

Chronic pain: what can I do?

Most of us have experienced acute pain. This pain usually settles once the cause has healed or been treated. When pain lasts longer than expected, even after the body has healed, we call it chronic pain.

Chronic pain is complex. Many factors in our lives can influence it.

Everyone experiences chronic pain differently. The body, emotions, stress, family and social life, and even genes can affect pain.

Because of this, a team of health professionals usually manages chronic pain best. Treatment should match each person's needs.

Health professionals treat chronic pain differently from short-term pain. Different types of pain also need different treatments. For example, nerve pain may need different medicines from pain caused by sore muscles, joints, or injuries. Health professionals also treat cancer pain differently.

This fact sheet is about chronic pain that is not caused by cancer.

Getting the best results

The goal of managing chronic pain is to reduce the impact pain has on your daily life.

Most people need a mix of strategies. These may include medicines, learning about pain, gentle exercise, pacing activities, slowly building confidence with tasks, relaxation, stress management, emotional support, social connection, good nutrition, and better sleep habits.

Acute pain often goes away as the body heals. Medicines may help. Chronic pain is different. Medicines usually work best when used with other strategies.

Whatever strategies you use, speak to your GP or an [AHPRA-registered](#) allied health professional. They can help you decide what is best for you.

Non-medicine treatments

Everyone manages chronic pain differently. No single approach works for everyone.

Many people get the best results when they use a mix of strategies that support their body, mind, and daily life.

You can try strategies like finding enjoyable ways to move your body, pacing your daily activities, building confidence with movement, getting stronger, improving sleep and nutrition, relaxing and managing stress, and staying connected with others.

Learning how chronic pain works can also help you understand your pain and feel more confident managing it.

The goal is to find what helps you feel more confident, stay active, and manage your pain.

Over time, you may start to notice what makes your pain better or worse. This can help you learn ways to calm your pain system and make it feel less on high alert.

Allied health professionals, such as exercise physiologists, osteopaths, physiotherapists, and psychologists, can help you use these strategies safely and confidently.

You can find many resources available on the [Painaustralia website](#).



Using over-the-counter medicines

Speak to your GP or pharmacist about the best options before you buy any over-the-counter medicines.

This is especially important if you have other medical conditions, such as stomach, kidney, liver, or heart problems.

To manage your pain safely and effectively, talk to your GP or pharmacist about:

- Where your pain is and how long you have had it.
- Possible side effects of your medicines.
- Whether a pain-management approach is right for you.
- Whether the pain medicine could affect any other medicines you take.

You can buy some pain medicines, like paracetamol and ibuprofen, without a prescription. These medicines can help with mild to moderate pain when you use them correctly and alongside other pain relief strategies.

Always check the label and follow the instructions, as taking too much or using them too often can be harmful. Ask your doctor or pharmacist if you are unsure.

Combination pain medicines

Combination pain medicines contain more than one active ingredient. Some products combine ibuprofen or paracetamol with a low dose of codeine.

You can now also buy over-the-counter medicines in Australia that contain specially formulated ibuprofen and paracetamol.

Tell your doctor and pharmacist if you use any over-the-counter medicines, because they may affect other medicines you take. Add them to your medicines list so you can keep track of everything you take. You can create and print a medicines list on our website. Many over-the-counter medicines and most prescription medicines have a Consumer Medicine Information (CMI) leaflet. This leaflet gives you important information about what to know before, during, and after taking your medicine. Ask your pharmacist or doctor for the CMI leaflet for your medicine.

Using prescription medicines for pain

NSAIDs

Some non-steroidal anti-inflammatory drugs (NSAIDs,) are available over the counter. ibuprofen is one example. You need a prescription for other NSAIDs, such as celecoxib and naproxen.

NSAIDs can help with pain, fever, and swelling for a short time. However, they can also cause unwanted side effects. Speak to your doctor or pharmacist about the lowest dose that helps your symptoms, and only use them for as long as needed.

NSAIDs may not suit people with stomach problems, heart problems, kidney problems, high blood pressure, or asthma.

Opioids

Prescription opioids include buprenorphine, fentanyl, morphine, oxycodone, tramadol, tapentadol, and higher doses of codeine.

Doctors often use opioids to treat severe short-term pain or cancer pain. However, opioids usually do not work well for chronic pain that is not caused by cancer, especially over the long term.

Opioids can be addictive and may cause side effects. They can make you feel sick, constipated, sleepy, or less alert, which can affect your ability to drive or do other tasks safely. If you take opioids, do not drink alcohol, and be careful with other medicines that make you sleepy. Mixing these can increase the risk of serious harm, including accidental overdose and death.

The longer you take opioids, the higher your risk of harm. Up to 80% of people who take opioids long term experience side effects.

Supplements

Some people use glucosamine or chondroitin for osteoarthritis pain. However, we do not yet know whether these products help in the long term.

Some early evidence suggests that omega-3 fatty acids may help with some types of pain, such as fibromyalgia, neck and shoulder pain, and menstrual pain.

Early studies have not shown clear benefits for some other types of pain, such as migraines and osteoarthritis. However, most studies so far have been small or done in animals. Researchers need larger clinical trials to understand whether omega-3 fatty acids or fish oil can help people with these conditions.

Questions to ask your doctor

When you choose a pain medicine, ask your doctor or pharmacist:

- Should I take this medicine regularly or only when I feel pain?
- How long will it take to work?
- Is it safe to use for a long time?
- How will this medicine help me?
- Could this medicine make me feel drowsy?
- What side effects should I look out for?
- What can I do to reduce side effects?
- Could this medicine affect my other medicines?
- Could I become addicted to this medicine?
- What should I do if the pain does not go away?
- What other options should I consider?

Build a team around you: managing chronic pain

Chronic pain is not just about one sore body part. Many things can affect it, including:

- Your body; such as injury, illness, inflammation, or how your nerves send pain messages.
- Your thoughts and feelings; such as stress, mood, sleep, worry, or fear about pain.
- Your daily life; such as work, school, family, friends, activities, and the support you have around you.

All of these things can work together and change how much pain you feel.

This is why chronic pain care often works best when you and your care team look at the whole person, not just the painful area.

Adapted with permission from Chronic pain: what can I do?, developed by the Australian Commission on Safety and Quality in Health Care. NPS MedicineWise: Sydney, 2015.

Ask your GP about a team care approach (GP Chronic Condition Management Plan)

Because chronic pain can affect your body, mind, and daily life, a team of health professionals may be able to support you.

Your GP may be able to create a GP Chronic Condition Management Plan, also called a GPCCMP. This plan can help your GP and health team work together.

If you are eligible, a GPCCMP may also help you access up to 5 Medicare-subsidised allied health or primary care services each calendar year.

You may see one type of health professional, or a mix of different health professionals, depending on what your GP thinks will help you most.

You can read more about the eligible allied health [services here](#).

Ask your GP whether a team care approach or GPCCMP could help you, and whether you are eligible.

