

Chronic Pain Management: A Patient's Guide



Fast Facts About Chronic Pain

Chronic pain is defined as persistent or recurrent pain lasting longer than three months. (p. 8)¹ Chronic pain is a national public health problem. In 2018, the Centers for Disease Control and Prevention (CDC) reported one in five or about 50 million Americans suffer from some form of chronic pain. (p. 8)¹



Chronic pain accounts for an estimated \$560 billion each year in direct medical costs, lost productivity, and disability programs. (p. 5)¹



Behavioral health conditions may complicate the management of each condition and contribute to overall functional decline. A variety of high-risk medication-related behaviors (e.g., taking more than prescribed, running out early, problematic findings on urine tests) may suggest the presence of a co-occurring disorder, including substance use disorder. Other factors including co-use of other prescribed controlled substances and difficulty engaging in multimodal treatment plans or attending regular clinic appointments can add to the challenge of safely providing opioids in the primary care setting. (p. 65)¹



If you find yourself struggling with chronic pain, contact your health care provider to discuss your concerns and recommended treatment options. Together, you can develop a collaborative treatment plan that considers your specific needs, situation, and lifestyle. Be open and honest with your health care provider so that your concerns and goals can be clearly communicated and addressed upfront.

Remember, start slowly and take small steps towards your goal of feeling better!

Available Treatment Options

The experience and perception of pain differs from person-to-person due to a combination of biological and psychosocial factors. Fortunately, there are a variety of treatment options that are available to help you with your chronic pain, including:

- Prescribed treatments (prescription medications and medical treatments)
- Non-prescription treatments (over-the-counter drugs and pain remedies)
- Complementary and alternative medicine (CAM) options

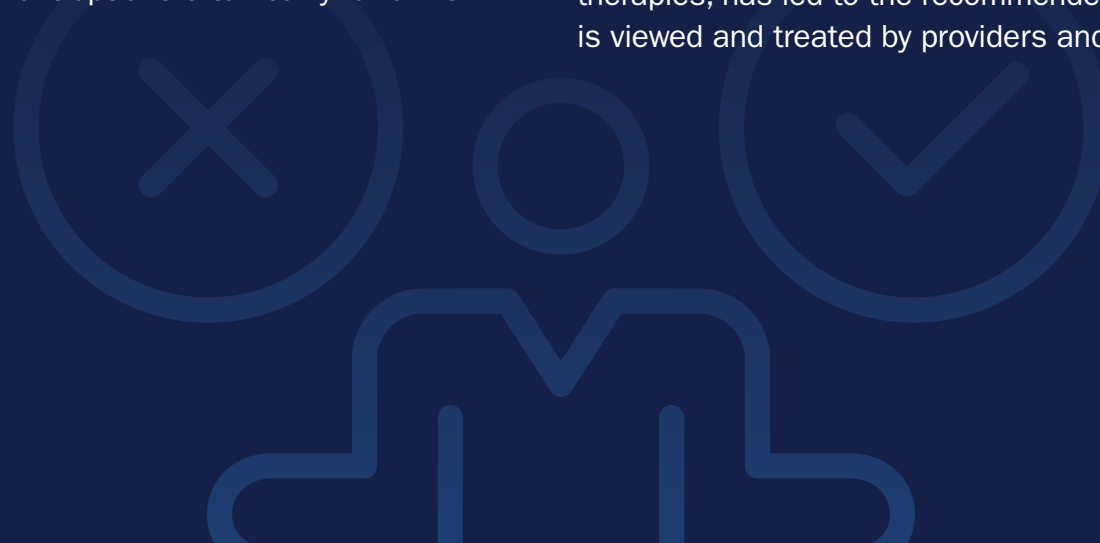
There isn't a specific treatment known to relieve chronic pain in everyone, therefore a combination of treatments may be needed to relieve your chronic pain.

When discussed in advance with your health care provider and incorporated as part of your treatment plan, over-the-counter (non-prescription) treatment options may be used to reduce your pain. This approach may also improve your quality of life. These treatment options often carry lower risk of side effects.

Using non-prescription treatments allows you to maintain this approach over a longer period while managing your chronic pain in a safer manner. However, if over-the-counter medications do not provide you with relief, your health care provider may prescribe you a stronger medication or treatment. This may include:

- Muscle relaxants
- Anti-anxiety medications
- Antidepressants
- Nonsteroidal anti-inflammatory drugs (NSAIDs)
- Prescription injections (steroids, toxin nerve block)
- Surgical implant

While opioid medications are also available by prescription, these should not be considered first line or routine therapy for chronic pain, outside of active cancer, palliative, and end-of-life care. This approach, supported by the evidence of both the safety and efficacy for non-pharmacologic and non-opioid pharmacologic pain therapies, has led to the recommended transformation in how pain is viewed and treated by providers and patients alike.¹



Options for Managing Chronic Pain

Non-Prescription Drugs

Class (Examples Listed)

Over-the-counter medications (e.g., acetaminophen, aspirin, ibuprofen, naproxen)

Topical pain relievers (e.g., creams, lotions, sprays). Preoperative education, including pain management education on the use of multi-modal pain regimens such as NSAIDs, acetaminophen, and non-pharmacologic strategies for the management of pain.¹

✓ YES

Recommended?

May offer relief for mild pain.

Opioid Prescription Drugs

Class (Examples Listed)

Opioid pain medications (e.g., codeine, fentanyl, hydrocodone, oxycodone, oxymorphone, morphine)

✗ NO

Recommended?

Have serious side effects and risks. They are not recommended as first line medications or routine therapy for chronic pain.

During the first decade of the 2000s, opioid use expanded beyond acute and perioperative care, palliative care, end-of-life care, and cancer pain. Chronic pain management became synonymous with opioid prescribing, with significant numbers of patients in pain clinics receiving opioids long-term. The American Medical Association (AMA) reported nearly half of all heroin users started with an addiction to an opioid medication prior to switching for ease of availability. Although the number of prescriptions for opioids has decreased, deaths involving drug overdose increased over 4% from 2018 to 2019 alone. This data suggests opioid users are increasingly seeking and accessing these drugs outside of legitimate medical channels. (p. 7)¹

Non-Opioid Pharmacologic Management

Class (Examples Listed)

- Muscle relaxants, anti-anxiety drugs
- Antidepressants
- Nonsteroidal anti-inflammatory drugs (NSAIDs)
- Interventional pain care (e.g., joint injection, radiofrequency ablation) (p. 25)¹

✓ YES

Recommended?

May be helpful.

Non-Pharmacologic Pain Treatments/Complementary and Alternative Medicines (CAMs)

Treatments (Examples Listed)

Behavioral therapies (e.g., cognitive behavioral therapies) (p. 25)¹

✓ YES

Recommended?

Can teach you ways to reduce your pain, as well as effective coping skills to help you manage your pain to improve your overall functioning.² Discuss with your health care provider prior to beginning a new therapy program.

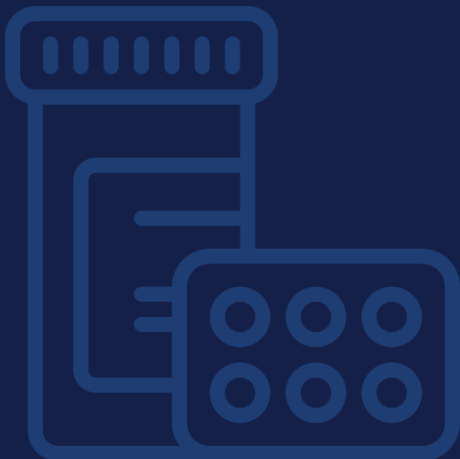
CAMs (Examples Listed)

- Exercise programs (e.g., swimming, biking, walking, rowing)
- Physical/movement-based therapies (e.g., physical therapy)
- Manipulative therapies (e.g. chiropractic care)
- Complementary and integrative health treatments (e.g., acupuncture) (p. 25)¹

✓ YES

Recommended?

May improve your physical and emotional well-being while reducing your sensitivity to pain when used in conjunction with your medical treatment plan.² Discuss with your health care provider prior to beginning a new diet or exercise program.



Self-Management Resources for Managing Chronic Pain

Treating your chronic pain begins with educating yourself and effectively managing your pain to reduce the negative effects it has on other areas of your life. Start by following the treatment plan you've discussed with your health care provider and think about different self-management strategies that you can use to promote your well-being.

Activity Pacing Handout

Veteran's Affairs: Activity pacing handouts help patients cope with pain by developing alternating planned periods of rest.

Helpful Apps for Self-Management Strategies

Mindfulness Coach: Teaches mindfulness techniques to reduce stress, improve depression and emotional balance.

Additional Resources



Military OneSource Provides counseling services free-of-charge for service members and dependents for 12 sessions (can be extended as needed). Also provides 24/7 support and information on housing, financial, legal, medical and other psychological services.

- State-side: 800-342-9647
- Overseas: 703-253-7599
- Collect: 484-530-5908

Chat: <https://livechat.militaryonesourceconnect.org/chat/>
www.militaryonesource.mil



SAMHSA National Helpline: Provides 24/7 confidential treatment referral and information
Call: 800-662-HELP (4357) | www.findtreatment.samhsa.gov/

988 Suicide & Crisis Lifeline: Provides 24/7 free and confidential support
Call or Text: 988 | www.988lifeline.org/

Behavioral Health Treatment Services Locator: Provides 24/7 confidential services.
To locate treatment facilities: www.findtreatment.samhsa.gov/



inTransition offers specialized coaching and assistance for active-duty service members, National Guard members, reservists, veterans, and retirees to help them adapt to their transitions between systems of behavioral health care.

- State-side: 800-424-7877
- Overseas: 800-748-81111 (in Australia, Germany, Italy, Japan, and South Korea only)

www.health.mil/inTransition

References

- 1 Veterans Affairs and Department of Defense. (2022). *VA/DOD Clinical Practice Guideline for the Use of Opioids in the Management of Chronic Pain*. Version 4.0. <https://www.healthquality.va.gov/guidelines/Pain/cot/VADoDOpioidsCPG.pdf>
- 2 Veterans Affairs and Department of Defense. (2022). *VA/DOD Clinical Practice Guideline for the Use of Opioids in the Management of Chronic Pain: Patient Summary*. <https://www.healthquality.va.gov/guidelines/Pain/cot/VADoDOpioidsCPGPatientSummary.pdf>



Department of Defense health care providers who use this information are responsible for considering all applicable regulations and policies throughout the course of care and patient education. Updated February 2023 by the Psychological Health Center of Excellence.