower and a little deeper.



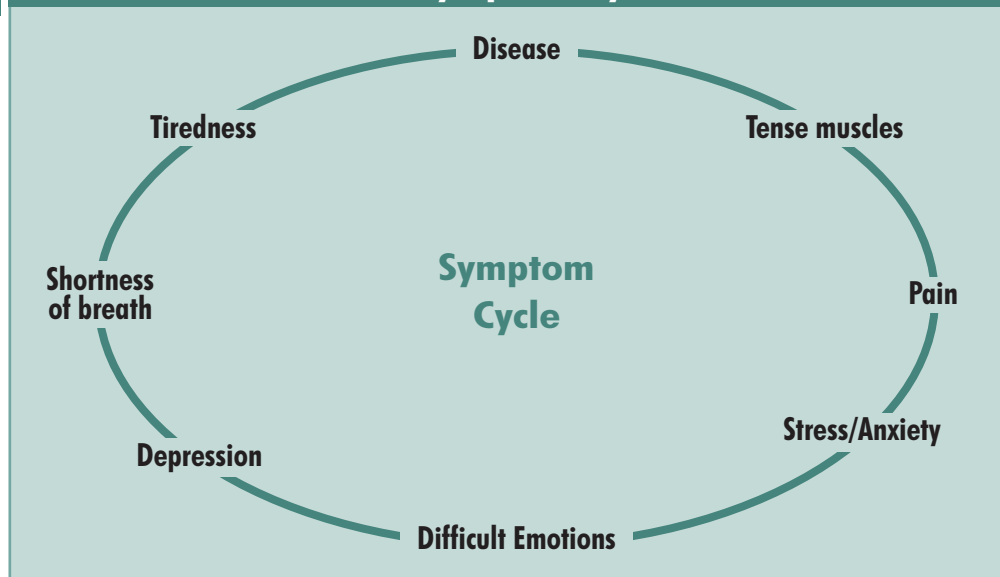
Beaumont Hospital has an excellent Mindfulness and Relaxation Centre on the website www.beaumont.ie/marc

There are various guided relaxation exercises, relaxing music, and mindfulness practice for you to choose from including relaxation breathing.

Managing Pain and Associated Symptoms

People with chronic pain can experience a range of different symptoms; some may be due to their pain condition and some may not. However they may become interlinked.

The Symptom Cycle



(Adapted from Stanford University CDSMP)



For example, people who suffer with chronic pain may experience some depression, which may lead to tiredness which will in turn lead to more pain.

However, there are tools you can use which can help to break this vicious cycle and relieve or help some of your symptoms. You can see these tools in your tool box, on the opposite page.

Tool Box

This tool box has the tools to help you become effective at managing your own symptoms, as well as breaking the symptom cycle mentioned on the previous page.

Physical Activity

Medications

Problem Solving

Managing Fatigue

Understanding Emotions

Modifying Activities

Using Your Mind

Planning

Sleep

Managing Pain

Goal Setting/Action Planning

Healthy Eating

Working with Healthcare Professionals

(Adapted from Stanford University CDSMP)

Using these tools will help you to reduce some of your symptoms. For example, if you can use your tool box to 'understand your emotions' then you may help to reduce your depression. Using these tools in order to manage a symptom you may experience can have knock-on effect on other symptoms. For example, if you have used your 'understand your emotions' tool and subsequently helped to reduce depression, you may now sleep better which could mean that your pain is probably not as bad as it was before.



If you are interested in getting more guidance in using these tools as to be referred to Beaumont Hospitals "Better Health, Better Living" programme. You can also self refer by contacting the Department of Psychology – (01) 809223.

Pain Management Diary

What is a Pain Management Diary?

This is a written record of how your pain affects you and your daily activities. It may help you to describe your pain to your healthcare team and how it has been affecting you over time.

A pain diary also records how medicines, other therapies and your activities affect your pain levels throughout the day.

Why should I keep a Diary?

A pain diary can help you, your healthcare team and family:

- To understand what makes your pain worse and what helps to relieve your pain.
- To track your response to your pain management plan (pain medicines, physiotherapy etc).

When should I use a Pain Diary?

Use your pain diary as often as you feel the need to record your pain. This may include when you have ongoing pain, changes in your activity levels, and changes in your medicines or when you experience a flare-up in your symptoms.

The information you record will help you and your healthcare team to design the most appropriate management plan for you. When and if your pain is under control you may not need to use the diary as often.

How do I complete a Pain Diary?

On the next page you will find a sample pain diary record sheet. Record all the information that is relevant to your pain in the columns provided. You may not need to fill out all columns each time.

To complete the diary use the rating scale below to rate your pain. A zero (0) means no pain, and a ten (10) means the worst possible pain you can imagine. Select the number along the scale that best describes your pain.



There is also the **PQRST** approach, which may help you to describe your pain:

Palliative (relieving) and **provocative** (exacerbating) factors: What makes it better? What makes it worse?

Quality: What is it like? (e.g. burning, shooting)

Radiation: Does it go anywhere else?

Severity: Pain score between 0 and 10?

Timing: Is it there all the time? Does it come and go? What brings it on?

[illegible]

Family Planning

Siobhan's story

Siobhan has been dealing with illness and pain over the past five years. She feels good about how she is coping with her life and managing her pain. It is difficult at times, but she has learned a lot over the years about how to manage.

Siobhan and her partner, David, have been thinking about starting a family, and now Siobhan is starting to wonder about the next phase of her life. With the pain she has, how would she manage a pregnancy or even giving birth? With her current medication, should she become pregnant? How is pain managed throughout a pregnancy?

These are the questions going around in Siobhan's head. Her life is so different now than what she had expected five years ago, what will it be like in another five years? Suddenly, Siobhan is wondering about her future with chronic pain. What will it be like?



**Chronic Pain does not mean that you should not think about starting a family.
Talk to your GP about your plans.**



Medication Strategies

If you become pregnant while on medication for chronic pain consult your GP immediately who will advise you on what medications are safe to take, and what medications you may need to stop!

Not all pain medications will need to be stopped and your GP will also be able to advise you on other strategies that may help you with your pain management.

Don't forget to contact groups like Chronic Pain Ireland where you will find advice and support and may be able to make contact with someone who has had similar experiences.



Useful Resources

Useful Youtube Clips and Videos

www.youtube.com/watch?v=gy5yKbduGkc

YouTube: Understanding Pain in 5 minutes.

Dr Mike Evans talks about Chronic Pain in a very informative and animated clip.

www.youtube.com/watch?v=B14_2TS7RHM

Central London Community Healthcare NHS Trust explains pain in a practical and visual way (6 minutes long).

www.youtube.com/watch?v=I6402QJp52M

YouTube: Understanding stress.

Dr Mike Evans talks about the single most important thing you can do to manage your stress (11 minutes long).

Helpful Websites and Web Based Resources

www.paintoolkit.org

The UK NHS has commissioned a Pain ToolKit app and Pain Management Programme from the creators of this website.

www.beaumont.ie/marc

Beaumont Mindfulness and Relaxation Centre website has a huge range of audio clips to introduce you to mindfulness and relaxation practice.

www.beaumont.ie/painclinic

Beaumont Hospital pain management webpage detailing clinic times, general pain management information and simple exercise videos for you to follow.

www.irishpainsociety.com

The Irish Pain Society promotes education and training in research and development of chronic pain problems. The website has information for health professionals and people living with chronic pain.

www.chronicpain.ie

Chronic Pain Ireland strive to create a greater awareness of Chronic Pain and to provide relevant information and support for those living with the condition, for their families and friends.

Useful Resources

Exercise and Fitness Resources

www.getirelandactive.ie

A user friendly website promoting physical activity in Ireland. It includes information on weight management and information on national programmes.

www.passportforleisure.ie

Passport for Leisure is a special initiative for people over 55 and entitles you to discounts at certain swimming pools and leisure centres in Dublin, e.g. 'Pay as you go' for €2.20 and monthly membership for €11 at Dublin City Council Leisure Centres (Ballyfermot, Ballymun, Finglas, Markievicz, Swan).

Operation Transformation – www.rte.ie/ot

This well-known website follows the TV programme with information on weight loss, healthy eating and exercise.

Tips on how to prepare for a Healthcare Professional appointment

- Bring a list of your current medications (names, doses, and times in the day you take them).
- Bring a list of any questions you may have.
- If you have changed your GP please bring your new GP's name, address, and phone number.
- If you have any scans that were not done in Beaumont Hospital please bring a copy of the written report with you (your GP will have a copy).
- If it is your first visit you will be asked about other doctors you may have attended and what type of treatments you have tried in the past.
- You may be asked about what makes your pain worse or better and how it is affecting your life so have a think about these things before you come.
- Wear comfortable clothing as you may need to be examined.

Medication

[illegible]

X-Rays / Scans / Tests

[illegible]

Notes

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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