

# PAIN SELF-MANAGEMENT TEN FOOTSTEPS PROGRAMME

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Session Two



# Recap & Review

- What areas have gone well for you in exploring or using Ten Footsteps approach and/or other suggested resources

## Responses in the chat...

- What struggles have you had? Let's problem solve together where possible

## Responses in the chat...

# Overview of Session 2

## Focus on Footsteps :

- ▣ Footstep 3: Pacing
- ▣ Footstep 4: Goal Setting
- ▣ Footstep 6: Sleep
- ▣ Footstep 9: Medicines & Nutrition



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Footstep 3  
**Pacing**



# How does pain affect activity?

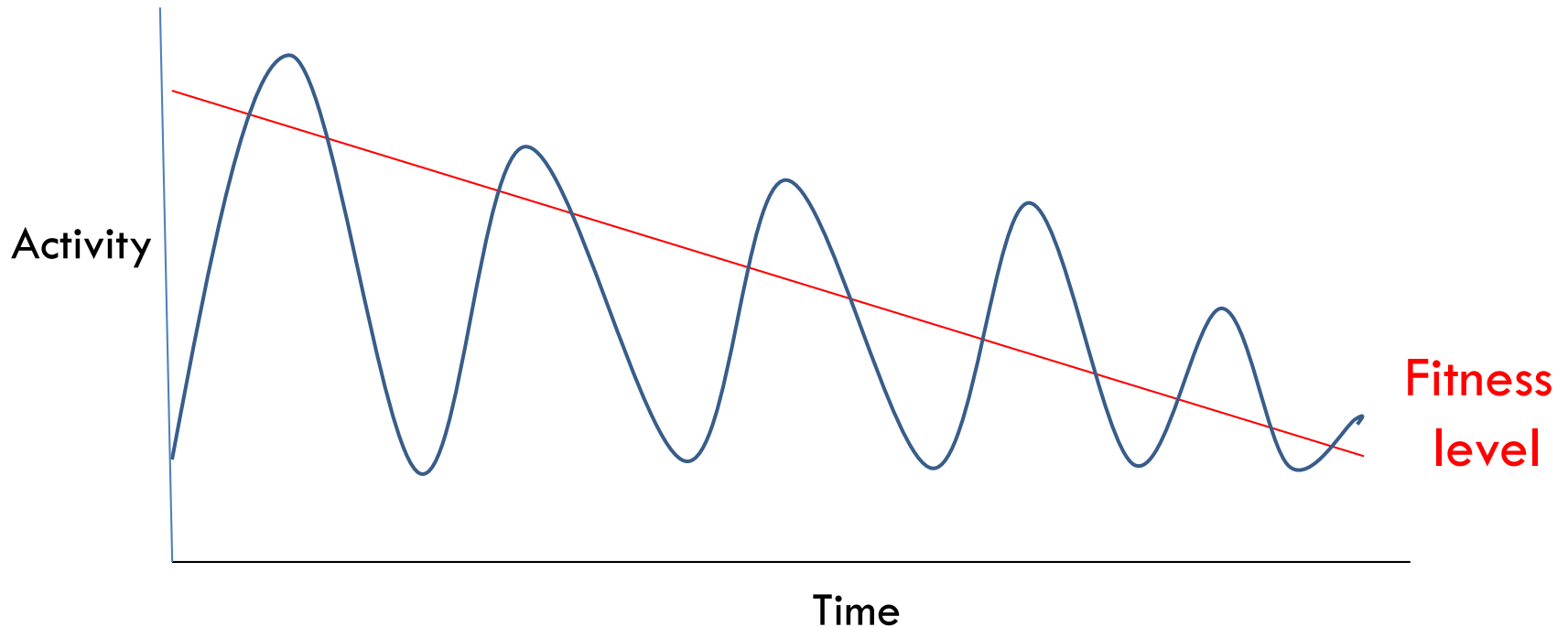
- Whiteboard

# Footstep 3 Pacing

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Getting active, balancing activities and effort

## Activity Cycling



# Footstep 3: Pacing Tools and Resources

7

## My activity diary

Use this in conjunction with Pacing – a really useful skill for people with pain from My Live Well with Pain



| Time | Activity  | How many minutes did you do? |
|------|---|------------------------------|
| 8am  | Shower<br>Got dressed<br>Made me and Anne some breakfast                              | 10<br>5<br>20                |
| 9am  | Washed the dishes and tidied the kitchen  | 25                           |
| 10am | Sat with Anne and had a coffee and a chat<br>Sat in kitchen and wrote a shopping list | 45<br>15                     |
|      |   |                              |
|      |   |                              |
|      |   |                              |
|      |   |                              |
|      |   |                              |
|      |   |                              |
|      |   |                              |
|      |   |                              |
|      |   |                              |

## Understanding current activity patterns:

- Over active?
- Underactive?
- Boom- Bust pacing?



**Download these handy templates to help you  
with your pacing**

[Download: My Activity Diary](#)

# Footstep 3 Pacing

## Getting active, balancing activities and effort

### Pacing: daily activity/effort management

- ❑ Break activity into manageable chunks
- ❑ Balance of regular, enjoyable activity & rest
- ❑ Balanced thinking
- ❑ Avoid 'boom & bust' activity cycling

### Plan and prioritise your days:

- ❑ What Activities can I pace today
- ❑ How long before I take a Break?
- ❑ Check what is the effort level on the scale

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### Pacing – a really useful skill for people with pain

Every time I try to get fitter I overdo it and end up feeling even worse

My pain and stiffness stop me from even starting to become more active

I find it difficult just to do the everyday things like going upstairs, cooking or doing the washing

I used to be able to run 3k and I should be able to but I can't, so it isn't worth doing any exercise at all.

People living with persistent pain find that **pacing** is one of the key everyday skills to learn and use. In this leaflet you will find out what pacing means and discover the benefits of balancing activities through the day.

Pacing can help you achieve your goals without increasing your pain or letting tiredness force you to stop. As you'll see, pacing is like the story of the tortoise and hare: slow and steady wins the race.

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# Footstep 3: Pacing Tools and Resources

## My daily pacing plan

Use this in conjunction with Pacing – a really useful skill for people with pain from My Live Well with Pain



| Activity              | On good day | On a bad day | On an average day | Number of times per day | Effort scale level (0-10) |
|-----------------------|-------------|--------------|-------------------|-------------------------|---------------------------|
| Standing and cooking  | 10 mins     | 5 mins       | 7 mins            | 5                       | 6                         |
| Lying down for a rest | 15 mins     | 60 mins      | 25 mins           | 2                       | 1                         |
| Walking               | 5 mins      | 2 mins       | 3 mins            | 3                       | 5-7                       |
|                       |             |              |                   |                         |                           |
|                       |             |              |                   |                         |                           |
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|                       |             |              |                   |                         |                           |
|                       |             |              |                   |                         |                           |

- Support implementation



**Download these handy templates to help you with your pacing**

[Download My Daily Pacing Plan](#)

# Task:(LETs): Freethink ...

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## What do you do to help you pace yourself?



Pacing is a crucial skill to help patients break out of the 'boom and bust cycle' of behaviour and adopt balanced levels of activity. It is a number one skill for becoming more active despite the pain.

[Download and print the text of this Footstep](#)

# Louise – Pacing Story



# Tim – Pacing / Getting Active

\*Stands up really fast\*

My entire body:



# Practicing explaining the 3 Ps:

## Break out rooms

| Time  | Activity  | How many minutes did you do? |
|-------|---|------------------------------|
| 7am   | Woke up. Had a shower   | 20mins                       |
| 7:30  | Woke the children up<br>Made children breakfast<br>I got dressed<br>Helped children get dressed | 5 mins<br>15mins<br>30mins   |
| 08:30 | Drove children to school<br>Walked to school gates and back to car                              | 15mins<br>15mins             |
| 09:00 | Drove to shop<br>Picked up some shopping<br>Drove home  | 10mins<br>20 mins<br>5mins   |
| 09:45 | Unpacked shopping<br>Sorted the laundry +put a load of washing on<br>Did the washing up         | 15mins<br>20mins<br>25mins   |
| 10:45 | Made cup of coffee, sat down  | 15mins                       |
| 11:00 | Hoovered downstairs   | 20mins                       |
| 11:30 | Made some toast<br>watched TV   | 5mins<br>20mins              |
| 12:00 | Fell asleep watching TV   | 1 hour                       |
| 1:00  | Did ironing   | 45 mins                      |
| 1:45  | Watched TV  | 45mins                       |

|       |  |                             |
|-------|--|-----------------------------|
| 2:30  | Drove to school<br>Walked to and from school<br>Drove home                                   | 15mins<br>20 mins<br>15mins |
| 3:15  | Watched TV with the children   | 1 hour                      |
| 4:15  | Made children their tea  | 20mins                      |
| 4:35  | Watched TV with the children   | 30mins                      |
| 5:00  | Fed the rabbit   | 10mins                      |
| 5:10  | Did children's reading books and spellings   | 50mins                      |
| 6:00  | Ran the children's bath + Got their pyjamas ready<br>Bathed the children + Read them a story | 60mins                      |
| 7:00  | Put microwave meal in<br>Ate dinner  | 5mins<br>30 mins            |
| 7:30  | Packed the children school bags<br>Made packed lunch for them                                | 30mins                      |
| 08:00 | Watched TV   | 1 hour                      |
| 09:00 | Got ready for bed  | 20mins                      |
| 09:20 | Watched TV in bed  | 1 . 5 hours                 |
| 11:00 | Fell asleep  |                             |

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Footstep 4

# Setting goals





# Footstep 4: Setting Goals

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## Goal setting – a great way of taking back control

**A**

Goals are a helpful way of noticing and recording the progress you make over time. Sometimes, for people with chronic pain, achieving your goals may take longer and require more planning. However, this doesn't mean it is impossible.

**B**

One way of increasing your ability to reach your goals is to develop the skill of goal setting. As you'll see, goal setting helps you get back control in many different areas of your life and this, in turn, will increase your self-confidence.

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# Footstep 4 Setting Goals

## Get fitter, build skills, address fears, find resources

Their valued goals – not yours!

### SMART-ER Goal setting

- Specific,
- Measurable,
- Achievable,
- Rewarding ,
- Time-framed
- Evaluate,
- Revise

### Activity, Relaxation and Fun Goals

### Regular review (initially!)

#### My SMART goals

Use this in conjunction with Reaching goals and creating rewards - a guide to SMART goal setting from My Live Well with Pain



| Area of my life       | Example goals to give you inspiration  | My SMART goals (you don't have to fill them all in) |
|-----------------------|--|---|
| Social/fun activities | Go out for a meal, watch a film, have a coffee with a friend, do craftwork, plant up a flowerbed |   |
| Work                  | Paid or voluntary, staying in current role, reduce/increase hours, retrain                       |   |
| Hobbies               | Gardening, fishing, drama, walking, guitar   |   |
| Household tasks       | Changing and making beds, cooking meals, vacuuming, cleaning, managing finances                  |   |
| Physical activity     | Stretches, walking to the shops, football in park, yoga, swimming                                |   |
| Caring for myself     | Having a bath, putting my own socks and shoes on, cooking a nice meal                            |   |





# Footstep 4 Setting Goals

Get fitter, build skills, address fears, find resources

## Tips

- ❑ Write down or record their goal in some way so that they are clear on the plan and can track their progress
  
- ❑ Encourage active problem solving (avoid providing tailor-made solutions!)
  
- ❑ Positive feedback
  
- ❑ Reward! must be enjoyable

Coaching style..... examples check out

[www.livewellwithpain.co.uk/resources/supporting-self-management/](http://www.livewellwithpain.co.uk/resources/supporting-self-management/)

### My goal ladder

Use this in conjunction with Reaching goals and creating rewards - a guide to SMART goal setting from My Live Well with Pain



My goal is:

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My SMART goal at the end of 4 weeks is to:

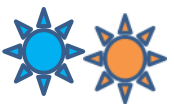
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|                | Steps on the way to reaching my goal | Things that will help my progress | Things that might block my progress |
|----------------|--------------------------------------|-----------------------------------|-------------------------------------|
| Week 4         |                                      |                                   |                                     |
| Week 3         |                                      |                                   |                                     |
| Week 2         |                                      |                                   |                                     |
| Week 1         |                                      |                                   |                                     |
| START - Week 1 |                                      |                                   |                                     |



# Your role as a facilitator

- Praise positive achievement (no matter how small!)
- Support problem solving (but do not supply the solution)
- Avoid dwelling on failure
- If the patient is really struggling you can ask them to think what they would say to a friend with the same problem.
- If they are really struggling, you can give an example a “past patient” used
- Never give your own opinion or provide a solution as this disempowers the patient



# Breakout room activity

## Goal Setting

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### STEP 3 Do you have any problems or difficulties with:

- |    |   |                                     |
|----|---|-------------------------------------|
| 1  | Walking or moving about, lack of fitness and stamina  | <input checked="" type="checkbox"/> |
| 2  | Balance or recurrent falls  | <input type="checkbox"/>            |
| 3  | Side effects or problems with current pain medication e.g. tablets etc.   | <input type="checkbox"/>            |
| 4  | Pain relief   | <input checked="" type="checkbox"/> |
| 5  | Understanding why persistent pain occurs  | <input checked="" type="checkbox"/> |
| 6  | An unhelpful pattern of activity of doing too much, getting more pain, then doing too little  | <input checked="" type="checkbox"/> |
| 7  | Eating the right sort of foods, weight changes  | <input type="checkbox"/>            |
| 8  | Disturbed sleep, tiredness or lack of energy  | <input checked="" type="checkbox"/> |
| 9  | Managing mood changes of depression, anger, anxiety or worry  | <input checked="" type="checkbox"/> |
| 10 | Relationship difficulties: with partner, family etc, or sex life concerns   | <input type="checkbox"/>            |
| 11 | Remaining in work or returning to work and/or training  | <input type="checkbox"/>            |
| 12 | Financial or money difficulties   | <input checked="" type="checkbox"/> |
| 13 | Other difficulties (for example, concerns about housing, leisure or social events, drinking, gambling or drug use). Please describe here: |                                     |

### STEP 4 If you ticked more than three boxes above, please circle the three most important ones to change.

## Task: work in 3s

### Clinician and patient

Using the areas identified in the patient's completed Health check tool, support your patient to set a SMART goal.

### Observer

Help the clinician and Patient to check that their goal is SMART

Write your SMART goal in the chat

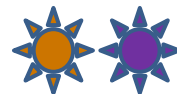
Specific,  
Measurable,  
Achievable,  
Rewarding ,  
Time-framed

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Footstep 6

**Sleep**





# Footstep 6: Sleep

- **Tim's sleep story: zzzZZZZZZ**

**What do you hear are Tim' problems:**

- **make notes**
- **feed into the Whiteboard when he finishes**

**Some key problems with pain and sleep:**

- Worry thinking - sleep pattern “what it should be” ... 90 minute cycles
- “ daytime napping”..... and what to do about it!
- “Sleep pattern chaos + pain” ..... the role of unwinding the painful body, tackling thinking + getting into day + night time routines
- Role of useful programmes like Sleepio + need for crucial discipline



# Sleep: Facts or myths

Use chat to answer True or False + Why

- 1) People of all ages needs 8 hours sleep each night
- 2) It helps to drink caffeine or “cola” based drinks to help your sleep
- 3) Resting in bed, watching TV helps for a better night’s sleep
- 4) Snoring and waking through the night is normal
- 5) A good night’s sleep means waking episodes in the sleep cycles through the night
- 6) A memory foam mattress will help improve my sleep



# Footstep 6: Learning to sleep well

- Identify with person their typical 24 hour pattern; day/night + typical sleep pattern (sleep diary option)

- **Enable access to resources** so person explores + identify possibilities to change, creates helpful conversation



**Five action areas** to improve sleep – see **tool**

- **Routines,** stretch, beds vs. recliners etc
- **Some never tips** no screens
- **Always tips:** time for me, relaxation of body and mind

# How to Sleep well with Pain



## How to Sleep well with pain



If you're living with pain and struggling with sleep then you're not alone. It's very common for people with persistent pain to have difficulties getting to sleep or staying asleep.

### Why can't I sleep?

It's likely that there are a number of causes of your sleep difficulties. Here are six triggers often found by people living with pain:



### A vicious cycle

You have probably discovered that poor sleep can have some unhelpful effects on your day-to-day life.

After a broken night's sleep you may find:

- it's harder to concentrate
- you are short tempered with other people
- your mood is low

It's very common for people to find that poor sleep makes their pain seem worse. They can find themselves in a vicious cycle where pain makes sleeping difficult, and poor sleep worsens pain.

The really good news is that there are lots of ways to improve your sleep.

### The good news

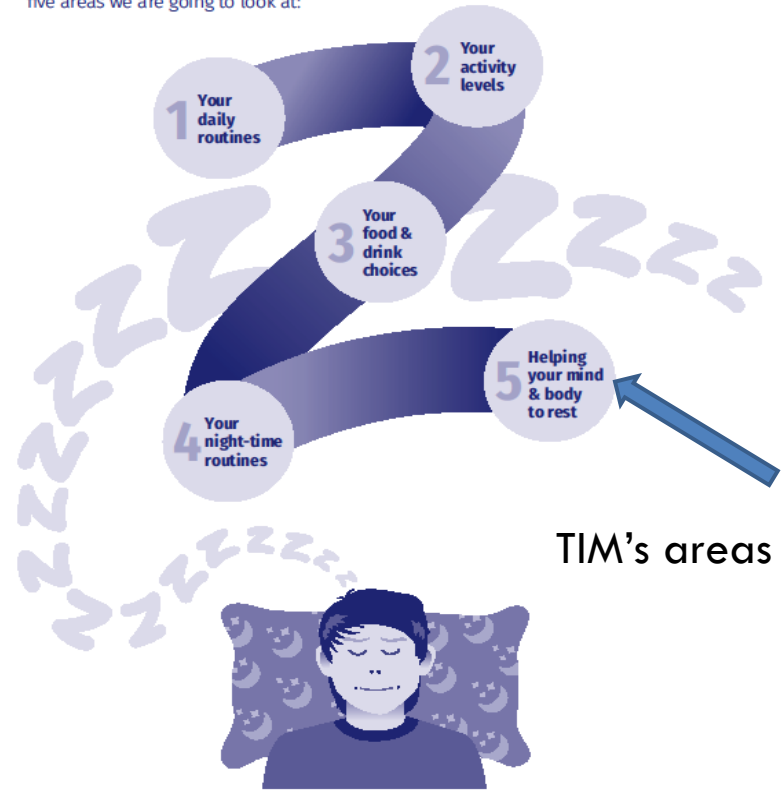
Thanks to recent research, we now know that sleeping well with pain is possible, with a different approach and maybe a few new skills.

Over the next few pages we will share with you some ideas and techniques that other people living with pain have found helpful. We're going to look at five areas of your life and suggest some simple changes that you can make to your activities and routines.

Some things you can try out straight away, others may need a bit more thought and planning. So we're also going to show you how to set some sleep well goals and then create a plan so that you can get going.

### The five areas

There are lots of changes you can make to help you to sleep well. Over a period of five to six weeks these can make a huge difference. Here are the five areas we are going to look at:







Footstep 9

# Medicines and nutrition





# Lived experience share - and use the tools

**What were your experiences  
of using medication for pain?**

**Louise -**

**Tim**

# Louise – off Medication Decision Aid Tools

## What are the side effects Louise shares?

### The Great OPIOID SIDE EFFECT Lottery



Opioids ('strong painkillers') can be really useful for a short time – after an injury or surgery. But longer term they aren't much help. **They only reduce pain for about 10 percent of people in the long term.**

**So out of every 100 people, 90 get no benefit long term.** And they'll still get the side effects.

If you're taking opioids, the chances are you'll be experiencing at least some of the side effects listed here. **Tick the ones that affect you**, and you may decide it's time to review your medicines with your clinician.

(Remember – never come off your medicines suddenly as this may cause other problems).

- Feeling dizzy, sickness 17 to 35 in every 100 people
- Sweating 35 in every 100 people
- Confused, sleepy 14 to 29 in every 100 people
- Constipation 20 to 40 in every 100 people
- Risk of falls and fractures
- Weight gain 29 in every 100 people

- Dry mouth 50 in every 100 people
- Reduced sex drive, erectile dysfunction, infertility 25 in every 100 people
- Unable to pass urine 4 in every 100 people
- Immune system affected
- Increased levels of pain
- Sleep problems 26 in every 100 people
- Forget things / memory loss 26 in every 100 people
- Euphoria (feeling high)
- Mood changes
- Emotionally numb

#### Other consequences

**Tolerance** – your body gets used to it, so the same dose is less effective than it used to be

**Dependence** – withdrawal symptoms if stopping suddenly or without clinical support

**Addiction** – psychological dependence and behaviour patterns develop

**Misuse** – not using them in a responsible way

Are you taking Gabapentin or Pregabalin to help with your pain?

## ASK YOURSELF THESE SIX QUESTIONS...



If you answered YES to any of these questions, please turn over...



# Tim - Using Medication – coming off

## Listen and use the decision aid tool



### Using medicines for persistent pain



Think about whether your medicines help you to manage your persistent pain. This tool may help you decide about using medicines in better ways for you. **Answer the questions below to help you think and decide.**

|   |                           |
|---|---------------------------|
| <p><b>How much do your medicines relieve your pain at present?</b><br/>Circle the amount that is closest to your experience</p> <p>0%   10%   20%   30%   40%   50%   60%   70%   80%   90%   100%<br/>(No pain relief) <span style="float: right;">(Completely pain free)</span></p>   |                           |
| <p><b>Do you have side effects with your current medicines?</b><br/>Circle yes or no</p>  | <p><b>YES      NO</b></p> |
| <p><b>If yes, what are they?</b><br/>Circle all the side effects you experience</p> <p>concentration difficulties      constipation      sickness      dizziness      weight gain<br/>hallucinations      depression/low mood      rashes      blurred vision      dry mouth<br/>sexual difficulties      Any other side effects? .....</p> |                           |
| <p><b>Does the pain relief effect reduce despite increases in the dose regularly?</b><br/>Circle yes or no</p>  | <p><b>YES      NO</b></p> |
| <p><b>Do you get any of these dependence symptoms?</b><br/>Circle all the dependence symptoms you experience</p> <p>shaking      tremours      nausea      vomiting      diarrhoea      itching      aching muscles</p>   |                           |
| <p><b>Do medicines help in a setback with high pain levels?</b><br/>Circle yes or no</p>  | <p><b>YES      NO</b></p> |
| <p><b>Do they help you feel good about yourself?</b><br/>Circle yes or no</p>   | <p><b>YES      NO</b></p> |

# Decisions on Medication

**Do they help you get a good night's sleep?**

Circle yes or no

YES

NO

**Do they help you to keep doing the things that are important to you?**

Circle yes or no

YES

NO

**Write down benefits and problems or side effects of taking medicines for your pain.**

Benefits +

Problems or side effects -



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Now look through your answers.**

**Are there more benefits or problems in taking medicines?**

Circle the answer that applies to you

More benefits

More problems

**Choose from these medicine options for you now:**

Tick your choice

- Stay on the medicines
- Explore ways to reduce or make changes to them
- Plan to gradually reduce and stop



# Footstep 9: Medicines.....

- We now know pain medicines only reduce pain for 40 % of people who use them. 60% no benefit
- Medicines appear to become less effective the longer people remain taking them.
- Side effects of pain medicines = can have major impact on a person's life and health.
  - ▣ sedation, fatigue & weight gain make it harder for people to be more active. Being active has a positive effect on pain and well-being.
- At least 50% of people with pain are overweight and pain medicines can make that harder to change.



**So supporting a person with pain often involves making changes with both medicines and nutrition . . .**



# Your role....

**Guide the person in the safe and effective use of pain medicines, ensuring they do not inadvertently come to harm.**

**You can do this by:**

- Finding out whether the pain medicines are actually helping the person to do more in their lives, and what they still find difficult in spite of the medicines.

***What questions can you ask? Put in the chat***

- Helping the person to understand the risks and potential long-term harms of pain medicines, and exploring how these might be affecting them.

***Cost vs. Benefit summary and then what questions do guide decision?***

- Ensure you have introduced other concepts: supported self management of behaviour change like pacing and goal setting.

<https://livewellwithpain.co.uk/wp-content/uploads/2022/09/patient-medicines-decision-guide.pdf>

## Using medicines for persistent pain



Think about whether your medicines help you to manage your persistent pain. This tool may help you decide about using medicines in better ways for you. **Answer the questions below to help you think and decide.**

**How much do your medicines relieve your pain at present?**  
Circle the amount that is closest to your experience

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%  
(No pain relief) (Completely pain free)

---

**Do you have side effects with your current medicines?** YES NO  
Circle yes or no

---

**If yes, what are they?**  
Circle all the side effects you experience

concentration difficulties constipation sickness dizziness weight gain  
hallucinations depression/low mood rashes blurred vision dry mouth  
sexual difficulties Any other side effects? \_\_\_\_\_

---

**Does the pain relief effect reduce despite increases in the dose regularly?** YES NO  
Circle yes or no

---

**Do you get any of these dependence symptoms?**  
Circle all the dependence symptoms you experience

shaking tremours nausea vomiting diarrhoea itching aching muscles

---

**Do medicines help in a setback with high pain levels?** YES NO  
Circle yes or no

---

**Do they help you feel good about yourself?** YES NO  
Circle yes or no

---

**Do they help you get a good night's sleep?** YES NO  
Circle yes or no


---

**Do they help you to keep doing the things that are important to you?** YES NO  
Circle yes or no

---

**Write down benefits and problems or side effects of taking medicines for your pain.**

Benefits + Problems or side effects -

---

**Now look through your answers. Are there more benefits or problems in taking medicines?**  
Circle the answer that applies to you

More benefits More problems

---

**Choose from these medicine options for you now:**  
Tick your choice

Stay on the medicines  
 Explore ways to reduce or make changes to them  
 Plan to gradually reduce and stop

# Use Decision Aid Tools

## The Great OPIOID SIDE EFFECT Lottery



Opioids ('strong painkillers') can be really useful for a short time – after an injury or surgery. But longer term they aren't much help. **They only reduce pain for about 10 percent of people in the long term.**

**So out of every 100 people, 90 get no benefit long term.** And they'll still get the side effects.

If you're taking opioids, the chances are you'll be experiencing at least some of the side effects listed here. **Tick the ones that affect you**, and you may decide it's time to review your medicines with your clinician.

(Remember – never come off your medicines suddenly as this may cause other problems).

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### Other consequences

**Tolerance** – your body gets used to it, so the same dose is less effective than it used to be

**Dependence** – withdrawal symptoms if stopping suddenly or without clinical support

**Addiction** – psychological dependence and behaviour patterns develop

**Misuse** – not using them in a responsible way

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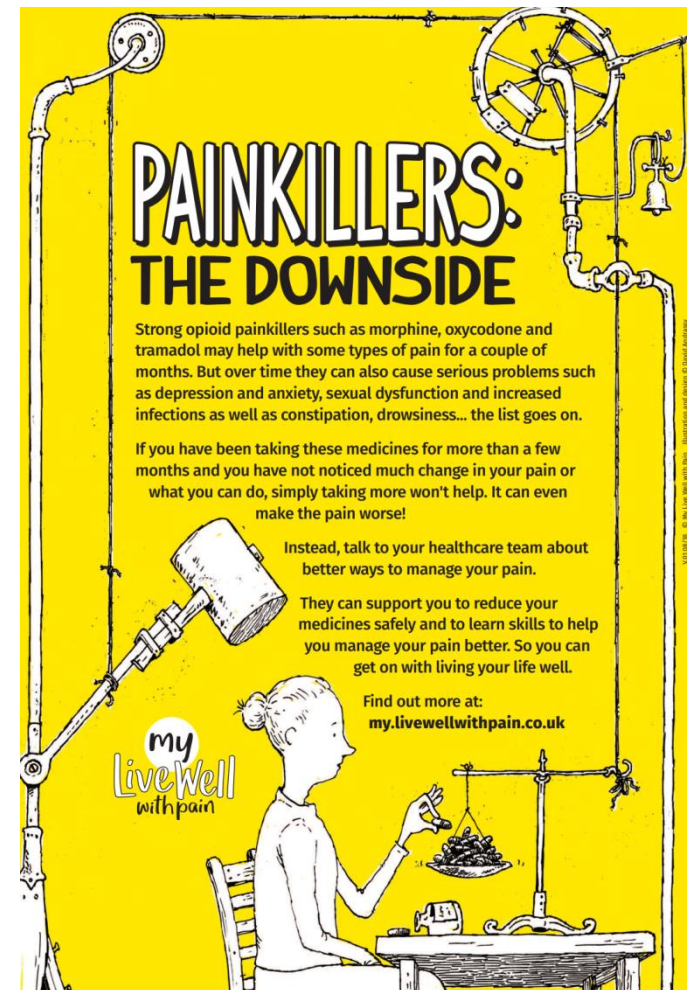




# Changing the conversation...

**It is not a person's fault that they often want more or different pain-relieving medicines when they are not likely to be aware that they do not 'work' for everyone.**

- We should be mindful that people who have taken pain medicines for long periods of time, may feel confused that they are only just being told.
- For the majority of people, despite publicity about the risks of analgesic medicines, being told that 'painkillers do not kill pain' challenges their beliefs.
- It is important to give people time to process and make sense of the information.





# Actions clinicians can take

- Medications can be considered as a trial.
- Understand the evidence/guideline around the use of analgesic medicines in particular pain conditions.
- Agree a meaningful goal with the patient.
- Agree what dose will be prescribed, if it can be increased, by how much and when.
- Agree when the review will be – normally two weeks after starting the trial in the first instance.

**If you are planning to start a prescription, explore the resources in our**

**[Medicines: starting a prescription](#) section**



# Tapering pain relieving medications

- We are all being encouraged to review analgesic medicines, especially for people who have been using them for extended periods of time or at high doses e.g. greater than 120mg oral morphine equivalent daily dose.
- Whilst it is important not to continue medicines that are unhelpful or which are harmful, it can cause patients to feel targeted or that they are having changes made without their agreement.
- Patients tend not to know what the side effects of a medicine are, so consider asking them what other issues they have noticed or problems they are experiencing. These can then be linked back to the medication

If you are planning a medicines review, explore the resources in our [Medicines: resources to use when reviewing prescribed opioids](#) section



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Confused, sleepy 14 to 29 in every 100 people

Constipation 20 to 40 in every 100 people

Risk of falls and fractures

Weight gain 29 in every 100 people

Dry mouth 50 in every 100 people

Reduced sex drive, erectile dysfunction, infertility 25 in every 100 people

Unable to pass urine 4 in every 100 people

Immune system affected

Increased levels of pain

Sleep problems 26 in every 100 people

Forget things / memory loss 24 in every 100 people

Euphoria (feeling high)

Mood changes

Emotionally numb

#### Other consequences

**Tolerance** – your body gets used to it, so the same dose is less effective than it used to be

**Dependence** – withdrawal symptoms if stopping suddenly or without clinical support

**Addiction** – psychological dependence and behaviour patterns develop

**Misuse** – not using them in a responsible way





# Nutrition

## LETS: What one action do you take that is important about yourself and your food choices to manage pain?

- **Side effects of medicines** + being less active due to pain = overweight. (Louise's story)  
Affects at least 50% of people with pain.
- **Weight loss** – impossible & 'diets' psychologically unhelpful  
more positive outcomes focus = healthy eating + more active more often
- **Role of high quality nutrition** e.g. Mediterranean type diet in NHS Eat Well
- **Vitamin D - Public Health England** = suppl. daily = 10 micrograms/day to limit emergence osteoporosis, esp in autumn/winter.
- **Micronutrients:** B vitamins, magnesium = address with Multivitamin suppl.
- **Link to local weight loss support / physical activity resources** - the group support may help with social connectedness



# 6 TIPS FOR NUTRITION AND PAIN MANAGEMENT



## Nutrition and Chronic Pain

### 1 REDUCE INFLAMMATION TO HELP PROTECT YOUR BODY FROM OXIDANT DAMAGE:

Polyphenols are compounds found in fruit and vegetables and have antioxidant and anti-inflammatory properties.



### 2 GOOD QUALITY FATS

Omega-3 fats and olive oil both help to reduce inflammation and enhance the immune system.



### 3 PREVENT VITAMIN AND MINERAL DEFICIENCIES

Common micronutrient deficiencies in people experiencing pain include Vitamin D, Vitamin B12 and magnesium.



### 4 WATER INTAKE

Dehydration can increase sensitivity to pain. It can also have other effects on health outcomes, especially in older populations, such as poor wound healing and constipation.



### 5 INCREASE FIBRE

Fibre is important for proper digestion and maintenance of a healthy microbiome and weight management.



### 6 REDUCE AND LIMIT ULTRA-PROCESSED FOODS AND SUGAR INTAKE

These foods and drinks contain high amounts of energy and very low (or no) amounts of beneficial nutrients [12]. These foods can increase inflammation and oxidation which can worsen pain experiences.



# Summary



## Footstep 9 – Medicines and nutrition

### Summary of key points

- ✓ Pain medicines remain a major part of most people's pain management, however they are poorly effective for the majority of people
- ✓ Side-effects of pain medicines, especially opioids and gabapentinoids, can make living with pain much harder but few people are aware of the problem.
- ✓ It is important to change the conversation about pain medicines, focusing on what they enable the person to do, rather than whether they take pain away
- ✓ Nutrition is important for a person's general health and well-being. The focus should not be just on weight loss but supporting someone to make healthier choices, when possible and to see food as part of their management plan

# Confidence levels + learning outcomes



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1. Score your confidence to enable a person with chronic pain to engage with self management skills

**0 (no idea) – 10 (absolutely confident)**

2. If the confidence level **has changed** since the last session

Share **two reasons** in the chat

## The Real Angels of the North

A huge thank you to the  
**NHS** for all you are  
doing to keep us safe.

smarts outdoor



# Thank you

## What questions do you have?

Please add your questions into Chat

For information on training and courses

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