Pain Complicated by Trauma and Grief

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Don’t tell anyone

• The biggest secret about pain:

The natural course of painful conditions is to resolve or recede

Simple Pain

• The vast majority of painful conditions resolve or recede with appropriate care and time
• 85-90% of painful episodes fall into this category
• Let’s call that “simple pain”
  Care + Time = Healing
• Resolve vs Recede

Complicated Pain

Pain that does not resolve or recede over an expected time frame with appropriate care may be considered to be complicated (vs simple) pain

Complicated Pain

If the natural course of pain is to resolve or recede to the background (simple pain), then un-resolving or complicated pain suggests that various complicating factors are interfering with natural recovery

Query

• What complicates the natural recovery from painful conditions?
Complicating Factors

- Physical/structural
- Biochemical
- Psychophysiological
- Attitudinal

The Four Qualities of Pain

- Nociception
- Tenderness
- Suffering
- Negativity

Pain Treatment

- Pain treatment essentially always treats ONLY the first quality of pain – structural or nociceptive pain
- Physical therapy, chiropractic adjustment, interventional (injection) procedures and surgery – all fundamentally treat structure
- Great for simple pain: (time + appropriate care = getting better)
Complicating Factors

• Biochemical (tenderness)
  systemic inflammation
  increases tenderness, defined as...
  increased pain to touch, pressure, motion
  direct relationship to depression
Recovery strategies: normalized through diet, exercise, stress reduction, sleep and smoking cessation

Complicating Factors

• Psychophysiological (suffering)
  Sympathetic overactivity
  fight/flight, anxiety, stress, panic, worry
  Muscle tension, sleep disturbance, GI distress, immune dysfunction
  Fight/flight emotions of anger, fear
Recovery strategies: helped through relaxation, mindfulness, exercise, trauma therapies (EMDR, SE, SER, etc)

Complicating Factors

• Attitudinal (negativity, negative expectancy)
  jumping the creek, GPS
thoughts, beliefs and judgments affect action, creates inertia
  numbing, grief, relationship, self talk
Recovery strategies: redirected through goal setting, positive imaging, coaching, DBT, CBT, gratitude practice,

A New Model

Replacing chronic pain model with Complicated Pain model
- Complicated Pain Recovery™ (ComplicatedPain.com)
- “A unique process of evaluating unresolving pain and applying strategic actions designed to resolve the entanglement of physical, biochemical, psychophysiological and attitudinal factors which inhibit one’s natural potential for healing and well being”
Pain Recovery

• Pain Recovery Components – expands understanding and strategies to address the four pains
• Self responsibility supported by education and coaching support, supplemented by focused treatment when needed
  • Nociception (sensation of pain)
  • Tenderness (increased sensitivity to touch, pressure or movement)
  • Suffering (awful, miserable, unbearable)
  • Negativity (negative expectancy)

Trauma

• Trauma manifests as pain primarily through the third complicating factor, hyper-sensitization
• Via heightened sympathetic tone >
  – Muscle tension (structural stress)
  – Inflammation (tenderness)
  – Diversion of resources from parasympathetic tasks
  – Survival emotions: anger and fear

Trauma

• Physical trauma as origin of pain
• Medical trauma
• Unresolved previous trauma
• Childhood trauma
• fMRI

Grief

• Second complicating factor and depression
  – Inflammation and depression
  – Serotonin and depression
  – Diet, exercise, stress reduction, sleep, smoking
• Grief vs depression

Its Complicated

• Biomechanical stressors
  – nociception
• Inflammation
  – tenderness
• Hyper-sensitization
  – distress/suffering
• Inertia
  – negativity
  – numbing/SUD/addiction

May be likened to the four tumblers of a combination lock

Its Complicated

If any complicating factor is left unidentified or unattended to, it makes good treatment to the other areas appear to be ineffective or may paradoxically worsen pain!
Examples:

Its Complicated

The Future

CDC Guideline will effect prescribing practices

There will be increasing pressure for alternative ways to manage pain to be more available

Pain Recovery emerges as model for un-resolving complex/complicated pain

Severely complicated pain scenarios can best be addressed in comprehensive residential treatment programs

Less than a handful of such programs for pain exist today
Less severely complicated pain scenarios can be addressed in IOP setting.

(Almost no pain IOPs or pain/addiction IOPs exist today to my knowledge)

The Future

Less severely complicated pain scenarios can be addressed in IOP setting...

(Almost no pain IOPs or pain/addiction IOPs exist today to my knowledge)

...or in clinic/private practice setting

because

+80% of Pain Recovery can be guided by mental health professionals, addiction counselors and trained coaches who are in a far better vantage point than interventional pain specialists to care for these complex whole person challenges

For this to happen psychologists, therapists, and addiction counselors need additional training and skills to lead or coach a pain recovery process

To go from this...

Primary care: Medication, PT Pain Specialist: Interventional procedures, medication, repeat, repeat

Discharge

Specialist: Ortho, Neuro, Rheum, etc

...to this

Pain Recovery for Complicated Pain

Pain Recovery for Complicated Pain:

Functional restoration: Active exercise, Passive bodywork

Cognitive: CBT, Goal setting, Gratitude, Relationship

Decrease sympathetic tone: Mindfulness, EMDR, SE

Habit & Practice: Diet, exercise, stress, sleep, smoking
Ideal Future

From medical treatment and management model to

A Pain Recovery Model

Guided by pain recovery experts
Using an educational, coaching and recovery model
With focused pain treatment when indicated

“God whispers to us in our pleasures,
sparks to us in our conscience,
but shouts in our pain;
It is his megaphone
to rouse a deaf world”

-C.S. Lewis, The Problem of Pain

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