

Memphis Medical News

YOUR PRIMARY SOURCE FOR PROFESSIONAL HEALTHCARE NEWS

Welcome
Sun, Aug 2
 2 members currently online

[Home](#) [Our Publications](#) [Advertise](#) [Contact Us](#) [Archives](#) [Subscriptions](#) [Corporate](#) [Member Options](#)

The Psychological Aspects of Pain

GLORIA BUTLER BALDWIN

For someone in pain, the old doctor's adage "take two aspirin and call me in the morning" just doesn't cut it. Acute pain is bad enough, but having to live with chronic pain whether through a debilitating illness or more deadly disease becomes a life force all its own.

Edward A. Wise, PhD, president of Mental Health Resources PLLC, and recipient of the American Psychological Association Award for Distinguished Contributions to Independent Practice (2005), said the effects of chronic pain go far beyond the physical. It typically causes the inability to work or perform routine household chores, to participate in family gatherings, socialize, exercise, maintain intimacy, or engage in leisure activities that one previously enjoyed prior to the onset of pain. Mounting financial pressures and an increasing feeling of helplessness, hopelessness, fear and anger further exasperates the losses in daily living.

In a paper written by Wise entitled, "Coping with Chronic Pain," he states: "It is not surprising that numerous studies have shown that approximately 30-60 percent of chronic pain patients also suffer from depression and 15-30 percent report substance abuse problems. This means that depression and substance abuse are common complications of living with chronic pain and are not the exception. This does not mean that the pain is all in your head. Instead, it means that there are psychological components to all experiences in life, including pain, and these psychological complications can be treated, which in turn can help you cope with chronic pain. In fact, chronic pain can be viewed as consisting of the physical or biological cause, emotional reactions, and the cognitive 'self talk,' or ways we think about our pain. It has been shown that learning how to control the physical tension in your body can reduce the intensity of your pain."

According to the Center for Disease Control and Prevention (CDC) annual comprehensive report of Americans' health, Chartbook on Trends in the Health of Americans With Special Feature on Pain, released in 2006, one in four U.S. adults say they suffered a day-long bout of pain in the past month, and one in 10 say the pain lasted a year or more.

"We chose to focus on pain in this report because it is rarely discussed as a condition in and of itself—it is mostly viewed as a byproduct of another condition," said lead study author Amy Bernstein, Healthcare in America: Trends in Utilization. "We also chose this topic because the associated costs of pain are posing a great burden on the healthcare system, and because there are great disparities among different population groups in terms of who suffer from pain."

Low back pain is among the most common complaints, along with migraine or severe headache, and joint pain, aching or stiffness. According to the report, the knee is the joint causing the most pain. Hospitalization rates for knee replacement procedures rose nearly 90 percent between 1992-1993 and 2003-2004 among those 65 and older.

According to the National Center for Health Statistics, chronic pain affects more people than cancer, diabetes and heart disease combined. It's also the most common reason Americans access the healthcare system and is a leading contributor to healthcare costs, accounting for more than \$100 billion a year in expenses and lost productivity.

The American Pain Foundation and the American Cancer Society Cancer Action Network (ACS CAN), the sister advocacy organization of the American Cancer Society, announced in July new pain legislation that, if passed, would increase research, education and awareness of pain management issues.

The legislation, The National Pain Care Policy Act of 2007, introduced by Reps. Lois Capps (D-CA) and Mike Rogers (R-MI) would give the 76.2 million Americans suffering from pain some much needed relief by improving pain care research, education, training, and access.

Will Rowe, executive director of the American Pain Foundation, said access to appropriate, timely and unbiased pain care is a fundamental right.

"For a number of reasons, these rights are sadly unrealized for millions of Americans in pain," said Rowe. "By increasing research, education and awareness of pain issues, the National Pain Care Policy Act takes important steps toward making these rights a reality."

Key components of the bill include: the authorization of an Institute of Medicine Conference on Pain Care; permanent authorization of the trans-institute Pain Consortium at the National Institutes of Health, the creation of a grant program to improve health professionals' understanding and ability to assess and appropriately treat pain; and the creation of a national public awareness campaign about pain management, conducted by the Department of Health and Human Services, with particular attention to improving access to appropriate pain treatment among underserved populations.



Add our RSS Feeds

Until legislation has passed and new miracle treatment protocols are established, Wise suggested numerous techniques to help patients put their body in a state of calm thereby lessening tension which aggravates the condition, and increases the feeling of loss on the vicious merry-go-round of pain. Hot baths, soothing music or behavioral treatments such as muscle relaxation, guided imagery and structured breathing exercises along with positive self-talk messages can help with relaxation.

"Someone who tells themselves 'my pain will never get better' or 'will be like this for the rest of my life?' is engaging in 'catastrophic thinking,' which increases stress and tension," Wise said. "What you tell yourself about your pain influences your relationship with your pain, as well as how you live and cope with it. To counter catastrophic thinking, one needs to take a more objective, balanced and logical approach. Instead of telling oneself, 'I can't go on,' for example, you could remind yourself that you withstood the pain yesterday, that the pain intensity will not last, the pain will not kill me. You might also examine what you have done thus far that has allowed you to endure the pain."

August 2007

[Printer-friendly format](#)

[Login and voice your opinion!](#)

Do you know someone else who would like to see this?

Your

Email:

Their

Email:

Comment:

(Will be included with e-mail)

[Send to a friend](#)

Copyright © and Trademark ™ 2007 All Rights Reserved
[Copyright Statement](#) | [Privacy Statement](#) | [Terms of Service](#)

Empowered by Bondware's Content Management System

Email Marketing, Custom Development & Web Design | eCommerce, HOA, Publishing, Non-Profit, Intranet, Real Estate & Association Websites

