



Behavioral Health Approaches for Chronic Pain: Panel Discussion of Emerging & Non-Traditional Treatments

Trauma & the Opioid Crisis: Coming Together to Advance Prevention, Care, and Recovery

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Pain

and cognitive

An unpleasant sensory **and emotional** experience associated with actual or potential tissue damage, or described in terms of such damage.

International Association for the Study of Pain

Acute versus Chronic Pain

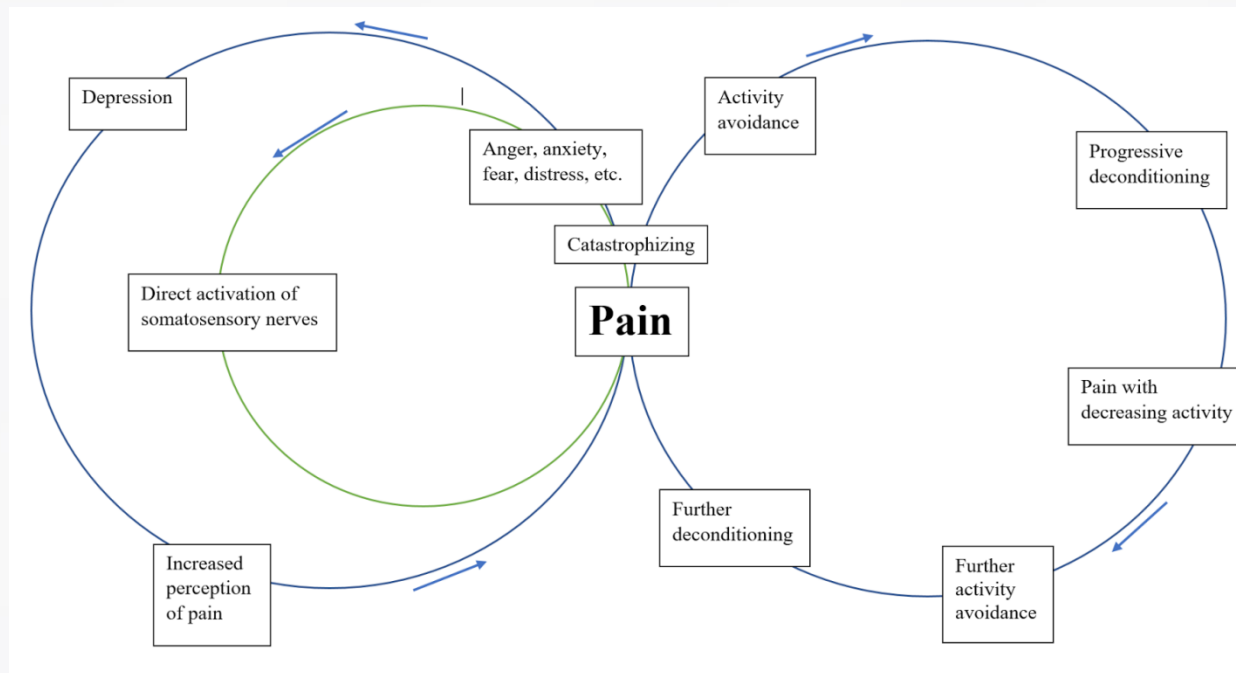
Acute Pain

- Less than 3 months
- Is a symptom
- Identified cause, body's response to injury
- Diminishes over time, responds to treatment

Chronic Pain

- More than 3 months
- Is a condition
- May develop after incident, known or unknown cause
- Persists beyond expected healing time and/or despite treatment

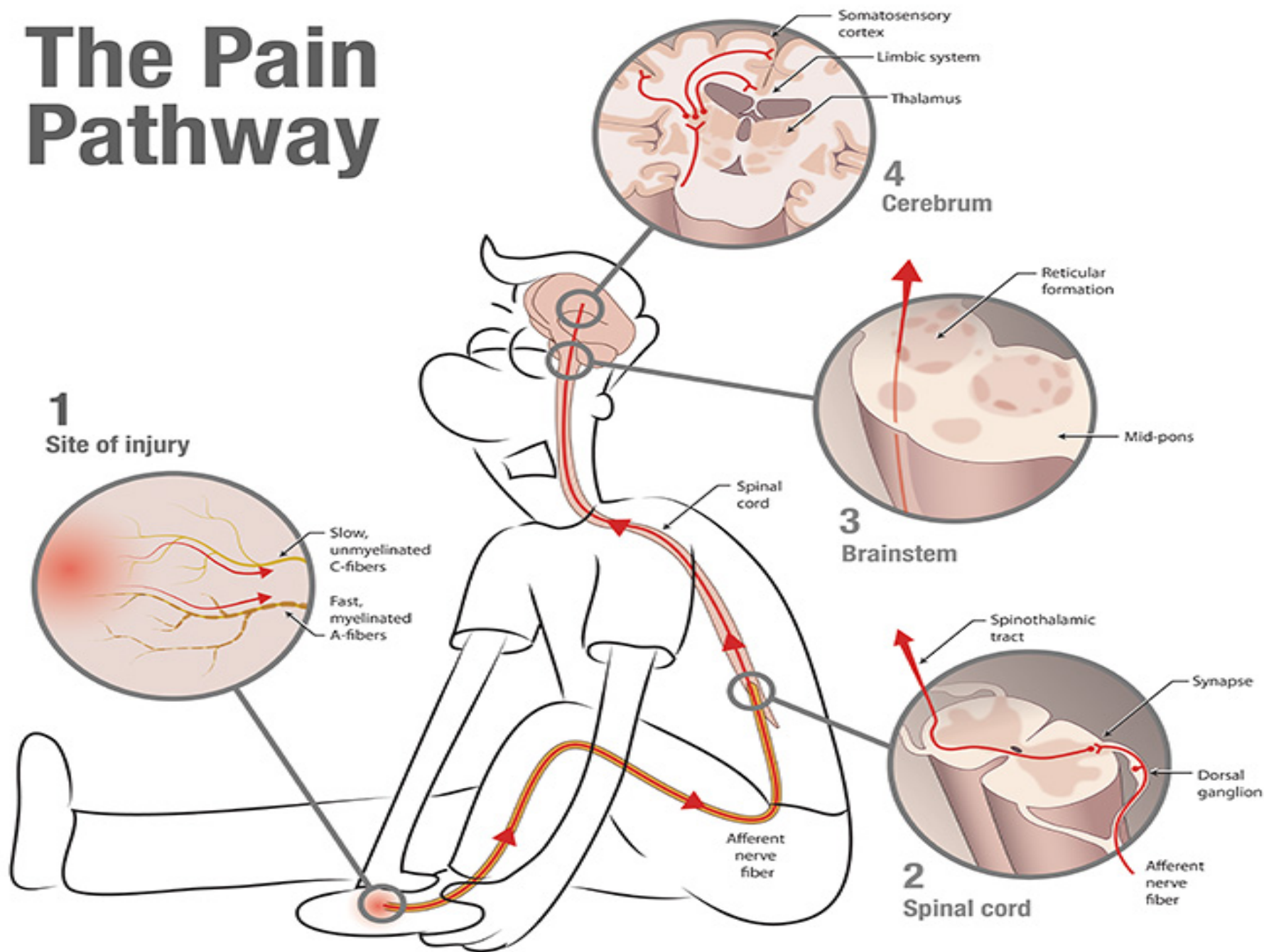
Chronic pain cycle



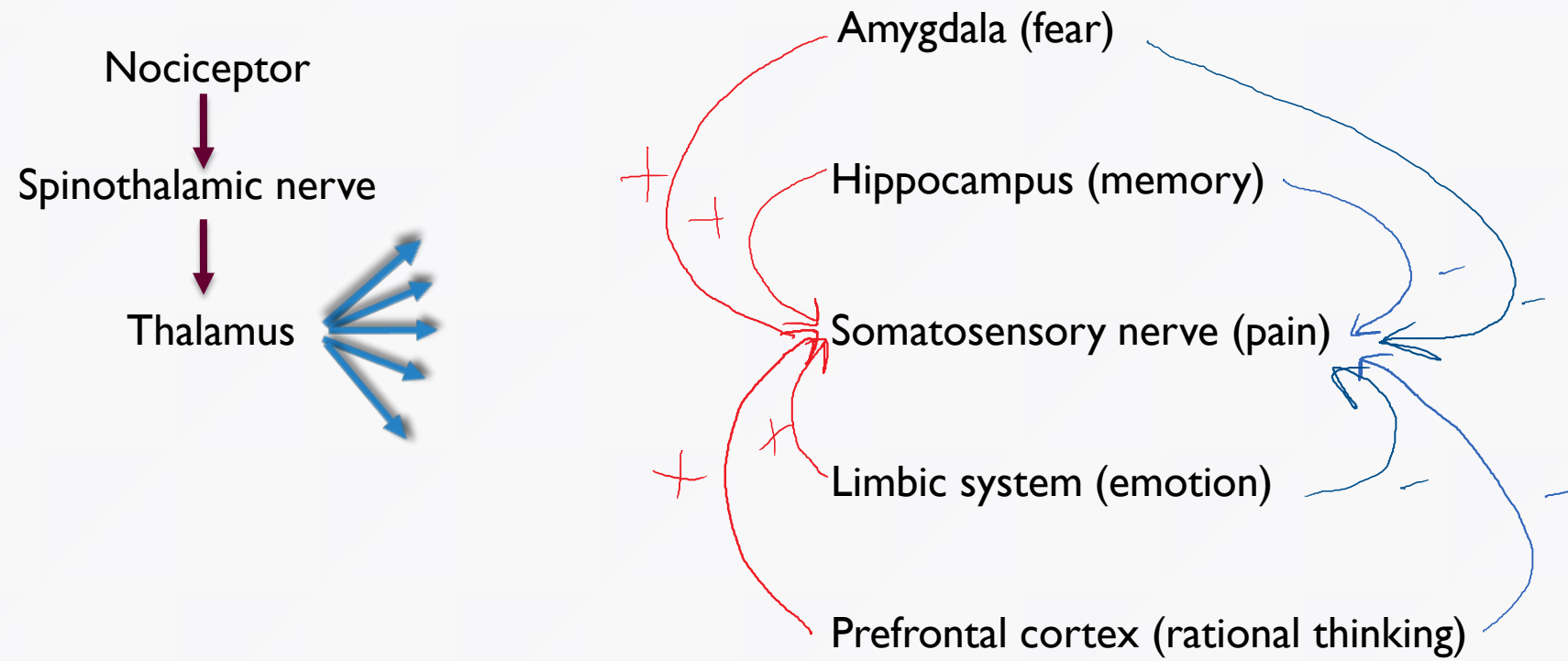
Psychological component

Physical component

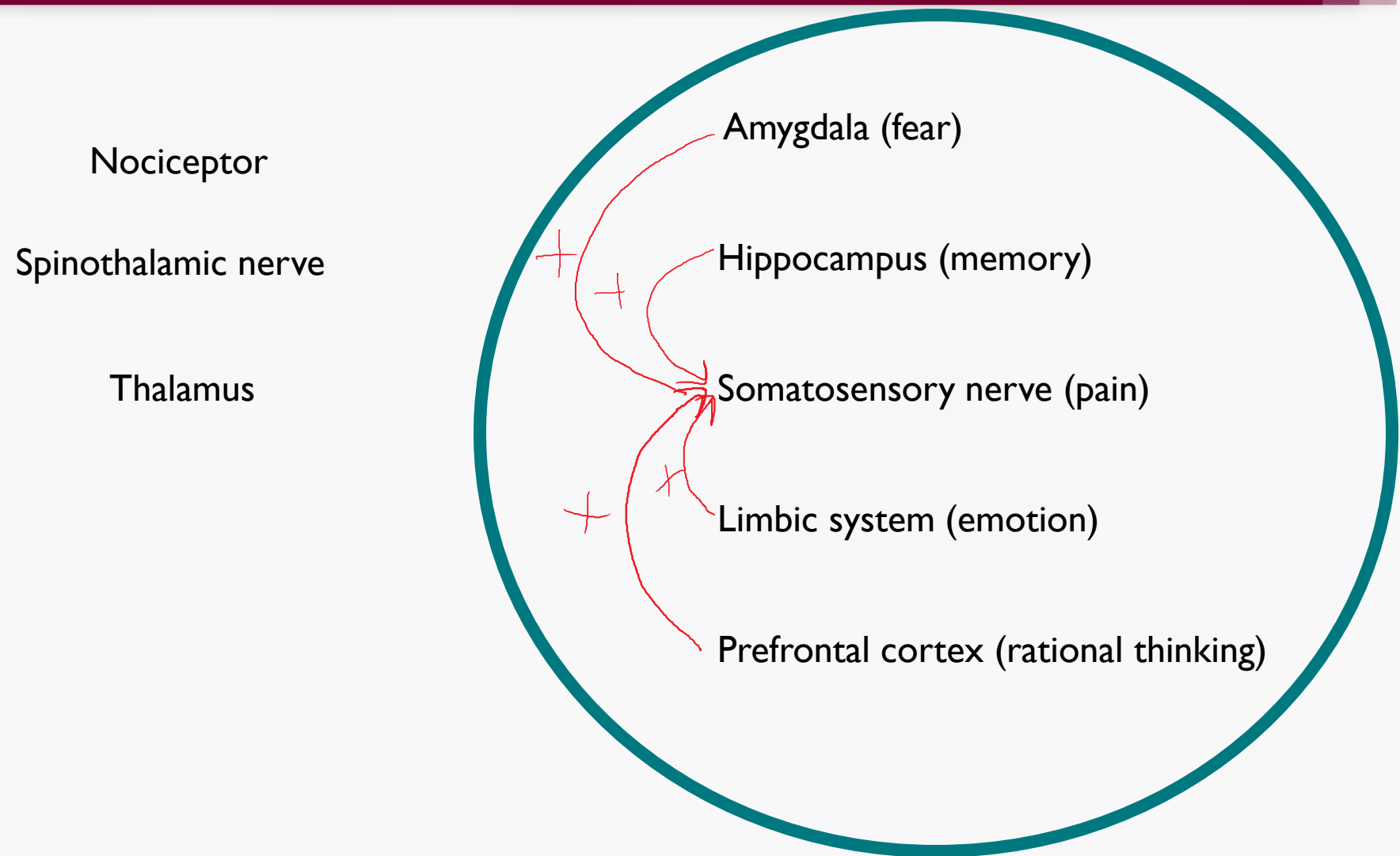
The Pain Pathway



Pain pathways



Central sensitization



Central Sensitization Syndromes

- Fibromyalgia
- Chronic headaches
- Irritable bowel syndrome
- Chronic neck pain
- Chronic back pain
- Interstitial cystitis
- All chronic pain???

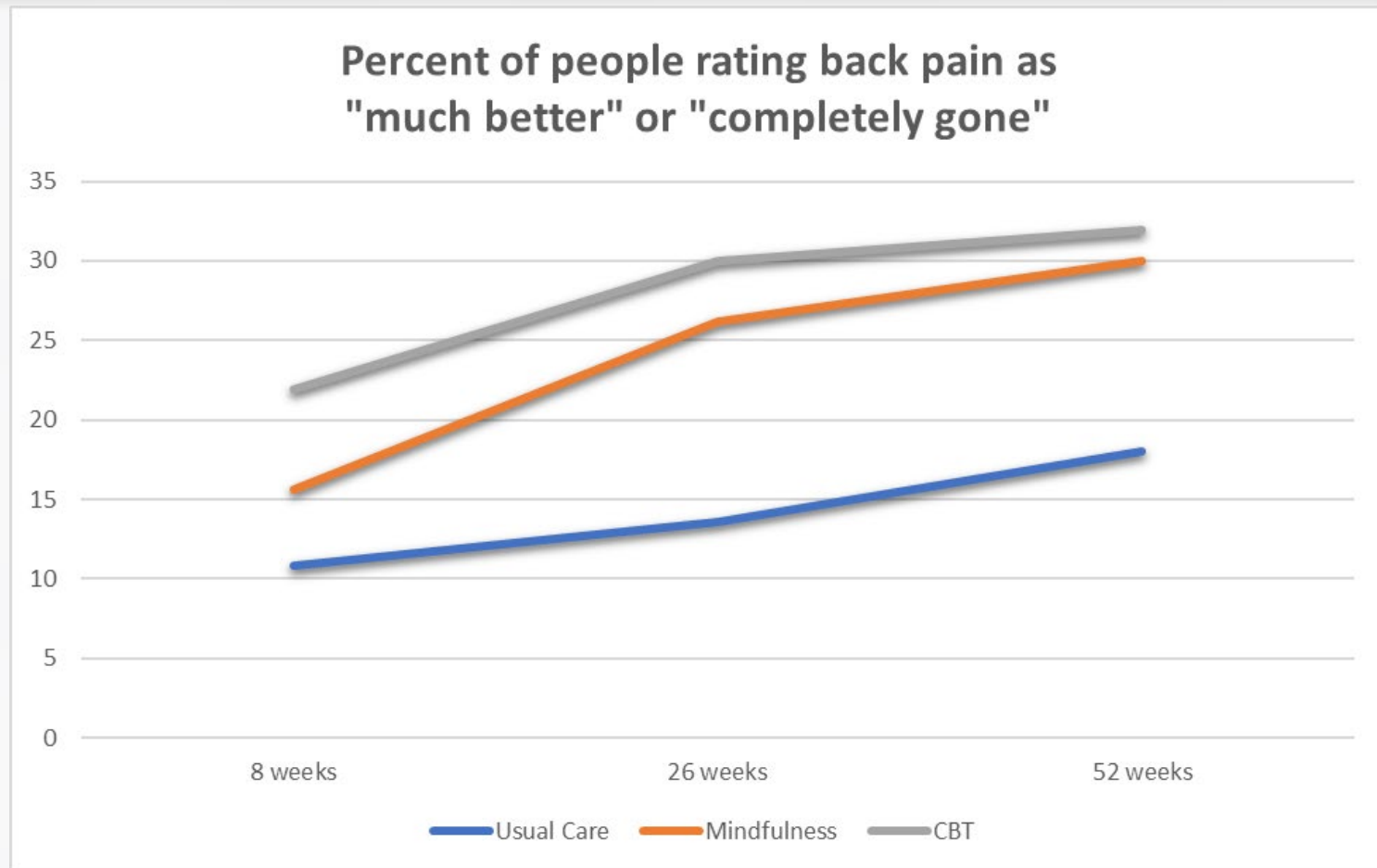
What we know

- No evidence that opioids are effective for long-term treatment of chronic pain.^{1,2}
- Risks of chronic opioid therapy: *major depression, opioid induced hyperalgesia, diversion, addiction, overdose, death*
- Epidemiologic studies have shown that chronic pain patients on COT have a worse quality of life than those who are not on COT.³
- Evidence supports non-traditional approaches to treatment of chronic pain
- Evidence supports behavioral therapy

There are better treatments

- Behavioral therapy⁴
- Physical therapy
- Treatment of mood disorders
- Exercise
- Acupuncture
- Yoga and other alternative therapies
- Amitriptyline, duloxetine, gabapentin and similar drugs may help

Evidence in support of BH Interventions



Cherkin, D. C., Sherman, K. J., Balderson, B. H., Cook, A. J., Anderson, M. L., Hawkes, R. J., ... Turner, J. A. (2016). Effect of Mindfulness-Based Stress Reduction vs Cognitive Behavioral Therapy or Usual Care on Back Pain and Functional Limitations in Adults With Chronic Low Back Pain. *JAMA*, 315(12), 1240. <http://doi.org/10.1001/jama.2016.2323>

CDC Guidelines 2016

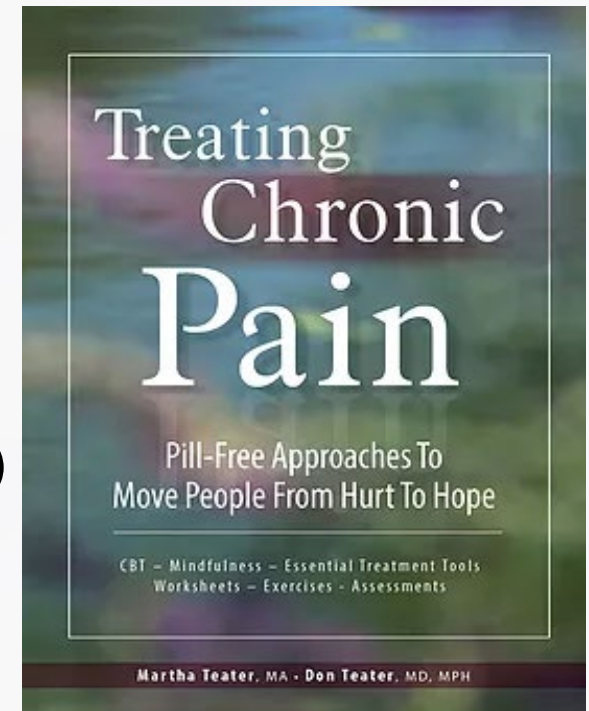
- CDC recommends behavioral therapy before any opioid for chronic pain
 - This means we have 100 million people who need behavioral interventions
 - Doctors need to be able to refer to trained providers

**GUIDELINE FOR
PRESCRIBING
OPIOIDS FOR
CHRONIC PAIN**

www.cdc.gov

Chronic Pain and Integrated Care

- Behavioral therapy options for chronic pain:
 - Short-term brief individual and group counseling
 - Cognitive Behavioral Therapy
 - Mindfulness training
 - Decatastrophizing
- Models for care:
 - John Otis (11 sessions)
 - VA CBT for Chronic Pain (11 sessions)
 - Teater Health Solutions (10 sessions)



Resources

- Teater Health Solutions: <https://www.teaterhs.com/>
- Understanding Central Sensitization Youtube video: <https://www.youtube.com/watch?v=n3VTk3TEZp8>
- Screening Tools:
 - Opioid Risk Tool (ORT)
 - Pain, Enjoyment in Life, & General Activity (PEG)
 - Pain Catastrophizing Scale (PCS)
 - Central Sensitization Inventory (CSI)

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References

1. Dowell D, Haegerich TM, Chou R. CDC Guideline for Prescribing Opioids for Chronic Pain — United States, 2016. *MMWR*. 2016;65. doi:10.1001/jama.2016.1464.
2. Teater D. *Evidence for the Efficacy of Pain Medications*. Itasca, Illinois; 2014. www.nsc.org/painmedevidence.
3. Eriksen J, Sjøgren P, Bruera E, Ekholm O, Rasmussen NK. Critical issues on opioids in chronic non-cancer pain: an epidemiological study. *Pain*. 2006;125(1-2):172-179. doi:10.1016/j.pain.2006.06.009.
4. Cherkin DC, Sherman KJ, Balderson BH, et al. Effect of Mindfulness-Based Stress Reduction vs Cognitive Behavioral Therapy or Usual Care on Back Pain and Functional Limitations in Adults With Chronic Low Back Pain. *JAMA*. 2016;315(12):1240. doi:10.1001/jama.2016.2323