

Psychological/Behavioral Strategies for Pain Management: Tools for PCPs to Use in a 20 Minute Visit

J. Alexis Ortiz, Ph.D.

Attending Psychologist / Clinical Instructor
Stanford University Addiction Medicine Program
ortiza@stanford.edu

CSAM TAPC Webinar
Friday February 24, 2017

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Disclosures/Conflicts of Interest

The speakers and planners of this webinar have no relevant financial relationships to disclose.

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Overview

- Case example
- Tips and techniques from the following modalities:
 - Motivational Interviewing (MI)
 - Cognitive Behavioral Therapy (CBT)
 - Dialectical Behavioral Therapy (DBT)
 - Acceptance and Commitment Therapy (ACT)
- Managing provider burnout
- Take home points
- Handouts: Resource list

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Case Example

- Serena, 46 year old married Caucasian female, presenting with chronic pain, depressive symptoms, insomnia, trauma hx, passive SI
- States she is "sick and tired of being in pain all the time"
- Soc Hx: Worked as a nurse until last year, has 3 children, limited finances
- Dx:
 - Fibromyalgia
 - Depression
 - Opioid use disorder (hx of hydrocodone dependence)
 - Insomnia
 - PTSD

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Tools from Motivational Interviewing

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

MI Tools: Foundational Skills

Open-ended questions – *“What can you do this week to help you, instead of your pain, be in the driver’s seat?”*

Affirmations – *“You’re doing a great job sticking with your opioid taper.”*

Reflections – Repeat/Paraphrase esp. pt’s change language - *“It’s really important to you to find other long-term solutions to deal with pain.”*

Summaries – Repeat/Paraphrase key take home pts – *“So your top reasons for wanting to stay off opioids are...”*



Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

MI Tools: Rulers - Importance, Confidence, Readiness

On a scale of 0 to 10, how **IMPORTANT** is it for you right now to change?

0 ____ 1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10
 Not at all Extremely
 Important Important

On a scale of 0 to 10, how **CONFIDENT** are you that you could make this change?

0 ____ 1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ 7 ____ 8 ____ 9 ____ 10
 Not at all Extremely
 Confident Confident

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

MI Tools: Rulers

- “On a scale from 0 to 10, how important is it for you to...”
 - Find ways to live the life you want even if you have pain?
 - Quit opioids?
 - Adhere to a pain management program?
- “On a scale from 0 to 10, how confident are you in your ability to...”
- “On a scale from 0 to 10, how ready are you to...”
- After **EACH QUESTION** ask follow-up: “Why a [number] and not [a lower number]?”
- Can also ask: What would help get you from a [number] to a [higher number]?” / “What would have to happen?”

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

MI Tools: Additional techniques

- Emphasize autonomy
- Ask permission before providing advice
 - *“Do you mind if I share some thoughts/tools/concerns about that?”*
- End of session question:
 - *“What are you going to take away from today’s session?”*
 - *“What’s the next step for you?”*
 - *“What will help you, instead of your pain, be more in control this week?”*

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Question 1: Which of the following is NOT an MI-consistent (OARS) strategy?

- A. “Why would it be important for you to find other ways besides medication to manage your pain?”
- B. “I have to tell you, you need to stop taking opioids now.”
- C. “You’re really determined to not let pain take away the joy in your life.”
- D. “It sounds like your health, wanting to be a good parent, and not wanting to be dependent on medication are your primary reasons for staying off of opioids.”

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Answer = B

“I have to tell you, you need to stop taking
opioids now.”

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Tools from
Cognitive Behavior Therapy

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

CBT Tool: Pain Cycle - Then ask about fit with own experience



CBT Tools: CBT for Chronic Pain

Skills to address interrelationships among thoughts, emotions, behaviors

- **Activity Pacing** – *“Sometimes we can get into a cycle of overdoing one day and then underdoing (being wiped out) the next day, which doesn’t help long-term. Would you be willing to try doing some consistent activity/walking to help make more steady progress? What might be the benefits of that? How many days would you be willing to do that?”*
- **Relaxation Training** – *“Extra tension in the body can worsen the pain, let’s practice taking 3 slow breaths together, in for 4 seconds, hold, then out for 6 seconds. Good.”*

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

CBT Tools: CBT for Chronic Pain

- **SMART Goals** – Help pts make goals: Specific, Measureable, Attainable, Realistic, Time-bound
- **Cognitive Restructuring** – *“When you tell yourself you’re always going to be miserable, how does that impact your mood and behavior? What would you tell a friend in the same situation?”*
- **Behavioral Activation** – *“It seems like you’ve taken a lot of enjoyable activities out of your life because of pain, that’s understandable, but likely not making you feel better long-term. What would you be willing to add back in this week that you enjoy? What do you miss about X activity?”*

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Question 2: Serena states “I work better having one really productive day, even though I end up paying for it later”, which CBT technique would be most indicated?

- A. Behavior Activation
- B. Activity Pacing
- C. Thought Stopping
- D. Relaxation Training

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Answer = B

Activity Pacing

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Tools from
Dialectical Behavior Therapy

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

DBT Tool: Validation

- “Finding the kernel of truth in another person’s perspective or situation; verifying the facts of a situation.” (Linehan, 1997)
- “Acknowledging that a person’s emotions, thoughts, and behaviors have causes and are therefore understandable.” (Linehan, 1997)
- What can we validate? (Linehan, 1997)
 - The facts of a situation
 - A person’s experiences, feelings, beliefs, opinions, suffering, difficulties
- VALIDATION DOES NOT MEAN AGREEMENT OR REINFORCEMENT
- Don’t validate the invalid

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Why validate?

When pts don’t feel validated...

- Anger, agitation
- Opposition
- Defensiveness
- Not understood
- Overwhelmed
- Ashamed
- Trapped
- Uncomfortable
- Do not adhere to treatment
- Do not return to treatment



Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Why validate?

When pts feel validated/feel invalidated...

- Understood
- Respected
- Engaged
- Collaborative
- Safe
- Empowered
- Hopeful
- Interested
- Wanting to come back to treatment
- Willing to try out recommendations

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17



Scandinavian Journal of Pain

journal homepage: www.ScandinavianJournalPain.com



Original experimental

I see you're in pain – The effects of partner validation on emotions in people with chronic pain

Sara M. Edlund^{a,*}, Maria L. Carlsson^a, Steven J. Linton^a, Alan E. Fruzzetti^b, Maria Tillfors^a

^a Center for Health and Medical Psychology (CHAMP), School of Law, Psychology and Social Work, Örebro University, Sweden

^b Department of Psychology 298, University of Nevada, Reno, USA

HIGHLIGHTS

- Validation communicates understanding and acceptance of the other person's experience.
- We examine feasibility and effects of a brief validation training in chronic pain couples.
- The training increases validation and decreases invalidation in spouses to people with chronic pain.
- This is associated with decreases in negative affect in people with chronic pain.
- This suggests the usefulness of further research on validation with these couples.

ARTICLE INFO

Article history:
Received 6 May 2014
Received in revised form 14 July 2014
Accepted 20 July 2014
Available online xxx

Keywords:
Chronic pain
Validation
Invalidation
Partner communication
Affect
Emotion regulation

ABSTRACT

Background and aims: Chronic pain not only affects the person in pain, but can also have a negative impact on relationships with loved ones. Research shows that chronic pain is associated with difficulties in marital relationships, which in turn is related to a variety of negative outcomes such as psychological distress and conflict within the family. This suggests that couples where chronic physical pain is present also struggle with emotional pain and relationship problems, and thus targeting relationship skills and interpersonal functioning might be helpful for these couples. Although studies in this area are promising, their numbers are few. In the present study, validation as a way of communicating is suggested for handling emotional expression in interpersonal interactions. Validation communicates understanding and acceptance of the other person's experience, and it has been shown to have a down-regulating effect on negative emotions. It has previously been demonstrated to be important for these couples. However, the feasibility and effects of increasing partner validation in these couples are unknown. Therefore, the aim of the present study was to investigate if a brief training session in validation for spouses would result in more validating and fewer invalidating responses towards their partners with pain, and to investigate if changes in these behavioural responses were associated with changes in emotion and pain level in the partner with pain.

Methods: Participants were 20 couples where at least one partner reported chronic pain. The study employed a within-groups design in which spouses of people with pain received validation training (without their partner's knowledge), and their validating and invalidating responses were rated pre- and post-intervention using a reliable observational scale. Also, positive and negative affect and subjective pain level in the persons with pain were rated pre- and post-intervention.

Results: Results showed that the validation training was associated with increased validating and decreased invalidating responses in the partners. Their spouses with chronic pain reported a decrease in negative affect from pre- to post-training.

Conclusions: Our results indicate that the partner or closest family member, after brief validation training, increased validating responses and decreased invalidating responses towards the person with pain, which had an immediate positive impact on emotions in the other person.

© 2014 Scandinavian Association for the Study of Pain. Published by Elsevier B.V. All rights reserved.

Validation Stems (+)

1.) Pt: "I just need pain meds, that's the only thing that helps."

Pr: "I know you want help managing this pain, and I want to support you in that. We don't offer opioids, here is what we offer... have you tried X before?..."

2.) Pt: "You don't get it, I've been through all this stuff before, I'm just exhausted."

Pr: "It makes sense that you feel exhausted given being in pain for so long, and yet you're here today, I see that there's a part of you that wants to find another way to manage this pain."

3.) Pt: "Doctors keep telling me to just meditate, that's not going to make my pain go away."

Pr: "You're feeling like those things won't make any difference. I understand that, at the same time, I can tell you many patients find them helpful. I can recommend some apps, books, or programs so you can check it out for yourself, which would you prefer?"

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

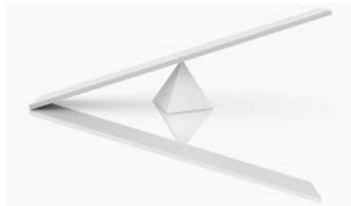
DBT Tool: STOP (mindfulness)



- STOP
- Take a step back
- Observe: use 5 senses, acknowledge the pain, notice what else is present besides pain
- Proceed mindfully: Primary goal? Top 3 reasons why I want to stay off opioids? What would make things better/worse (that is in my control) right now?
- Practice with pt:
 - "Ok, let's try this together, let's stop, take 3 breaths, what do you notice in and outside of your body right now, what can you do for yourself in this moment?"

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

DBT Tool: Radical Acceptance

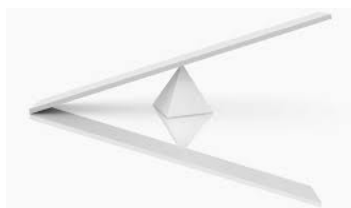


ACCEPTANCE VS. CHANGE

"Sometimes we can't keep painful events and experiences from coming our way. We can't always control what happens to us, but we can choose how we respond. We can fight against reality and then that's where our time and energy will go, OR we can decide to try and work with what is happening right now."

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

DBT Tool: Radical Acceptance



ACCEPTANCE VS. CHANGE

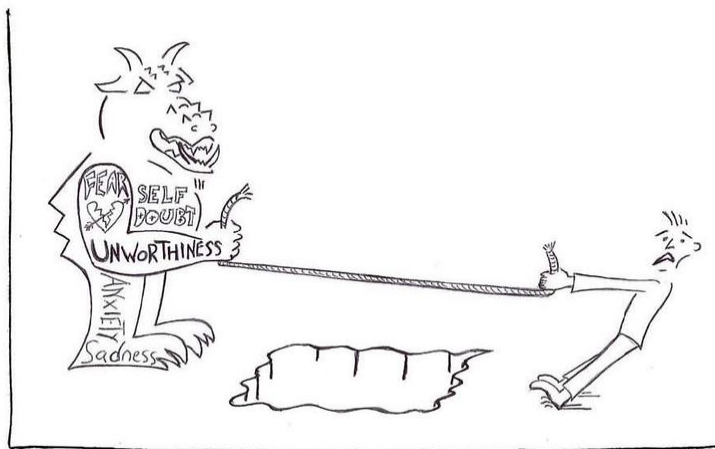
- *"Radical acceptance means completely accepting the reality that we are in pain at this moment. It does not mean wanting or liking the pain. It is acknowledging that life can be worth living even with painful events in it."*
- *"What is within your control to change?"*
(e.g., behavior, narrative, meaning-making)
- *"What would be helpful to bring acceptance to in your life?"*
(e.g., presence of at least some pain at some point)

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Tools from Acceptance and Commitment Therapy

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

#TheStrugglesReallyReal



Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

ACT for Chronic Pain

- ACT is less about making pain go away and more about getting disentangled from thoughts/feelings and getting pts moving in a direction that is important to them.
- Where is their focus/effort? - Is the pt's life about trying to not feel pain or about building a rich, full, meaningful life?
- What thoughts/stories are they fused with?
 - ACT is about living life from the feet up, not the head down
- *"What has pain been keeping you from doing that is important to you?"*
- *"How would your life look different if you were more focused on what mattered to you instead of trying to feel less pain?"*



Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Question 3: What would NOT be an ACT-consistent message to communicate to Serena?

- A. "Let's concentrate on getting rid of this pain."
- B. "I hear that you want the pain to go away, if you didn't have pain what would look different for you?"
- C. "What do you care about?"
- D. "Would you be willing to have some pain in the service of pursuing the things that are important to you?"

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Answer = A

“Let’s concentrate on getting rid of this pain.”

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

What about us? Managing Provider Burnout

- **Radical self-care** – Who heals the healer?
- **Consult routinely** – State your needs: problem-solving, validation for yourself, or empathy for the patient
- **Mindfulness** – STOP before/after seeing the pt, take a breath when you walk through the doorway, digital detox/technology hiatus
- **Celebrate small victories** – What are 3 things that went well with pt care recently?
- **(Re)connecting with values and purpose** – How is doing this work consistent with what you value in life/what is important to you?

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Reconnecting with Empathy



Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Take Home Points

- **Use your resources** – Refer to behavioral health if available
- **Validate pt's (and our own) suffering/struggle**
- **Empower the pt** - *why is this important to you to make changes?, what do you want to look different in your life, what would help with that?*
 - Shift problem-solving onus back to pts in connection with their own values
- **Remember the power of (and evidence base for) positive reinforcement**
- **CMEs** – Consider additional training in Motivational Interviewing, CBT for Chronic Pain, ACT for Chronic Pain, DBT

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

You have **BRAINS** in your **HEAD**.
You have **FEET** in your **SHOES**.
You can **STEER** yourself in
any **DIRECTION** you **CHOOSE**.
—Dr. Seuss

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

Thank you!

Questions?

Feedback?

Ortiz CSAM Webinar Psych Pain Mgmt Tools 2-24-17

February 24, 2017



NEXT WEBINAR: Friday, 03/24/2017:
Managing Acute and Perioperative Pain in Patients on
Medication-Assisted Treatments (MAT)

Friday, 04/28/2017: Tapering Opioids

Friday, 05/19/2017
Friday, 06/23/2017
Friday, 07/28/2017
Friday, 08/18/2017*
Friday, 09/22/2017



You can view our previous webinars

for a small fee for CME/CEU
on the CSAM Education Center at:
<http://cme.csam-asam.org/>

OR

Free on the CHCF TAPC Program Resource Page at:
<https://tapcprogram.com/>

Psychological/Behavior Strategies for
Pain Management: Tools for PCPs to Use
in a 20 Minute Visit

February 24, 2017

Save the date!
CSAM Addiction Medicine Review Course
and Board Exam Preparation
August 24 - August 27, 2017
Hilton San Francisco Union Square



Psychological/Behavior Strategies for
Pain Management: Tools for PCPs to Use
in a 20 Minute Visit