Living Well with Chronic Pain

What is it?

A group-based, participatory class led by two trained peer leaders over 6 weekly sessions. Participants receive two companion books, including the Chronic Pain Workbook. Participants learn about effective, nonpharmacological strategies for symptom management and general wellness. They use action-planning, brainstorming, and problem-solving to identify and pursue goals for health and life. Topics covered include techniques for dealing with frustration, fatigue, isolation, and poor sleep; appropriate exercises for maintaining and improving strength, flexibility and endurance; appropriate use of medications; communicating with family and friends; nutrition; pacing activity and rest; and how to evaluate new treatments. Developed in Canada in late 1990s.

Who is it for?

Any adult (age >18) with a primary or secondary diagnosis of chronic pain (e.g., pain lasting longer than 3 to 6 months or beyond the normal healing of an injury). Valuable for patients with chronic musculoskeletal pain (e.g., LBP), fibromyalgia, and/or neuropathic pain. Participants must be able to engage in group discussion. Not appropriate for individuals who will disrupt group dynamics or for those acutely incapacitated by severe illness or physical limitations. Ideal for patients who feel socially isolated and/or depressed due to pain.

What does it do?

This program is an adaptation of the Arthritis and Chronic Disease Self-Management programs and it covers the day to day challenges of living with chronic pain. It focuses on increasing participant self-efficacy, improving knowledge, and assessing beliefs that contribute to perception of pain, resulting in behavior change and improved self-management. The initial RCT among patients with mixed idiopathic chronic pain conditions (110 individuals; 75% female, average age 40) showed significant short-term improvements in pain, vitality, energy, dependency, aspects of role functioning, life satisfaction, self-efficacy, and resourcefulness compared to wait-list controls. A more recent RCT of an adapted version for patients with stable angina showed similar benefits. Still, it is the largest body of evidence in support of the program’s effectiveness is indirect and is centered on the core curriculum and effects on pain of the Arthritis and Chronic Disease Self-Management programs.

> For class information and to register, visit yourjuniper.org

How to Discuss With Patients

Chronic pain is a biopsychosocial problem. What the pain does to a patient’s life is often more important to the patient than the physical hurt. Your patients will appreciate that you understand their struggle and their feelings of hopelessness. They will be excited to learn that this program can help them. When discussing the program, it helps to emphasize that the leaders are peers and that many patients like them find great value and improve. Expect your patient to come back with new strategies, goals, and a more positive outlook. Use this opportunity to tailor your treatment plan and encourage your patient in his/her efforts.