

Chronic Pain

How do you eat an elephant?

Rachel Dolman
Senior Clinical Pharmacist
North Wilts Border PCN



Quiz



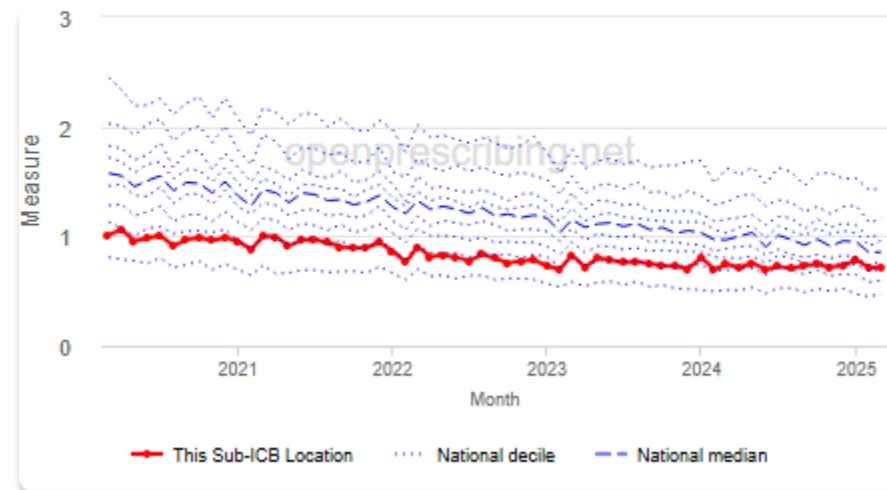
<https://forms.office.com/e/fNpBjCAVAW?origin=lprLink>



Opioids with likely daily dose of ≥ 120 mg morphine equivalence per 1000 patients

High dose opioids per 1000 patients

Opioids with likely daily dose of ≥ 120 mg morphine equivalence per 1000 patients



<https://openprescribing.net/measure/opioidper1000/sicbl/92G/#opioidper1000>

High dose opioids per 1000 patients
BATH AND NORTH EAST SOMERSET,
WILTSHIRE | OpenPrescribing



The currently accepted definition of pain was originally adopted in 1979 by the International Association for the Study of Pain (IASP)

1979 Definition of Pain
 An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage

2020 Revised Definition of Pain
 An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage

2020 Revised Definition of Pain Notes

- Pain is always a personal experience that is influenced by varying degrees by biological, psychological, and social factors
- A person's report of an experience as pain should be respected
- Pain and nociception are different phenomena. Pain cannot be inferred solely from activity in sensory neurons
- Although pain usually serves an adaptive role, it may have adverse effects on function and social and psychological well-being
- Through their life experiences, individuals learn the concept of pain
- Verbal description is only one of several behaviors to express pain; inability to communicate does not negate the possibility that a human or a nonhuman animal experiences pain

In 2018, IASP constituted a 14-member multi-national task force with expertise in clinical and basic science related to pain, which sought input from multiple stakeholders to determine: "Does the progress in our knowledge of pain over the years warrant a re-evaluation of the definition?"

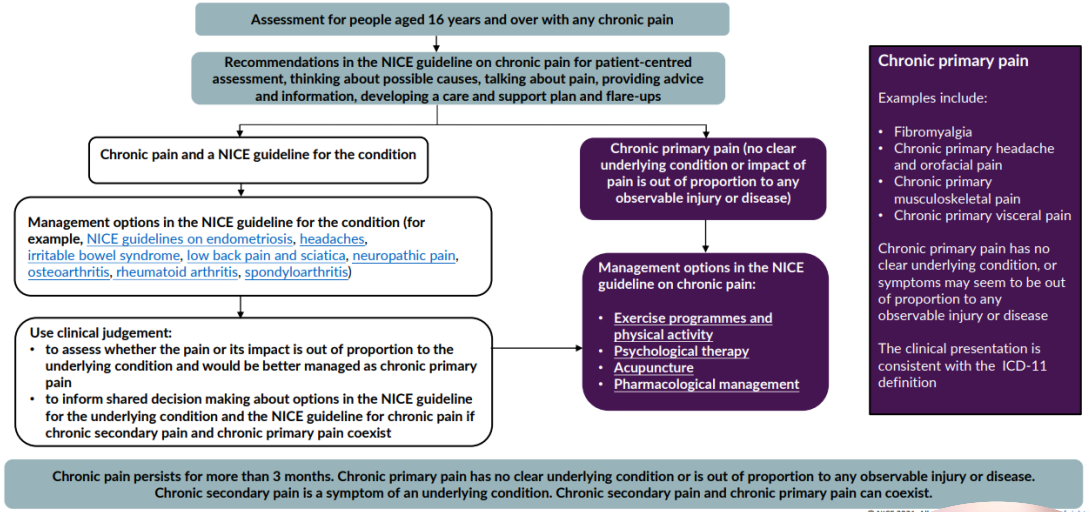


Revised IASP definition of pain: concepts, challenges, and compromises
 et al. (2020) | Pain
 10.1097/j.pain.0000000000001939



Chronic pain (primary and secondary) – using NICE guidelines for assessment and management

NICE National Institute for Health and Care Excellence

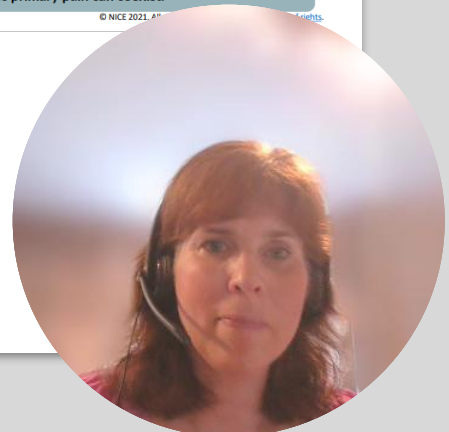


Chronic primary pain
 Examples include:

- Fibromyalgia
- Chronic primary headache and orofacial pain
- Chronic primary musculoskeletal pain
- Chronic primary visceral pain

Chronic primary pain has no clear underlying condition, or symptoms may seem to be out of proportion to any observable injury or disease

The clinical presentation is consistent with the ICD-11 definition





[Tame the Beast](#)

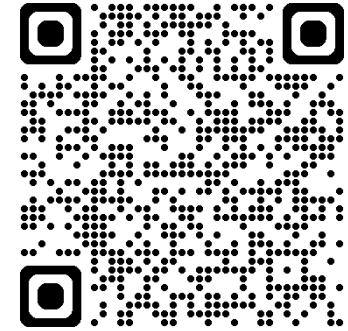




Lorimer Moseley Pain DVD How to Explain Pain to Patients

Laree Draper

115K views • 11 years ago



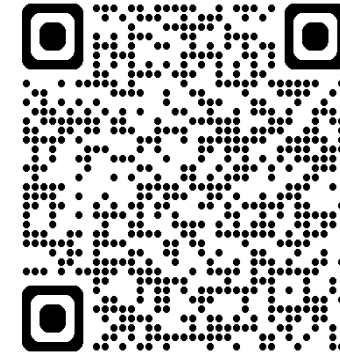
YouTube · Brainman

214.3K+ views · 10 years ago

Understanding Pain in less than five minutes

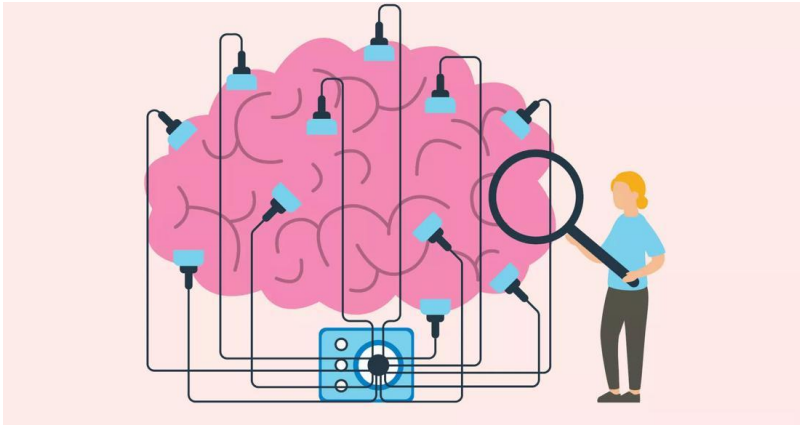


This video will enable people with chronic pain access to a **self-management** tool that will help them manage the impacts of chronic pain on ...



Explaining Pain





PACE RACE TABLE

ONE	TWO	THREE	FOUR	FIVE
1 x 1 = 1	1 x 2 = 2	1 x 3 = 3	1 x 4 = 4	1 x 5 = 5
2 x 1 = 2	2 x 2 = 4	2 x 3 = 6	2 x 4 = 8	2 x 5 = 10
3 x 1 = 3	3 x 2 = 6	3 x 3 = 9	3 x 4 = 12	3 x 5 = 15
4 x 1 = 4	4 x 2 = 8	4 x 3 = 12	4 x 4 = 16	4 x 5 = 20
5 x 1 = 5	5 x 2 = 10	5 x 3 = 15	5 x 4 = 20	5 x 5 = 25
6 x 1 = 6	6 x 2 = 12	6 x 3 = 18	6 x 4 = 24	6 x 5 = 30
7 x 1 = 7	7 x 2 = 14	7 x 3 = 21	7 x 4 = 28	7 x 5 = 35
8 x 1 = 8	8 x 2 = 16	8 x 3 = 24	8 x 4 = 32	8 x 5 = 40
9 x 1 = 9	9 x 2 = 18	9 x 3 = 27	9 x 4 = 36	9 x 5 = 45
10 x 1 = 10	10 x 2 = 20	10 x 3 = 30	10 x 4 = 40	10 x 5 = 50

SIX	SEVEN	EIGHT	NINE	TEN
1 x 6 = 6	1 x 7 = 7	1 x 8 = 8	1 x 9 = 9	1 x 10 = 10
2 x 6 = 12	2 x 7 = 14	2 x 8 = 16	2 x 9 = 18	2 x 10 = 20
3 x 6 = 18	3 x 7 = 21	3 x 8 = 24	3 x 9 = 27	3 x 10 = 30
4 x 6 = 24	4 x 7 = 28	4 x 8 = 32	4 x 9 = 36	4 x 10 = 40
5 x 6 = 30	5 x 7 = 35	5 x 8 = 40	5 x 9 = 45	5 x 10 = 50
6 x 6 = 36	6 x 7 = 42	6 x 8 = 48	6 x 9 = 54	6 x 10 = 60
7 x 6 = 42	7 x 7 = 49	7 x 8 = 56	7 x 9 = 63	7 x 10 = 70
8 x 6 = 48	8 x 7 = 56	8 x 8 = 64	8 x 9 = 72	8 x 10 = 80
9 x 6 = 54	9 x 7 = 63	9 x 8 = 72	9 x 9 = 81	9 x 10 = 90
10 x 6 = 60	10 x 7 = 70	10 x 8 = 80	10 x 9 = 90	10 x 10 = 100

A space-themed background featuring a blue and green Earth, a yellow sun, a red planet, a blue planet with rings, and a satellite.

Explaining pain

NEUROPLASTICITY

A circular portrait of a woman with brown hair, wearing a pink top, looking directly at the camera.

We need to look at managing our pain this way.

We need to see our healthcare professionals like Driving Instructors.

Driving Instructors sit beside us to and not in driving seat. They coach us.

It's best if members of our healthcare team do the same.

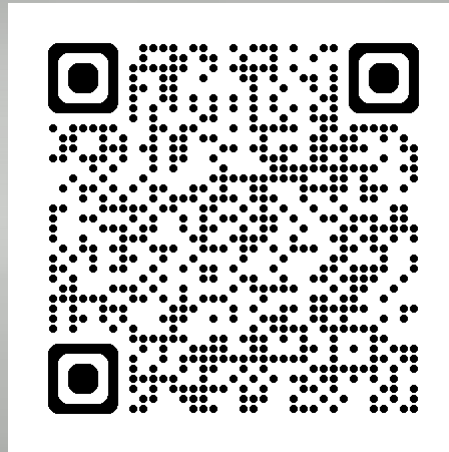
So where are you? In the drivers seat, or passenger seat?

When I put myself back in the drivers seat my...

- Confidence returned
- I felt more in control
- My pain levels dropped
- I could do more throughout the day without my pain increasing

Overall, I felt I was back in control.

Rephrasing Pain



Motivational Interviewing



Motivational Interviewing: Definition

Motivational interviewing (MI) is a directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence.

Common Approach to Change: Persuasion

Common role as the health care provider is to be the expert.

The objective is to assess and prescribe.

- Explain why this this change should be made
- Give at least three benefits that would result from making the change.
- Give advice about how to do it;
- Convince the patient about how important it is to change.

OARS

Key Skills in Motivational Interviewing



A Different Approach

The role of the health care provider is to understand and collaborate.

The objective is to elicit 'change talk' and build motivation for change.

- Listen, probe, understand and reflect back understanding.
- Ask thought-provoking questions that elicit desire, ability, reasons, and need to change.
- Find out what works and what doesn't for this individual.
- Give a short summary and elicit plan of action if appropriate.

MOTIVATIONAL INTERVIEWING

R

RESIST telling them what to do:
Avoid telling, directing, or convincing your friend about the right path to good health.

U

UNDERSTAND their motivation:
Seek to understand their values, needs, abilities, motivations and potential barriers to changing behaviors.

L

LISTEN with empathy:
Seek to understand their values, needs, abilities, motivations and potential barriers to changing behaviors.

E

EMPOWER them:
Work with your friends to set achievable goals and to identify techniques to overcome barriers.

Goal of Motivational Interviewing

- Have the client articulate their "pros" and "cons" so they can better process and ultimately resolve the conflict between them.
- Empathize and empower the client to take steps towards change by affirming their strengths as well as eliciting *their* initiative to change

Motivational Interviewing

Chronic Pain Consultation

PAIN

SLEEP

MOOD

Pain
Ideas; Concerns &
Expectations



Measuring pain

SIQR

1. Function Score
Difficulty performing activities in last 1 week

- Brush or comb your hair
- Walk continuously for 20 minutes
- Prepare a homemade meal
- Vacuum, scrub or sweep floors
- Lift and carry a bag full of groceries
- Climb one flight of stairs
- Change bed sheets
- Sit in a chair for 45 minutes
- Go shopping for groceries

2. Impact Score
Impact of any medical problems in last 1 week

- My medical problems prevented me from accomplishing goals for week
- I was completely overwhelmed by my medical problems

3. Symptom Score
Level of intensity of symptoms in last 1 week

- Pain
- Energy
- Stiffness
- Sleep
- Depression
- Memory problems
- Anxiety
- Tenderness to touch
- Balance problems
- Sensitivity to loud noises, bright lights, odors and cold

Total Score

Function score
Impact score
Symptom score



Brush or comb your hair No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Walk continuously for 20 minutes No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Prepare a homemade meal No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Vacuum, scrub, or sweep floors No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Lift and carry a bag full of groceries No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Climb one flight of stairs No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Change bed sheets No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Sit in a chair for 45 minutes No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

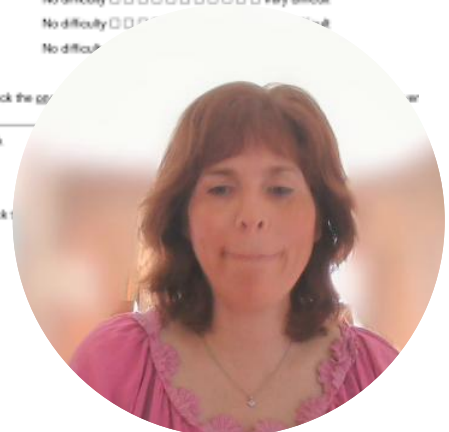
Go shopping for groceries No difficulty □ □ □ □ □ □ □ □ □ □ Very difficult

Domain 2 directions: For each of the following two questions, check the appropriate response for each question over the past 7 days:

Fibromyalgia prevented me from accomplishing goals for the week

I was completely overwhelmed by my fibromyalgia symptoms

Domain 3 directions: For each of the following 10 questions, check the appropriate response for each question over the past 7 days:



Opioids: De-prescribing

- 1) Is your pain well controlled?
- 2) Do you have concerns with side-effects of medication?
- 3) Are you aware of the benefit and harms of opioids?



Live Well with Pain Health and Well Being Check

Exploring how pain affects your health and life

Please help us understand about your health and the main obstacles to improving your quality of life and self managing with confidence.

There are **four steps** to completing this Health and Well Being Check. Please complete all four steps – tick or circle all the answers that apply to you.

STEP 1 How do you feel?

For each statement please circle which is closest to how you have been feeling over the past two weeks

[How to use the Live Well with Pain Health and Well Being Check tool - Live Well with Pain](#)

Navigator Tool – concerns form to accompany Part 1

My pain concerns form

Read each statement and tick either 'agree' or 'disagree' as to whether this is something you would like to talk to your health-care professional about.

Diagnosis and cure	Agree	Disagree	The way I'm feeling	Agree	Disagree
I don't think enough has been done to find out what is wrong.	<input type="checkbox"/>	<input type="checkbox"/>	I feel frustrated or embarrassed that I can't do the things I used to.	<input type="checkbox"/>	<input type="checkbox"/>
I don't know the cause of this condition.	<input type="checkbox"/>	<input type="checkbox"/>	I feel in a low mood.	<input type="checkbox"/>	<input type="checkbox"/>
I don't understand my diagnosis.	<input type="checkbox"/>	<input type="checkbox"/>	I feel stressed.	<input type="checkbox"/>	<input type="checkbox"/>
My pain is not getting any better.	<input type="checkbox"/>	<input type="checkbox"/>	I feel that people are judging me.	<input type="checkbox"/>	<input type="checkbox"/>
My pain is getting worse.	<input type="checkbox"/>	<input type="checkbox"/>	I feel lonely and isolated.	<input type="checkbox"/>	<input type="checkbox"/>
Other (please write below).			Other (please write below).		
Changes to my life	Agree	Disagree	My medications		
I don't see my family and friends.	<input type="checkbox"/>	<input type="checkbox"/>	I am concerned about the amount of medication I'm taking.	<input type="checkbox"/>	<input type="checkbox"/>
I can't continue in or return to work.	<input type="checkbox"/>	<input type="checkbox"/>	I am concerned about the combination of medications I'm taking.	<input type="checkbox"/>	<input type="checkbox"/>
I can't do my usual day-to-day tasks at home.	<input type="checkbox"/>	<input type="checkbox"/>	I am concerned about the side	<input type="checkbox"/>	<input type="checkbox"/>



Acceptance

EACH DAY HAS 12 SPOONS 

1 DAY = 

EACH ACTIVITY COSTS A DIFFERENT NUMBER OF SPOONS...
... but all activities cost some spoons

1 Spoon	2 Spoons	3 Spoons	4 Spoons
 Took Meds	 Took Shower	 Cleaned	 Worked
 Watched TV	 Socialized	 Shopped	 Kids to School
 Got Dressed	 Paid Bills	 Made Dinner	 Did Yard Work







<https://youtu.be/jn5lBsm49Rk?feature=shared>



Goal setting

What are my long-term aims?

How can I break these tasks up into smaller short-term SMART goals?

S	M	A	R
SPECIFIC	MEASURABLE	ATTAINABLE	RELEVANT
			
Define your goals clearly and specifically.	Define measurable assets.	Confirm your goals are attainable.	Verify your goals are relevant.



North Wilts Pain Group Programme



North Wilts Pain Group

Project lead: Rachel Dolman
Senior PCN Clinical Pharmacist

Background:

Community pain group founded in 2018 to support general practice with patients diagnosed with Fibromyalgia, due to its success the group increased its capacity to include all types of chronic pain including Long Covid.

- ❑ Wide demographic of patients; typically female, 40yrs +

Need:

- ❑ GP's understand chronic pain patients are challenging due to the personalised nature of their conditions
- ❑ Requirement of multiple appointments
- ❑ Complex solutions / management
- ❑ Effective medication is limited
- ❑ GPs requested this service to be initiated across the PCN

Solution:

- ❑ Direct invite via the GP or other clinician either verbally or using the local messaging system
- ❑ Patients requiring an (SMR) with a pain management pharmacist are tasked directly to Rachel Dolman
- ❑ Opioid reduction plan discussed and implemented where appropriate

Costs/Resources:

Running costs include:
village hall hire, preparing and organising sessions, funds for "speakers" and TIME

Challenges:

- ❑ Patients buy in - Not everyone feels "talking therapies" is the solution
- ❑ Patient expectations - Medication to manage their conditions
- ❑ FBM prevalence in men is 20%, therefore difficult to establish men within the setting

Lessons:

Conditions for success:

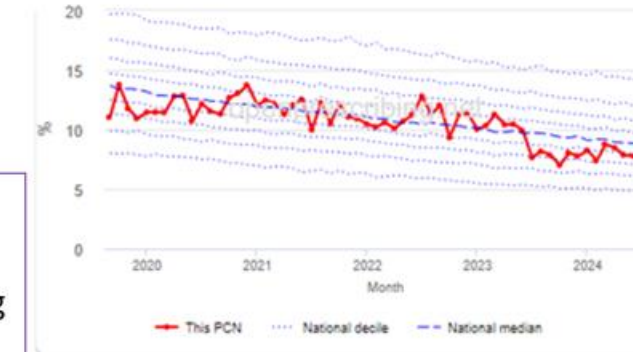
- ❑ Project lead with enthusiasm & drive
- ❑ Supportive practice management team providing the opportunity to

Celebrating Success

- ❑ Patient involvement – what are their expectations and needs from the group

High dose opioid items as percentage regular opioids

Opioid items with likely daily dose of ≥ 120 mg morphine equivalence compared with prescribing of all items of these opioids



Impact:

- ❑ Open Prescribing Data – reduced number of opioids prescribed across PCN
- ❑ Positive PSQ feedback:

Top benefits highlighted: "Information sharing, "Presenter sessions well organised" & "Sharing ideas and experiences"

70% leave feeling happy and likely to recommend to a friend

60% connecting outside of the organised group

- ❑ High opioid prescribing reduced, regular monitoring and focus area
- ❑ Focusing de-prescribing

needed, addressing health

- ❑ GP's happy with referral

ability to signpost patients

clinical and holistic support

- ❑ Informed using resources

- [Malmesbury Primary Care](#)



Next Steps: To increase resilience, PCN Health and Well Being Coach has completed the LWWP Course and has been supporting sessions throughout the year. The maximum number of attendees able to attend the village hall setting is 60

North Wilts Pain Group Patient Experiences

Group attendees explain how attending a pain group has enabled them to explore opportunities to feel in control of their chronic/persistent pain condition; the value of being heard by peers and how that encourages them to seek reduction in pain medications – supported by the relationship with the clinical pharmacist that developed and runs the group.

[North Wilts Pain Group - Patient Experiences on Vimeo](#)

[Living with Chronic Pain - Alice's Story on Vimeo](#)

[Chronic Pain & Deprescribing - Ali's Story on Vimeo](#)

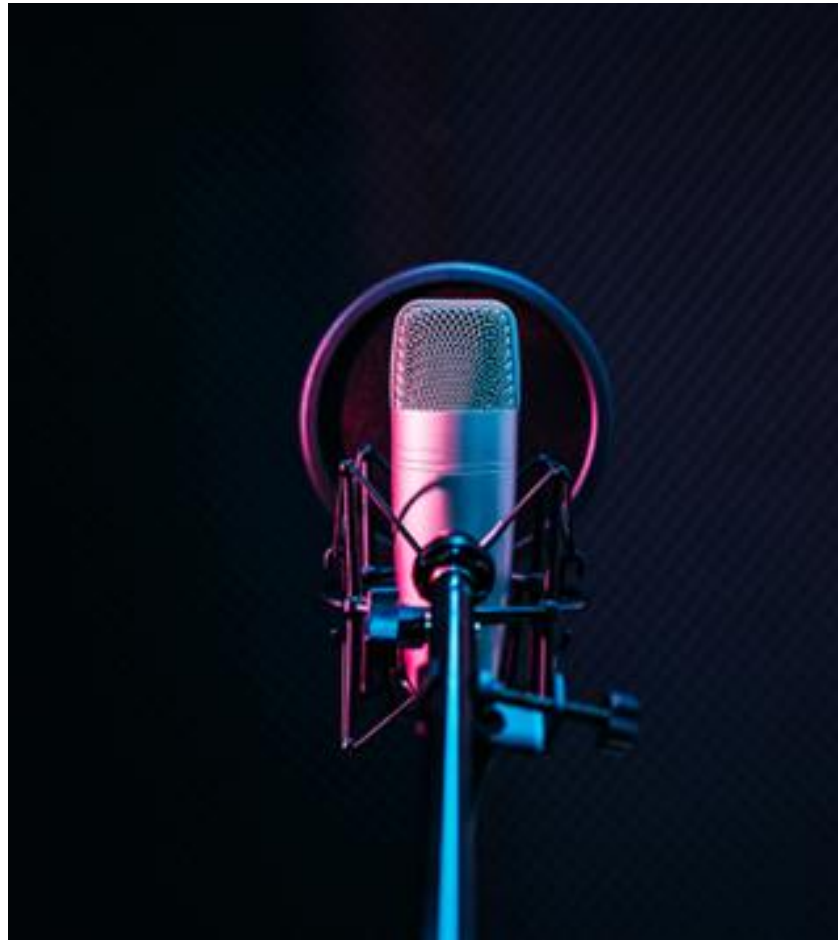
[Living with Chronic Pain - Biopsychosocial Approach - Lynn's Story on Vimeo](#)

Filmed in association with National Centre for Integrated Medicine, North Wiltshire Border PCN and Bristol Health Partners. With thanks to North Wiltshire Pain Group for allowing us to film at their group session.





Non- Pharmacological Management



What you need to know about Reducing and stopping opioids



Why have you been given this leaflet?

- You are taking opioids
- Your doctor has suggested you reduce the opioids you take
- To let you know about possible side effects of opioids
- To tell you about tolerance, and dependence on opioids
- To help you know what can help you while reducing your opioids

Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board | bsw.icb.nhs.uk



Health Innovation
West of England



What would you like to do

Hospitals Gyms

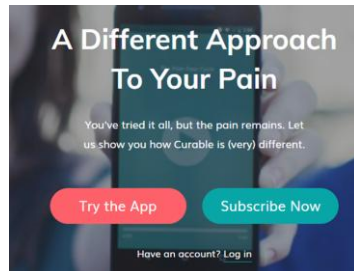
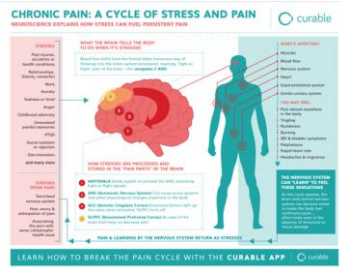
Joint Pain Programme

Join our free programme to relieve joint pain and lead a more independent life.

Apply now

Resources

- Improving chronic pain management by reducing harm from opioids resources - Health Innovation West of England



You are here: [Home](#) > Active Health in Wiltshire - GP referral

Active Health in Wiltshire - GP referral

Wiltshire Council

