

MHPN WEBINAR

Tuesday, 20 October 2020

Working collaboratively to address the mental health of
people experiencing chronic pain



Tonight's panel



Dr Simon Holliday
General Practitioner and
Addiction Physician



Professor Michael Nicholas
Psychologist



Catherine Ketsimur
Physiotherapist



Facilitator:
Professor Stephen Trumble
General Practitioner



Ground rules






To help ensure everyone has the opportunity to gain the most from the live webinar, we ask that all participants consider the following ground rules:

- **Be respectful of other participants and panellists.** Behave as you would in a face-to-face activity.
- You may interact with each other and the panel by using the **participant chat box**. As a courtesy to other participants and the panel, keep your comments on topic. Please note that if you post your technical issues in the participant chat box you may not be responded to.
- For help with your technical issues, click the **Technical Support FAQ tab** at the top of the webinar room. If you still require support, call the Redback **Help Desk on 1800 291 863**. If there is a significant issue affecting the overall delivery of the webinar, you will be alerted via an announcement.
- Your feedback is important. Please complete the **feedback survey** which will appear on your screen when the webinar finishes.



The webinar platform

To interact with the webinar platform and to access resources, hover over the colourful icons to the top right of your screen:

-  open the chat box
-  access resources including the case study, panel biographies and supporting resources
-  refresh button
-  exit button
-  open the feedback survey



Learning outcomes

Through an exploration of mental health problems associated with chronic pain the webinar will provide participants with the opportunity to:

- Identify associations, comorbidities and patterns of treatment-seeking behaviour of people experiencing chronic pain.
- Describe tips and strategies that can assist someone experiencing mental health problems related to chronic pain.
- Demonstrate the importance of collaboration and appropriate referrals when supporting a person experiencing mental health problems related to chronic pain.



A Biopsychosocial Model of Chronic Pain

Multiple mechanisms: Bio – Psycho - Social

- Nociceptive
- Neuropathic
- Nociplastic

[Neuroplasticity
- CNS changes
e.g. central
sensitization]

- Attention - worry
- Mood/anxiety
- Beliefs - fears
- Coping responses
- Behaviours (e.g. avoidance)
- History
- Personality

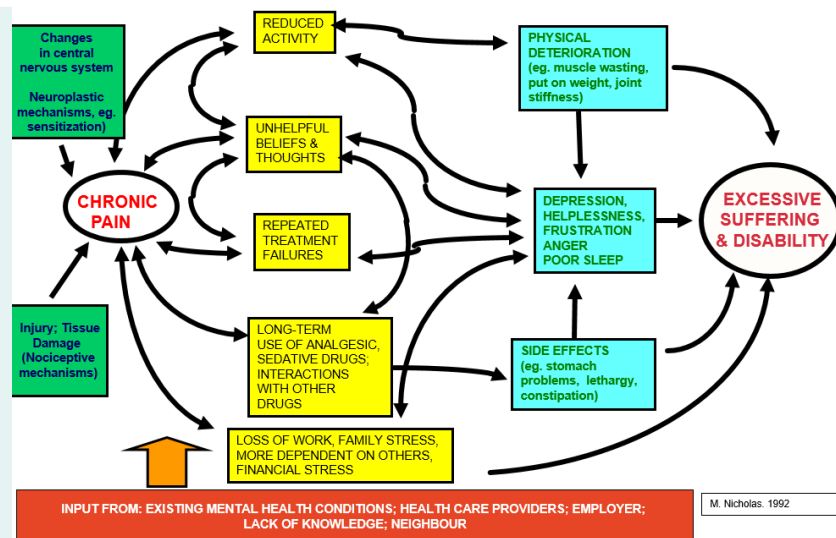
- Employer
- Family
- Health care
- Friends
- Media



Professor Michael Nicholas
Psychologist



Explaining the Interacting Contributors and Effects A biopsychosocial perspective



Professor Michael Nicholas
Psychologist

M. Nicholas. 1992



Implications of concepts of pain for assessment?

- Assessment of pain should include multiple dimensions
- Dimensions:
 - Bio (physical)
 - Psycho (psychological processes)
 - Social (context)



Professor Michael Nicholas
Psychologist



Implications for treatment ?

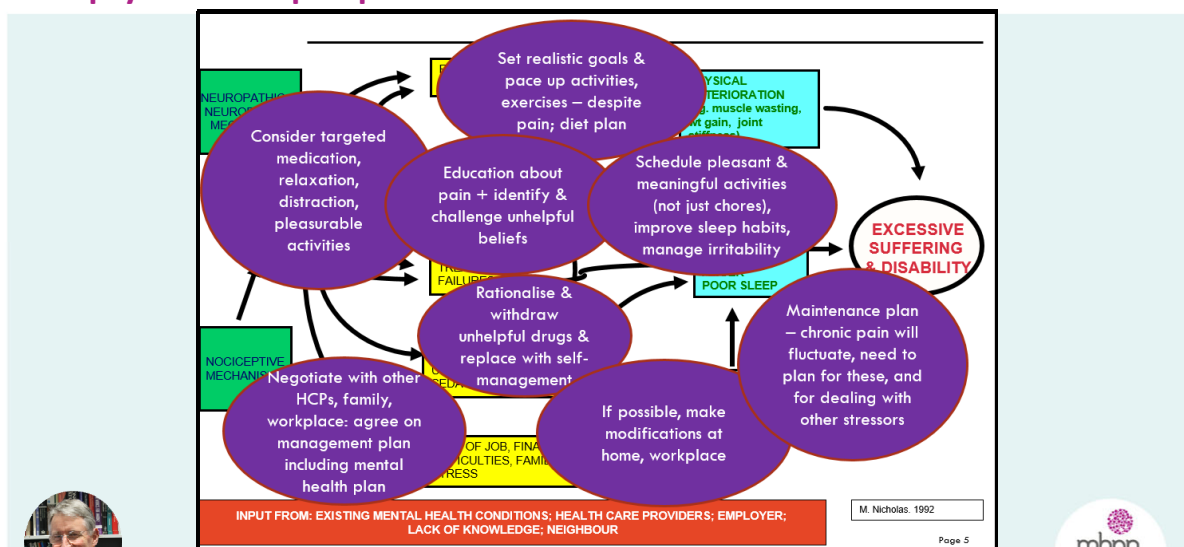
- When more than one of these features seems to be contributing to a pain problem
- Treatment(s) should be targeted at as many of these features as possible
- 'Multi-modal' treatment is required
- To be effective these must be coordinated
- That is: interdisciplinary pain management



Professor Michael Nicholas
Psychologist



Explaining the Interacting Contributors and Effects A biopsychosocial perspective



Professor Michael Nicholas
Psychologist



Consult 1

- Buy time.
- History including the PEG outcome measure.
- Empathetic engagement.
- Seek clinical handover
- Flag non-pharma management.
- Opioids: regulatory aspects, detective work, consider a few days supply.



Dr Simon Holliday
General Practitioner



Consult 2

- Biomedical assessment
- Drug and Alcohol history including pharmaceuticals
- Education on opioids, benzodiazepines and brain science
- Link management to the education
- Request workers compensation funding for recruitment of Allied Health team
- Begin weaning benzodiazepines with structuring of any opioids.



Dr Simon Holliday
General Practitioner



Consult 3

- Multidisciplinary referrals
- Contact the insurer to facilitate referral and return to work plan
- Opioid tapering with increased prescribing and dispensing boundaries to resistance.
- Consider take-home naloxone and rotation to buprenorphine (now in a depot formulation).
- Address barriers: adverse drug reactions
- Consider spousal role.



Dr Simon Holliday
General Practitioner



Consult 4

- Address:
 - Smoking: tobacco and cannabis.
 - Opioid de-prescribing.
 - Insomnia care.
 - Diet.
 - Social stressors.



Dr Simon Holliday
General Practitioner

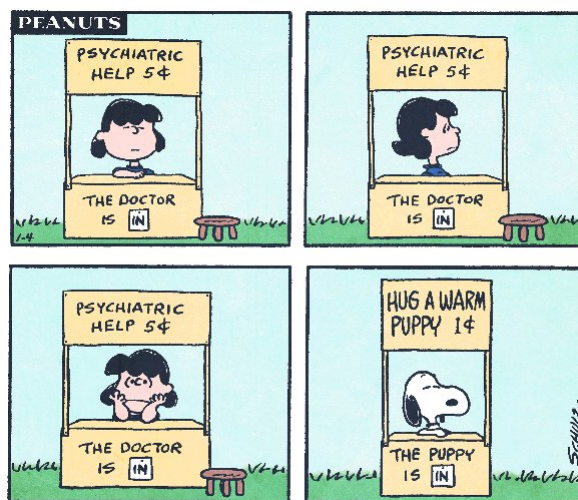


Consult 5

- Review management GP and Allied Health team.
- Repeat the PEG score.
- Advocate for an “Activity pacing” style return to work.
- Explore any cognitive, behavioural, and affective barriers.
- Look at his physical and psychological multi-morbidities.



Dr Simon Holliday
General Practitioner



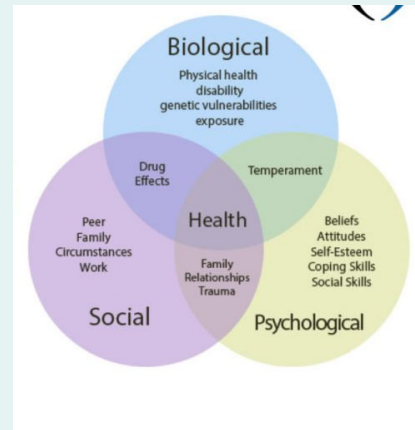
Dr Simon Holliday
General Practitioner

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Role of a Physiotherapist in Pain Management

- Recognise
 - OREBRO SF 10
 - Listen
 - ÖMPSQ SF-10
- Respond
 - psychologically informed physio
- Refer
 - if and when needed
- Review
 - collaboration with team and adapt/adjust as needed



Catherine Ketsimur
Physiotherapist



Role of the physiotherapist in Chronic Pain Management

- Education (guide)
 - Pain Physiology
 - Influences of/on pain
 - Self management strategies
- Functional Rehabilitation
 - Specific task or exercise practice
 - Graded activity - pacing up
- Collaboration with Multidisciplinary or Interdisciplinary Team



Catherine Ketsimur
Physiotherapist



Role of the physiotherapist in Chronic Pain Management

- **Collaboration:**

- Interrelationship of mental and physical health - aware of limits and abilities of patient
- share strategies to get the best out of our care
- planning for RTW, take into account all facets of wellbeing

- **consistency of message:**

- pain does not equal harm (but pain is real)
- hands on treatment is not helpful - changes in sensitivity and processing
- exercise/movement is essential

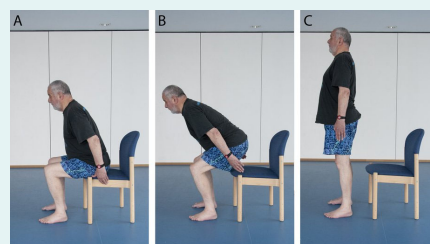


Catherine Ketsimur
Physiotherapist



Exercise in chronic pain

- grade/pace up
- social benefits of groups
- physiological changes due to fear and exertion
- exercise and cleaning your teeth
- online resources
 - Exercise is medicine, 23 1/2 hours, etc.



Catherine Ketsimur
Physiotherapist



A possible program for Gerry

- **Initial**

- education about pain and nervous system changes
- walking program - set baseline - guide by time not pain
- self massage to desensitise scar
- gentle set of stretches
- encourage strategies taught by Mental Health Practitioner

- **Progression**

- continue education - address questions and worries as part of team
- Pace up walking /day - e.g. 2 min: up to 30 min 5x/week
- continue stretches
- graded lifting - initial movement to full movement, + weight, + repetitions + strategies for calming
- build functional strength to return to normal movement patterns and function



Catherine Ketsimur
Physiotherapist



Q&A Session



Dr Simon Holliday
General Practitioner and
Addiction Physician



Professor Michael Nicholas
Psychologist



Catherine Ketsimur
Physiotherapist



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Thank you for your participation

- Please ensure you complete the **exit survey** before you log out - it will appear on your screen after the session closes
- A Statement of Attendance for this webinar will be issued within four weeks
- Each participant will be sent a link to the online resources associated with this webinar within two weeks.

Upcoming webinars:

- Emerging Minds: Engaging fathers and their children (29th Oct)
- Emerging Minds: Practice skills of working with children who have experienced trauma (19th Nov)
- MHPN: Collaborative approach to working with children affected by grief (10th Dec)



MHPN Presents

MHPN is excited to announce our inaugural podcast which explores wellbeing and mental health.

Listen to engaging conversations between mental health practitioners, as they reflect on a variety of topics related to mental wellbeing, interdisciplinary practice, and collaborative care.

You can find us on Apple Podcasts, Spotify and on our website.

Subscribe to stay up to date with our fortnightly episodes.

www.mhpn.org.au/mhpnpresentspodcast



MHPN networks

Would you like to continue the 'Working collaboratively to address the mental health of people experiencing chronic pain' discussion with local practitioners?

Or perhaps start discussing issues of local relevance? MHPN Project Officers are available to help you establish and support interdisciplinary mental health networks across metropolitan, regional, rural and remote Australia.

We have 373 networks around the country. Visit our online map to find out which networks are close to you at mhpn.org.au or contact Jacqui O'Loughlin at networks@mhpn.org.au.



Thank you for your contribution and participation.

Good evening.

