Volunteer Leader Training Guide

Aches & Pains: Finding Relief Using Non-Drug Methods
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Background Information
As many as 100 million Americans live with chronic pain, but almost half of them receive no treatment. Pain is the most common reason people visit healthcare providers.

Target Audience
- EHC Members
- Adults audiences
- People with chronic pain

Objectives
- Participants will increase knowledge of chronic pain and the chronic pain cycle.
- Participants will increase knowledge of opioid drug risks.
- Participants will increase knowledge of non-drug treatment options for non-cancer chronic pain.

Handouts
- Handout 1: Talking with Your Healthcare Provider
- Handout 2: Breathing Exercises
- Handout 3: Guided Relaxation and Meditation
- Handout 4: Yoga Movement for Chronic Pain

Suggestions for Teaching
- Review the lesson guide and handouts.
- Choose activities from the handouts to teach.
- Make copies of the handouts.

Fast Facts: Did You Know?
- 40% of older adults have pain interfering with daily functioning.
- Opioid drugs are commonly prescribed to relieve pain.
- Americans consume up to 80% of the world’s prescription opioids.
- Arkansas has one of the highest rates of opioid prescriptions in the United States.
Introduction

If you or a loved one suffer from chronic pain, you are not alone. Chronic pain affects an estimated 100 million Americans. Thirty percent of adults have some form of acute or chronic pain. Chronic pain can affect people of any age, but older adults are frequently impacted. Forty percent of older adults have pain interfering with daily functioning, and 60% of older adults with chronic pain have had it for more than one year.

What is Chronic Pain?

The International Association for the Study of Pain describes pain as “an unpleasant sensory and emotional experience.” All pain comes from the brain. Other parts of the body send messages to the brain, but the brain signals to you that you have pain. There are two types of pain: acute pain and chronic pain.

Acute Pain

Acute pain lasts a few minutes to a month or two. Acute pain is a signal that something is wrong, like a toothache or broken bone. We feel pain when stepping on an object or touching a hot stove. Acute pain is a signal to protect us from danger. It makes us take action.

The lessening of that pain after surgery helps indicate healing. This kind of pain gets better when the cause is treated and your body begins to heal. Acute pain usually has a physical cause, like an injury, inflammation, or a disease. Some examples are pain after surgery, labor pain, a broken bone, or gallbladder attack.

Chronic Pain

Chronic pain is different from acute pain. It lasts months and sometimes years. Chronic pain is defined as pain lasting longer than three months, or past the time of normal tissue healing. Chronic pain may begin with an injury, disease, or procedure but evolve into persistent pain. Sometimes the cause of chronic pain is not clear. The brain continues to send pain signals even though tissues have healed. The most common pain challenges for Americans are headaches, low back pain, arthritis pain, cancer pain, and nerve and muscle pain. This guide does not apply to cancer pain.

Chronic pain is considered a disease. Research shows that chronic pain is less about damage to the body and more related to how sensitive our nervous system is and how the brain interprets information.

There is no standardized test for pain. Pain is personal. Healthcare professionals rely on the chronic pain patient to describe his or her pain, the pain location, timing, and sensation (sharp, dull, constant, off and on, burning, aching, etc.). Chronic pain cannot usually be cured but it can be managed.
The Chronic Pain Cycle

The symptoms of chronic pain can build on each other. Depression can cause fatigue. Stress and anxiety can be aggravated by ineffective breathing. Restricted movement and tense muscles can lead to poor sleep. Interaction of chronic pain symptoms can make the pain worse.

Important Ideas:
- All chronic pain comes from the brain. How we think, feel, and act affect the pain.
- Chronic pain causes the nervous system to become over-sensitive.
- The over-sensitive nervous system creates chronic pain and signals the brain to protect your body. The brain misinterprets nerve signals as danger.
- Chronic pain and chronic stress are similar. They may be connected to irritability, fatigue, negative thinking, feeling helpless, etc.
- You can change your nervous system to become less sensitive. You have a lot of control over information your nervous system receives through your thoughts, feelings, and behavior.

Chronic Pain Treatment

A goal of chronic pain treatment is to reduce pain and improve function so that day-to-day activities can be resumed. People with chronic pain should work with their healthcare providers to find a treatment plan that works for them. Being completely free of pain may not be a
reasonable goal. Work with a healthcare provider to create a plan to reduce or control pain to tolerable levels.

The treatment plan may or may not include prescription drugs. Other pain management options recommended by the Centers for Disease Control and Prevention include physical therapy, exercise, over-the-counter pain relievers (i.e., acetaminophen or ibuprofen), and cognitive behavioral therapy (i.e., chronic pain self-management programs).

**Prescription Medicines**

Opioid drugs are sometimes prescribed to manage chronic pain. The CDC recommends against opioids as the first course of treatment for chronic pain. These drugs carry a risk of physical dependence and abuse or misuse that may outweigh the pain relief benefits for many people.

*Note: Refer to Handout 1: Talking with Your Healthcare Provider*

You may have opioid drugs in your medicine cabinet and not realize it. Review the list of common prescription opioids below.

Safely dispose of unused drugs promptly. Find the nearest drug collection site at [https://www.artakeback.org/take-back/collection-sites/](https://www.artakeback.org/take-back/collection-sites/) or check with local law enforcement. There are hundreds of collection sites in Arkansas.

**Common Prescription Opioids**

- Codeine
- Hydrocodone
- OxyContin or oxycodone
- Demerol
- Tramadol
- Percocet
- Dilaudid
- Duragesic
- Actiq
- Sublimaze

**Opioid Risks**

How a person feels on opioids is due to the drug’s effect on the brain and central nervous system. Opioids block pain messages and create a calming feeling and a sense of euphoria.

When someone takes prescription painkillers, the brain is flooded with a rush of dopamine, a naturally occurring chemical that helps control the brain’s reward and pleasure center. This can cause an intense sense of euphoria more magnified than what any person could experience without drugs. Your brain is wired to want to repeat activities that bring pleasure. When you take opioids and experience a high or sense of pleasure from them, your brain remembers it. The reward circuits want you to continue doing that again and again.
The longer a person takes opioids, the more tolerance they build up. This means that they need more of the drug to obtain the same sense of pleasure initially achieved with a lower dose. However, more is not better. Often, more of the drug causes increased sensitivity to pain. This is called hyperalgesia (pronounced hahy-per-al-jeet-uh). Hyperalgesia is an exaggerated sense of pain, marked as a decrease in pain threshold or a decrease in pain tolerance after chronic opioid exposure.

For someone with opioid-induced hyperalgesia, increased use of opioids actually makes the pain seem worse. Increased dose, taking it more often, or taking more opioids than prescribed increases risk of overdose and death.

**Over-the-Counter Pain Relievers**

Healthcare providers may advise chronic pain patients to use acetaminophen or ibuprofen for pain relief. It is very important to follow the dosing schedule as directed. Do not rely on the return of pain symptoms to remind you. Work with your healthcare provider to find a reminder system that works for you.

**Non-Drug Chronic Pain Treatment Options**

Practicing guided relaxation, meditation, and/or breathing exercises can help with chronic pain management. These activities help calm the nervous system and may reduce pain sensitivity. These types of activities may be new to you. Try them. If the activities in this Guide do not work, try something else until you find some that you are comfortable with.

**Breathing Exercises**

We usually breathe automatically, without thinking about it. Breath can be consciously controlled. Studies show that attention to the breath can improve stress management and calm the nervous system. Some simple exercises can help you connect with your breath and tap into the calming effects of breathing intentionally.

**Are you a chest or belly breather?**

Breathing is more than just simply moving air in and out of the body. Whether you know it or not, you probably have a personal breathing style. Is your breathing fast or slow? Do you breathe into your chest or deep into your belly?

**Try this:** To find out if you are chest or belly breathing, place one hand on your chest and one hand on your stomach. When you breathe in, which raises more – your chest or your stomach? If your chest raises more, you are “chest” breathing. If your stomach raises more, you are “belly” breathing.
Chest breathing means that you are mainly using the chest muscles to create space when you inhale. Your lungs cannot expand to their full capacity. Chest breathing is not incorrect or bad for you, but it is less efficient than belly breathing.

Despite the name, belly breathing does not mean you breathe oxygen into your stomach. When belly breathing, the diaphragm compresses your abdominal organs and creates more space for your lungs to expand. This means they can take in more oxygen. The diaphragm is the large sheet of muscle separating your chest and abdominal cavities.

**Train Your Body to Belly Breathe**

- Practice by sitting comfortably or lying flat on your back.
- Place one hand on your chest and the other on your abdomen.
- Take 15 to 20 slow, deep breaths.
- As you inhale, expand your abdomen.
- As you exhale, contract your abdomen but keep your chest as still as possible. Your hands will detect motion of your chest and abdomen.
- Pause for a few seconds between each inhale and exhale.

*Note: Refer participants to Handout 2: Breathing Exercises. Lead participants through one or two exercises.*

**Guided Relaxation and Meditation**

Guided relaxation is a form of relaxation that focuses on your breath and visualizing calm and peaceful images to release tension and stress in the body. Guided relaxation may also be called guided imagery. Guided relaxation or imagery is like a guided daydream. It can involve meditation, but not all forms of meditation use visualization. Guided relaxation and meditation are related, but they are not exactly the same. Practicing guided relaxation can improve ability to cope with stress and emotions by incorporating your sense of sound (hearing), touch, sight, smell, and even taste.

**Handout 3: Guided Relaxation** provides sample guided relaxation scripts for use when leading others. To try guided relaxation on your own, download some free guided meditation recordings or podcasts from the Handout 2 Resource List.

*Note: Lead participants through one of the activities from Handout 3.*

**Yoga-based Movement**

Research shows that yoga is an effective treatment for reducing pain and improving function. Yoga is relatively safe, inexpensive, and accessible. It may also provide health benefits beyond pain relief.
Connecting movement to breath is one aspect of yoga distinct from other forms of exercise. Instructions for five poses are included in Handout 4: 1) Seated Lateral Stretch, 2) One-legged Butterfly, 3) Seated Twist, 4) Cat and Cow, and 5) Child’s Pose. Each set of instructions includes prompts to inhale and exhale. Following the prompts can help you connect with your breath and tap into the calming effects of breathing intentionally.

**Note:** Lead participants through the poses in *Handout 4: Yoga Movement for Chronic Pain.*

**Note:** Encourage participants to work within their physical abilities. A core concept of yoga is to respect your body. Be mindful of how your body feels when practicing yoga. Stop doing any pose that feels painful.

**Conclusion**

Many people find non-drug alternatives are effective in treating chronic pain symptoms. If you try a technique described here and it does not seem to work the first time, keep trying. If it does not work after several weeks of consistent practice, try something else.

Remember to communicate with your healthcare providers about what worked and what did not. A treatment plan should be tailored to individual needs. The person with pain and their loved ones should actively participate in the treatment and planning process.

**References**


