



MORE THAN A SYMPTOM: the truth about CHRONIC PAIN

BY Marlene Oliveira PHOTOGRAPHY BY Stella Jurgen

If you don't know much about chronic pain, you're not alone. Though 18% of Canadians suffer from some form of chronic pain, it is not at all well understood.

"You can't see pain," says patient, Carol MacEachern, whose pain arises from living with two conditions: multiple sclerosis and scleroderma, a thickening and hardening of tissues, caused by overproduction of collagen. "Pain is invisible, unless it's reflected on someone's face. But for those of us living with it, it's here 24/7 – whether others see it or not."

Beyond its impact on the individual, chronic pain has societal repercussions. Chronic pain is the single biggest cause of disability for Canadians, leading to lost productivity, more frequent physician visits and an increased burden for caregivers. According to the Chronic Pain Association of Canada, the annual cost of chronic pain, including medical expenses, lost income, and lost productivity, but not the social costs, is estimated to exceed \$10 billion.

Chronic pain is defined as pain that persists for more than three months, beyond the normal healing time of an injury. It can be intermittent or persistent and can be considered a disease in itself. Some of the most common conditions associated with chronic pain include arthritis, headaches and low back pain – though the list is long and also includes cancer pain, cardiovascular pain, fibromyalgia, shingles, diabetic neuropathy and more.

Unfortunately, despite the prevalence of chronic pain, we lack sufficient resources to treat it. With a medical model that tends to focus on disease management, treating pain becomes a secondary priority, often leaving patients to suffer unnecessarily.

"We live in a John Wayne society," explains Dr. Roman Jovey, M.D. and physician director of the addictions and concurrent disorders program at The Credit Valley Hospital. "Being stoic is valued, but that can do more harm than good. We have the technology to optimally manage patients' pain, but they

need to make their voices heard."

The problem of patients' hesitations to speak up is compounded by a lack of pain management resources. Most healthcare facilities are missing a consistent and comprehensive approach to treating pain; a situation that Credit Valley is working to address through their pain steering committee.

According to Marcie Flynn-Post, pain management coordinator at The Credit Valley Hospital, "The ideal treatment for chronic pain is interdisciplinary. Each patient experiences pain differently. We need to approach this complex issue from a variety of perspectives." An interdisciplinary approach to chronic pain management should include a doctor who specializes in pain, along with a team of healthcare professionals who can address different aspects of pain. "Ideally, treatment involves not only the necessary medications, but may also include counseling, physical and/or occupational therapy, relaxation therapy and alternative approaches like acupuncture and therapeutic touch."

One of the biggest myths is that you'll never be pain free. If managed appropriately, *there's no reason patients should suffer* with unbearable pain.

Marcie Flynn-Post, pain management coordinator at The Credit Valley Hospital

Unfortunately, in Canada we simply do not direct enough resources to pain management. For example, according to the Canadian Pain Society, veterinary medicine students receive an average of 98 hours of designated pain education, in contrast with medical schools averaging 16 hours, and nursing programs, which average 31 hours. It's not surprising, then, that according to the Canadian National Pain Study conducted in 2002, only 36% of patients felt that their pain was very effectively treated.


"There is no reason people should suffer from chronic pain – they don't have to settle," says Flynn-Post. "One of the biggest myths is that you'll never be pain free. If managed appropriately, there's no reason patients should suffer with unbearable pain."

Another myth that stands in the way of proper treatment has to do with attitudes about pain medications. According to Dr. Jovey, the public is unnecessarily fearful about opioids, a class of pain-relieving drugs derived from the opium plant. Many individuals are afraid of becoming addicted to opioids and in some cases, healthcare professionals can be fearful of prescribing them. The truth is, unless you have a past history or family history of addictions, the odds of becoming addicted are very low. The problem is, turning down this valid option for acute pain relief can often mean being under medicated and severe acute pain is a risk factor for developing long-term chronic pain.

MacEachern's treatment and coping has a lot to do with the supports she has around her, which include a great care team, her extremely supportive husband and inspiring children. Perhaps most important is MacEachern's attitude; "Keeping busy distracts me, keeps my mind busy. To avoid wallowing in my sorrow, I focus on giving back."

MacEachern's volunteer contributions are countless: to name a few, she's currently on an accessibility task force for The Credit Valley Hospital and in recent years has served in leadership roles for the City of Mississauga's accessibility advisory committee, her co-op housing Board of Directors and the Multiple Sclerosis Society, among others. "I'm blessed with the voice to speak on behalf of people with disabilities," MacEachern explains. "If I can advocate for them in any way possible, it's an honour and a pleasure to do so."

When it comes to chronic pain, patient advocacy is just what is needed, says Dr. Jovey, "Patients need to speak up and make their voices heard: for greater awareness and acceptance of treatment options, for more education of healthcare professionals, and for more healthcare resources supporting pain management."

For more information about chronic pain, visit www.painexplained.ca and www.canadianpaincoalition.ca. 

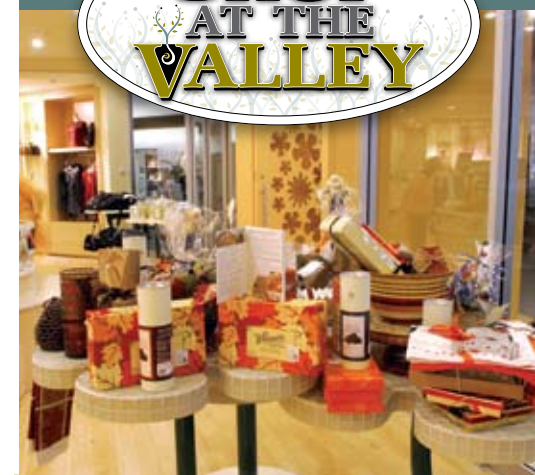
what is pain?

Acute pain is usually due to an injury, surgery or cancer and serves to protect us. When tissue is damaged, free nerve endings in your skin send signals to your brain via your spinal cord. Your brain then sends signals to your body to respond to pain, such as removing your burning finger from a hot stove.

Chronic pain is pain that persists over three months, beyond when an injury should have healed. Chronic pain can be intermittent (occurs in a pattern) or persistent (lasting more than 12 hours daily) and can be considered a disease itself. Usually the pain results from a known cause, such as surgery, or inflammation from arthritis. Sometimes the cause of this pain is abnormal processing of pain by the nervous system as in the case of fibromyalgia.

Source: www.canadianpaincoalition.ca

When You're at Credit Valley,
Visit The Shop At The Valley



Inpatient Lobby
2200 Eglinton Avenue West
Mississauga L5M 2N1

Mon to Fri 10am – 8:30pm
Sat 11am – 4pm
Sun 12:30pm – 4:30pm

905-813-1100 ext. 7116