

# Multidisciplinary Pain Management

## Key Points

- Multidisciplinary pain management address the physical, psychological and environmental or social factors that contribute to the pain experience.
- Chronic pain must be managed differently from acute pain.
- Patients with chronic pain benefit from education and self-management strategies that help reduce pain and disability.

## What is multidisciplinary pain management?

Multidisciplinary (or interdisciplinary) pain management consists of treating the physical, psychosocial, medical, vocational and social aspects of chronic pain, and there is growing evidence of its effectiveness in the treatment of chronic pain.<sup>1,2</sup>

The multidisciplinary team should include a physician, psychologist or psychiatrist, physiotherapist or other allied health professional and pharmacist and may also include a vocational counselor or social worker.<sup>1</sup>

Treatment is not 'one size fits all' but needs to be person-specific. A critical step in the development of an effective pain management plan is face-to-face discussion by team members of the relative importance of factors identified by them in the patient.<sup>1</sup>

Although a multidisciplinary approach may include medical interventions and medication, it is largely based on non-invasive and non-pharmacological treatments.

Shared medical records facilitate ongoing communication between team members, and patients involved in this process should register for a Personally Controlled Electronic Health Record (PCEHR) through eHealth.<sup>3</sup>

Patients may also benefit from joining a pain support group in their local area, and this should be encouraged.

The multidisciplinary approach to pain management is a key recommendation of Australia's National Pain Strategy. It is also endorsed by the International Association for the Study of Pain.<sup>2,4</sup>

## Is the multidisciplinary approach more effective than traditional methods?

Patients with chronic pain often receive the same approach to treatment that would be applied to acute pain. However, this treatment is generally ineffective, contributing to only a 30 percent reduction in pain, on average.<sup>5</sup>

Use of medication such as morphine or other opioid alone may confer analgesic benefit but is unlikely to result in psychological or functional improvement.<sup>6</sup>

For people with persisting pain and disability, unless something specific and treatable has been overlooked, curative treatment is very unlikely and its very pursuit may not be risk-free.<sup>7,8</sup>

For example, pain associated with emotional disorders should not be treated with morphine; and multiple back operations may not be the best solution for chronic back pain.<sup>1</sup>

## What are the key elements of a multidisciplinary pain management plan?

The National Pain Strategy recommends a multidisciplinary pain management plan that includes a combination of medical approaches, physiotherapy, and psychological interventions based on Cognitive Behavioural Therapy (CBT).<sup>2</sup>

CBT approaches to pain management are based on the evidence that chronic pain is best understood within a bio-psycho-social framework. A thorough assessment of medical (somatic) aspects of each patient, as well as careful assessment of psycho-social contributors to the patient's difficulties, provide the basis for the CBT intervention that may be targeted at multiple contributing factors.<sup>9,10</sup>

CBT pain management programs provide an additional option for limiting the impact of pain on the patient and assisting them to resume normal functional activities.<sup>11,12</sup>

## What is the role of self-management in pain management?

Substantial evidence shows that patients with chronic pain who are engaged in active approaches to manage their pain have less disability than those who are engaged in passive therapies, such as taking medication or surgery.<sup>1</sup>

Self-management begins with helping the patient understand their pain is unlikely to disappear, and treatment is unlikely to return them to their previous condition. Once they have come to terms with this, they can be encouraged to take an active role in managing their pain.<sup>14</sup>

A key element of self-management is the concept of pacing – incorporating a sufficient amount of activity every day and keeping it at an even level throughout the day – in order to keep the body conditioned, and avoid pain episodes sparked by overactivity.<sup>14</sup>

Another important technique in self-management is desensitisation – where the patient learns to accept their pain and understand it is not harmful, and not to react to it in a negative way, effectively retraining their brain.<sup>14</sup>

### Useful resources

- [www.painaustralia.org.au](http://www.painaustralia.org.au)
- [www.painmanagement.org.au](http://www.painmanagement.org.au)
- [www.chronicpainaustralia.org.au](http://www.chronicpainaustralia.org.au)
- [www.aci.health.nsw.gov.au/chronic-pain](http://www.aci.health.nsw.gov.au/chronic-pain)
- [www.painhealth.csse.uwa.edu.au](http://www.painhealth.csse.uwa.edu.au)
- [www.hnehealth.nsw.gov.au/pain/community](http://www.hnehealth.nsw.gov.au/pain/community)
- [www.nps.org.au](http://www.nps.org.au)
- [www.move.org.au](http://www.move.org.au)
- [www.arthritisaustralia.com.au](http://www.arthritisaustralia.com.au)

## How can the multidisciplinary approach be implemented?

While there is a shortage of pain clinics sufficient to treat all Australians living with pain in a timely manner, the National Pain Strategy recommends that the vast majority of people with pain could be effectively treated in primary care.

Education and training programs are now available for GPs and other primary care professionals to provide knowledge about best-practice pain management and to facilitate the formation of multidisciplinary pain teams to work collaboratively to treat patients in primary care. Community based programs are now available in some areas and information about these can be accessed from the Painaustralia website.

A leading example is the STEPS ( Self Educative Pain Sessions) program, first developed in Western Australia which provides pain management education and self-management techniques to patients in an eight-hour program.

As a result of STEPS, wait times for pain clinics in the Perth area have reduced from 2 years to 2 months and requests for expensive large-scale interventions, such as surgery have reduced.

### Getting support

Community support networks are available to people with chronic pain and can be helpful for information, advice, emotional support and sharing stories of pain. Information on pain support groups that meet in various locations around Australia can also be found through the websites listed in the grey box.

### References

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- 13/ Nicholas M and Molloy A (2011) *Manage Your Pain*
- 14/ [www.alexandertechnique.com](http://www.alexandertechnique.com)