Australian Government
Department of Veterans' Affairs

Veterans' MATES

Being an active partner in your care

www.veteransmates.net.au

PART 1: UNDERSTANDING YOUR PAIN CAN HELP TO EASE YOUR PAIN

Most people think of pain as a result of an injury or a disease, but pain can occur with or without either. Pain usually resolves before tissues have fully healed, but for some people pain persists even after tissues have healed - it's called chronic or persistent pain.

An estimated one in five Australians live with persistent pain. It can make daily life a struggle. But by understanding your pain and taking an active role in strategies tailored to you, daily life can improve. Don't give up; it might take some time to find out what works for you. The first step is to learn more about pain and how your pain is unique to you.

This is the first part of a two part series. Part 1 introduces you to how pain works, and to the people who can help you take an active approach to managing your pain. Part 2 helps you identify the things that impact on your pain, and how to change them.

Five key facts in understanding pain

Research has shown that by learning about how pain works, you can reduce it and improve daily life.[1] Here are five key facts to help you understand your pain better:

1. Pain is always real

Pain is always real whether or not it is associated with physical damage. Pain is never 'all in your head'. It is always a real experience that can have a big impact on day-to-day life.

1. Louw A, Zimney K, Puentedura E, Diener I. Physiotherapy theory and practice. 2016; 32: 332-355. https://www.ncbi.nlm.nih.gov/pubmed/27351541

2. Your pain is unique to you

Everybody's pain is different. Your body's tissues can send 'danger messages' to your brain in response to a number of threatening things such as an injury or too much heat or cold. Your brain then has to decide whether or not to make pain in order to protect you. Many things can alter this decision - see the diagram below.

3. Pain can exist with or without tissue damage

Pain is not a good indicator of damage in your body. Small injuries, for example a paper cut, can hurt a lot, and some really traumatic injuries don't hurt at all at the time of the injury. Persistent pain can continue long after the initial physical injury or damage has completely healed. For instance, some people missing a limb will feel pain in the missing bit; this is called Phantom Limb Pain. In order to understand pain, we need to understand that it is the brain and nervous system that makes pain.

Factors that might influence your pain

4. All pain is made by the brain

Pain is a normal experience that alerts us to danger and helps us to survive by making us want to protect the painful body part. Your brain produces pain when it decides that your body tissues are in danger and require protecting. For example when you stub your toe and instantly feel pain. We know that pain is always real. When it becomes chronic it is often more associated with your nervous system and brain becoming extra, even over, protective. Over time, the nervous system can become more active at sending danger signals and the brain becomes better at making pain - this is known as sensitisation. When your system is sensitised many things that didn't hurt before can hurt.

5. Pain can be reduced

Research has shown that persistent pain can be reduced over time by "re-training the brain and nervous system". The most effective way to reduce pain is by taking an active role in learning about your unique pain experience and to use a healthcare team for support. Part 2 will explain the steps you can take to reduce your pain.

To learn more about pain watch:

- *Understanding Pain in less than five minutes* www.youtube.com/watch?v=5KrUL8tOaQs and
- *Understanding Pain: Brainman chooses* www.youtube.com/watch?v=jlwn9rC3rOI

Medicines alone are not enough to ease your pain

Medicines are only one part of pain management and are most effective in the short-term to help get you moving and support you while learning active pain management strategies. For some of these medicines (e.g. opioid medicines such as codeine, morphine or oxycodone), there is no evidence that they will help your pain in the long-term. For many people, medicines can actually make pain worse and have many serious side effects.

Talk to your doctor or pharmacist about having your pain medicines reviewed.

For further information about medicines for chronic pain see:

- *Understanding Pain: Brainman stops his opioids* www.youtube.com/watch?v=MI1myFQPdCE
- previous Veterans' MATES topic on *Chronic musculoskeletal pain* at https://www.veteransmates.net.au/topic-38-veterans-advice

Always talk to your doctor before stopping, starting, or changing any of your medicines.

The healthcare team and how they can help

A number of health professionals can help you to understand your pain so that you can get back to doing the things you enjoy. Your GP will likely be your main contact and coordinator. *DVA gold and white card holders might be eligible for services provided by some health professionals and require a referral from their GP.*

Who might help	They can help by…
GP	• Being your main point of contact • Diagnosing and monitoring your condition • Developing a pain management plan and referring you to other health professionals • Suggesting strategies to help manage your pain and support you in making changes • Prescribing and supervising medicines that might be used to help manage your pain and get you moving
Psychologist	• Teaching you how to understand your pain and how it impacts on your body, thoughts, emotions and behaviours • Helping you to change the way you think about pain • Supporting you to realise you are not alone • Teaching you strategies to cope better with the pain, how to pace yourself each day and set reachable goals • Teaching you how relaxation and meditation can help lessen your pain
Physiotherapist	• Giving you advice on how to start moving again in a safe manner • Setting an achievable movement and exercise schedule, and showing you how to pace your activities • Teaching you stretching and strengthening exercises • Providing short term manual treatments where appropriate e.g. physical manipulation of muscles and joints • Helping you to understand your pain and how it affects your body, thoughts, emotions and behaviours

Talk to your GP or ring the Veterans' MATES Helpline on 1800 VETERAN (1800 838 372). Other health professionals who might help your plan for pain management include: a pain specialist, pharmacist, exercise physiologist, dietician, or occupational therapist. Some people with chronic pain could benefit from therapies such as massage and yoga, to help with muscle tightness and relaxation. However these services are not funded by DVA.

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