Mindfulness as a first line intervention in chronic pain management

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Disclosure

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Objectives

- As a result of attending this session, participants will be able to:
- Be familiar with what mindfulness is (and what it isn't)
- Discover how mindfulness can be a valuable tool in chronic pain management
- Discuss some of the evidence for mindfulness and meditation in chronic pain management

Chronic Pain

Pain

 An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage

International Association for the Study of Pain (IASP), 1986

Chronic Pain

- Pain without apparent biological value that has persisted beyond normal tissue healing time (often noted as > 3 months)
- The persisting pain becomes its own pathology, independent of its initial cause

Chronic Pain

- 20% of visits in primary care
- Chronic pain costs in Canada: more than cancer, heart disease and HIV combined (direct health care \$6 billion/year + productivity costs \$37 billion)*
- The various approaches to chronic pain management offer only modest benefits for some
- Chronic pain: Orthopedic injury vs nervous-system related condition
- Paradigm shift in chronic pain management

Chronic Pain

- Patients with chronic pain are often given the message that "you will have to live with this pain"
- Traditional approaches come up short on teaching patients
 how to live with the pain

Pain is an experience – not just a sensation

What is Mindfulness?

 Mindfulness is the awareness that arises through paying attention, on purpose, in the present moment, nonjudgementally

Jon Kabat-Zinn

 Mindfulness is the ability to see what's happening in your head at any given moment, so you don't get carried away by it

Dan Harris

Mindfulness-Based Stress Reduction

- Program created by Jon Kabat-Zinn 1979
- Brought meditation into mainstream medicine
- University of Massachusetts Medical Centre
- Variety of medical conditions
- 8 week program
- Centre for Mindfulness
 - https://www.umassmed.edu/cfm/
- Hundreds of programs worldwide
- MBCT (Mindfulness Based Cognitive Therapy) for depression relapse prevention
- MBCPMTM (Mindfulness Based Chronic Pain Management) for chronic pain

What is Meditation?

- Setting aside a specific period of time in which we practice focused awareness of what we sense and experience in the present moment
- Practicing daily allows the mind to practice entering a state of lowered arousal and to practice being present without evaluating what is noticed
- Sympathetic activity may decrease and Parasympathetic activity increase

What is Meditation?

- Meditation ≠ Relaxation
 - Mind focusing vs Mind wandering
- Not mind emptying, not thought suppression
- It is focused, non judgmental awareness in the present moment
- Repeatedly noticing "thinking" arising and returning non judgmentally, gently, to a bare, focused, awareness of the present
- Mind will wander Bring it back
- Not Positive thinking

Mindfulness and Meditation

• Mindfulness: Moment-to-moment non-judgmental awareness, being fully present with what is happening right now

Meditation is the tool we use to cultivate mindfulness.

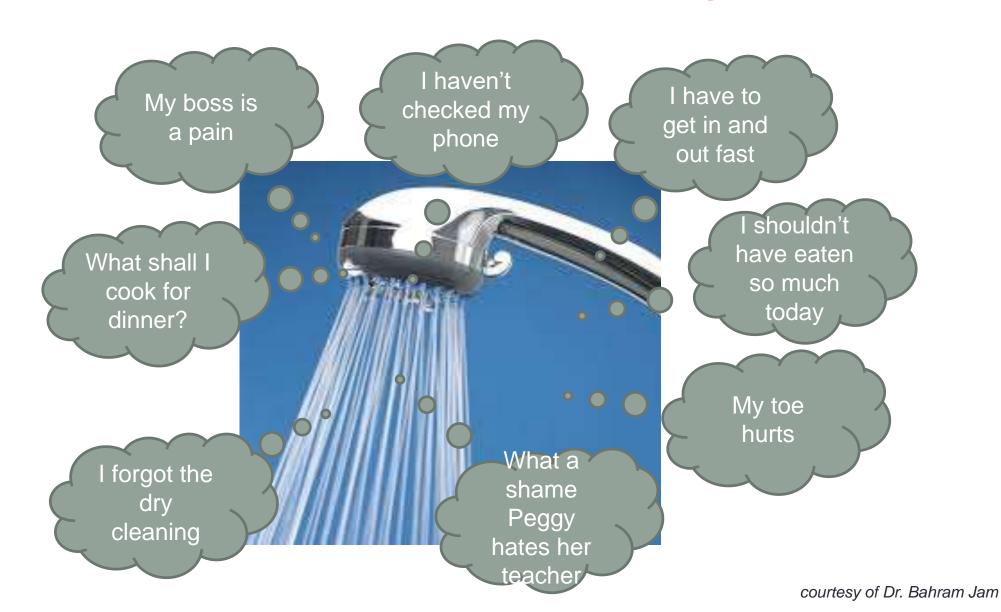
Formal practice: meditation

- Informal practice: mindfulness in everyday moments
 - Being more present, less reactive in daily life

Mindful Showering



Unmindful Showering



Why do some people develop chronic or persistent pain?

- 2 people with similar accidents or similar surgeries
- One person pain free after a few weeks
- The other develops chronic or persistent pain



MRI /CT scans analyzed by radiologists to predict pain: there is no correlation

Why do some people develop chronic or persistent pain?

- Important to find a diagnosis that explains the pain
- Persistent nerve injury?
- In chronic pain, need to identify why it is persisting, reactivating and not healing
- Why is there still inflammation and nerve irritation months/years later?
- Transition from acute injury/illness to chronic pain via central sensitization: a "brain habit" is formed
- Nervous system stuck in state of heightened pain experience reactivity

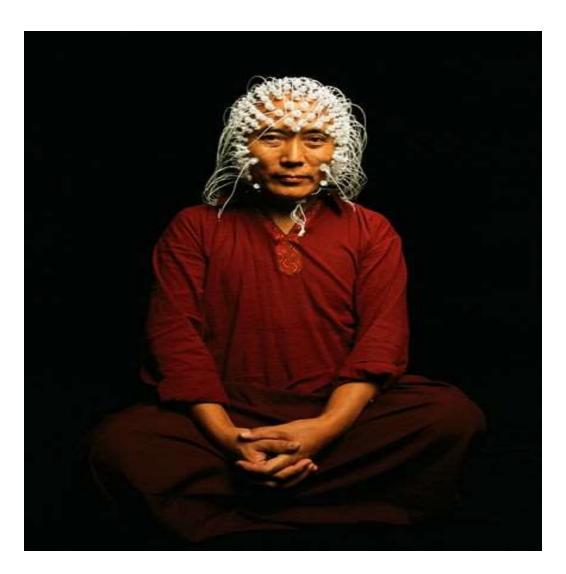
The Mind/Body Connection

- Suffering caused by chronic pain comes from the combination of the pain sensation and what it means to the sufferer—how it is interpreted
- Physical pain and mental pain often inseparable
- Mind plays an important role in physical illness
- This is <u>certainly not</u> to say that pain is "all in their heads"
- Time of the ancient Greeks: mind affected illness
- René Descartes 17th century
 - Separation of mind and body

Why Mindfulness for chronic pain?

- Chronic pain Mind Body Connection "windup"
- With mindfulness:
 - learn to uncouple the somatic sensations from thoughts and emotions
 - learn to manage pain by better understanding the personal relationship to it: collaborating, rather than fighting it
- Goal is not to change the content of one's experience, but rather alter the way in which it is experienced
 - Example: pain in extreme sport may be tolerated better than as a result of a MVA

What's the evidence?



Contemplative Neuroscience



Meditation and Brain Activation (Grant et al 2011)

- Meditators increase activity in primary pain processing regions in the brain
 - Anterior cingulate cortex, thalamus, insula
 - Anterior cingulate cortex capable of modulating pain sensation
- Meditators reduce activity in executive, evaluative emotional areas in the brain
 - PFC, amygdala, hippocampus, MCC
 - Reduced activity correlated with increased meditation experience
- Meditators have lower pain sensitivity
 - Correlated with decreased connectivity between executive & pain-related cortices

In other words

 Meditators can feel the pain without thinking about, and dreading, the suffering which could be associated

 The brain's ability to dull the pain can get to work without interference from emotional wind-up—conscious or unconscious

The clinical evidence

- "Do Mindfulness-Based Interventions Reduce Pain Intensity? A Critical Review of the Literature" Pain Medicine February 2013
- Literature search from 1960 to 2010
- 16 studies included in the review
- 8 controlled 8 not controlled
- Most studies (10 out of 16) showed significantly decreased pain intensity
- Controlled trials 6 out of 8 showed higher reduction in pain intensity when compared with control groups
- Follow-up assessments → Reduction in pain intensity were generally well maintained

The clinical evidence

2014 meta-analysis

- Meditation Programs for Psychological Stress and Well-Being
- 41 randomized controlled trials (2993 participants)
- Moderate strength of evidence for improvement in anxiety, depression, and pain

Mindfulness and Fibromyalgia

Decrease in depressive symptoms

Sephton et al. 2007

- Decreased pain scores
- Better pain coping
- Improvement in anxiety, depression, and somatic complaints
- Improvement in quality of life
- Benefits sustained for 3 years

Grossman et al. 2007

MBSR and Low back pain

- Randomized controlled trial of adults with chronic low back pain JAMA 2016
- 342 participants Randomly assigned to
 - 8-week MBSR course or CBT or usual care
- In MBSR group, 60.5% of participants showed clinically meaningful improvement in back pain—related functional limitation (vs 57.7% CBT and 44.1% usual care)
- In MBSR group, 43.6 % of participants showed clinically significant improvement in **pain bothersomeness** (vs 44.9% for CBT and 26.6% usual care)
- Improvements for participants were maintained after one year
- 2017 Clinical practice guideline American College of Physicians:
 - For Chronic low back pain Non pharmacological treatments, including mindfulness-based stress reduction recommended

Mindfulness for Chronic Pain

- Mindfulness-Based Chronic Pain Management (MBCPM™)
 - Program developed by Dr. Jackie Gardner-Nix, a physician and chronic pain consultant at St Michael's Hospital, Toronto, Canada
 - The Mindfulness Solution to Pain (2009)
 - Based on the Mindfulness-Based Stress Reduction Program (MBSR) originated by Jon Kabat-Zinn
 - Developed into a program more customized to the needs of those dealing with chronic pain with a particular attention to being traumainformed and trauma-sensitive
 - Patient courses (groups) are usually once a week for 12 to 13 weeks, for 2 and a half to 3 hours per session

MBCPMTM program

- Weekly education and discussion
- Factors that influence pain
- Through the lens of mindfulness
- Meditation practice
- Insights into why pain and suffering have become established
- Not a replacement for usual treatments
- Help understand how physical, psychological and emotional aspects of pain interact
- Improve overall health, improve function and decrease suffering

Mindfulness for pain (мвсрм™) outcome

- Decreased perceived pain intensity
- Improved mental health
- Decreased Pain Catastrophizing
- Decreased measures of level of suffering
- Decreased medication use for some

MBCPMTM Chronic Pain Medication Changes:

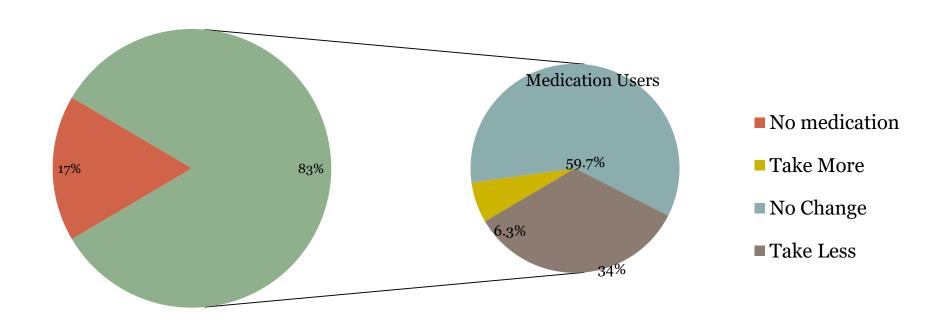
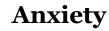
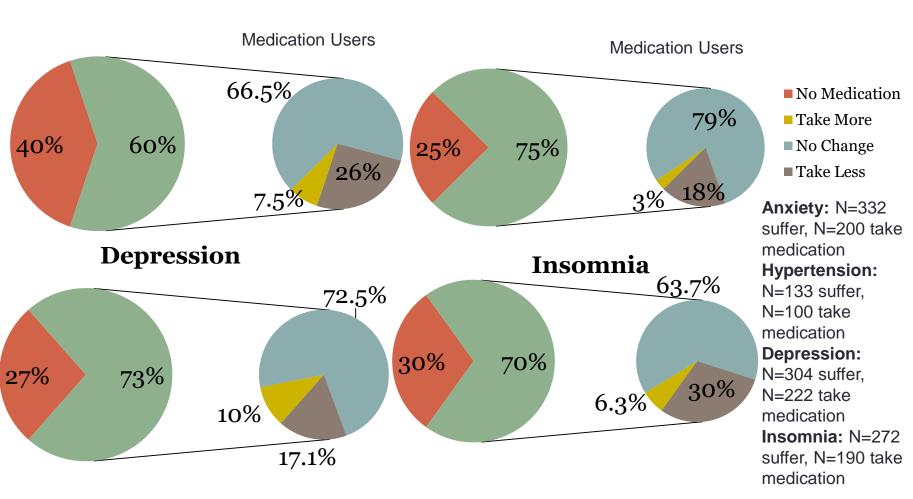


Fig 24. Medication Changes for Chronic Pain Sufferers Attending MPCPM courses in 2013/2014 (N=460 participants suffer from chronic pain, N=382 take medication)

MBCPMTM Medication Changes for Other Conditions



Hypertension



Other Impacts of MPCPMTM

- 72.8% more productive
- 60.5% see family & friends more
- Increased engagement in:
 - Favourite hobbies: 35%
 - Recreational activities: 33.3%
 - Physical activity: 42.3%
 - Volunteer activities: 15.0%

Summary

- The various traditional approaches to chronic pain management offer only modest benefits for some
- A Mindfulness based management program can be a valuable addition to the treatment of chronic pain and complement usual approaches
- There is an increasing amount of evidence supporting the potential benefits of mindfulness in chronic pain sufferers with decreased pain intensity, improvement in function, and overall reduction in suffering

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- NeuroNova Centre For Mindful Solutions Inc https://neuronovacentre.com
- MBCPMTM Mindspace clinic in Montreal <u>http://mindspaceclinic.com/service/mbcpm/</u>

