




core

PHYSIOTHERAPY &
EXERCISE CENTRES

It's OK To Move

as long as it's measured...

Your complete guide to
understanding persistent
pain and overcoming it in
4 simple steps



Suffering from pain? Treatment not working? Rest and avoiding everything doesn't help?

If you answered yes to any of these questions then you must read this report to improve your understanding of persistent pain, or pain lasting longer than 3 months.

It's incredible how profoundly persistent pain can impact someone's daily life, as well as the similarities which occur during their subsequent healthcare journey.

The purpose of this report is to understand how to develop essential pain management skills that we at Core have refined over the past 20 years with our patients, thereby knowing that it's OK to move, as long as it's measured.

Patients' suffering from persistent pain often think that:

1. Pain at rest must mean there is something physically wrong with their neck, back or other affected area of the body;
2. Increased pain or spasm with certain activities must mean you should avoid these activities entirely; or in some cases rest from all activity and "take it easy" for a while;
3. Wanting fixes and "relief" are the first goals in their recovery, before commencing any type of active rehabilitation.

More often than not, these beliefs lead to family and various medical and allied health professionals (either knowingly or inadvertently) trying to facilitate "fixes," and enable disability - thus unfortunately dis-empowering their patients or loved ones further as a consequence.

For this very reason, chronic pain is often referred to as the "invisible" disorder – because there is no plaster cast or crutch visible it is difficult to determine to what degree someone is actually suffering from pain.

There are 3 key impacts on the individual suffering from persistent pain:

1. Significant physical injury and associated functional disability.
2. Elevated psychological influences including heightened emotions and increased levels of stress, depression and anxiety.
3. Considerable social impact on family, lifestyle and work-related interests.

What patients, healthcare providers, insurance companies and society in general must understand is that persistent pain may not be "cured" by treatment, medications, procedures or surgeries; that the answers lie not in finding "relief", but rather in understanding and developing effective pain management strategies; and that the patients' involvement is central to achieving effective and sustainable outcomes.

Quite simply, patients with persistent pain need to be managed as people, and not diagnoses.

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When this is done effectively, pain sufferers benefit in 4 ways:

1. Greater understanding of the impact pain can have on one's nervous system, and that by simply treating their diagnosed injuries won't necessarily lead to reduced pain and improved activity levels.
2. Less stress and anxiety towards one's pain experiences - allowing the person to feel more confident to start moving with pain, rather than trying to avoid increasing it.
3. Improved physical mobility, strength, flexibility and core stability.
4. Restored independence with activities of daily living by learning how to live life with pain (at least initially), as opposed to not living life because of it.

Our goal is to help pain sufferers develop a simple 4 step "tool-box" of effective pain management strategies to improve physical activity and overcome pain, thus ensuring fantastic outcomes. These steps are as follows:

Step 1: Pain Education

When we talk about pain education, initially this means gaining a detailed knowledge of what you've actually done to yourself, and how acute pain from injury can be a perfectly normal experience with standard time-frames for physiological healing. As an example, most back injuries heal as best they will within 3 to 6 months post incident, so once red flags have been ruled out and the relative time periods have passed, the skill here is to gradually return to normal things as sensibly as possible.

Understanding "hurt versus harm" is important in this phase and means that just because things may seem painful at first when initially getting going, it doesn't mean it is actually causing you harm, or your "problem" is getting worse. Most of the time these types of symptoms are reflective of your nervous system de-sensitising and adjusting to you moving once again. As your body strengthens and adapts, resting pain levels generally reduce.

Step 2: Mindfulness

Once you have a good understanding of pain, the next step is to work on your mindset and attitudes towards pain. By this we mean that the associated mood and stress impact from persistent pain is completely normal and, unless channelled, can become a significant barrier to effective pain management.

By using relaxation and other psychological techniques such as mindfulness, one can actively learn to take control of their natural thoughts around apprehension towards pain, and simply increase their daily activity levels in progressive bursts knowing they are on the road to recovery. Working with a counsellor or psychologist may be helpful when initially trying to develop these skills.





Step 3: Tailored Exercise Programs

When considering the role of tailored exercise programs, it's highly likely a person with pain has attempted stretches or exercises before as part of an initial treatment program. There are many types of exercise programs, these range from aquatic and hydrotherapy, core exercises, Clinical Pilates and yoga, resistance/weights programs, and cardiovascular exercise (step count walking, swimming etc).

From a patient's experience these techniques may or may not have been initially helpful, or simply weren't as effective as time went on. The usefulness of any exercise for pain can often be attributed to what type is prescribed at which part of the patient's treatment journey, and how consistent the patient is at completing the exercises as part of their daily regime.

Current evidence shows that movement really is medicine - however there is no "one size fits all" recipe. With persistent pain rehabilitation there is an individualised need to balance exercise protocols to each pain sufferer, to ensure maximum effect for one's strength, flexibility or mobility, whilst minimising the risk of flare-up from "over-doing it".

Progressing exercises to ultimately those which are simulating activities of daily living for each person is best practice. Our Core Physiotherapists' role is to individualise each patient's exercise program to ensure maximum results in the most rapid time-frame, whilst understanding and working with one's pain behaviour.

Step 4. Modifying Lifestyles

The fourth and final piece of the persistent pain puzzle is the need to understand and refine ergonomic and lifestyle strategies when moving - because prevention really is better than cure.

Considerations to one's diet and medication regime is important to ensure there are no unknowing contributing influences to one's pain experience. Some medications may no longer be appropriate for pain management, and ironically can be part of the problem, contributing to one's pain experience. Discussing appropriate pain medication with your GP or Pain Specialist may be appropriate if you are concerned about your current medication regime.

Excess alcohol and smoking can also influence pain levels. Discussing this with each patient's healthcare providers is vital to ensure all adjuncts are complimentary and not conflicting the goal of improved function for pain sufferers.

One of the most important ergonomic skills in pain management is "pacing" – either planned or reflective in nature. Understanding the need to focus on the quality of what you are doing, and not necessarily the quantity is vital. The cliché "slow and steady wins the race" summarises pacing skills nicely for tackling persistent pain.

When someone is trying to upgrade their daily activities, pacing can simply be the skill of forward planning how they can do this in progressive steps, to increase the likelihood of achieving goals at minimal risk of flare-ups. Pacing is also post activity reflection in the event of a flare-up of symptoms. This means taking the time to breakdown exactly how you went about doing something during a specific time period – ie: sitting, squatting, bending, lifting or twisting - to try and understand what could have been done differently over that period to change your post-activity pain levels. In this space, the persistent pain sufferer must become the expert in knowing and understanding their current capacity limitations to ensure control in building their capacities over time through pacing strategies.



In summary, from many years of experience working in this space, we've found that simply focusing on achieving our 4 step process is the key to success for overcoming persistent pain. Often shifting your focus to what you can do with pain, as opposed to what you can't do because of pain, is a very helpful starting point to begin your pain management strategy.

If you are, or know of anyone who might currently be suffering from persistent pain, and they are currently undertaking some of the previously mentioned medical approaches in hope of change, please make them aware that current evidence suggests these interventions may lead to undesirable patient outcomes.

Our program is available across all our Gold Coast and Brisbane clinics. For more information please visit <https://corehealthcare.com.au/injury-management/pain-management/>.

Thanks for taking the time to learn the 4 simple steps of effective pain management; and always remember that it's OK to move! As long as it's measured!!



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