

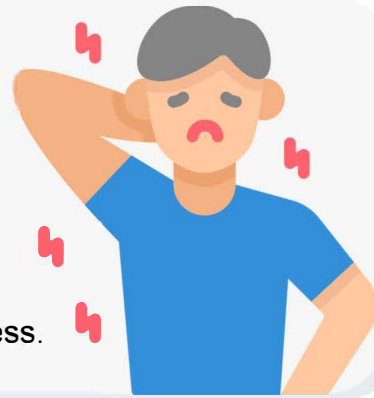
Summary of HICP Management Program

1

Assess for High-Impact Chronic Pain (HICP) with the Graded Chronic Pain Scale-Revised (GCPS-R). Patients have HICP if they

- Had pain most days or every day in the last 3 months.
- Have pain limiting their activities most days or every day.

Use the GCPS-R or Brief Pain Inventory (BPI) forms to monitor progress.



2

Arrange for a narrative interview.



3

Arrange a physical examination and periodically revisit possible biological reasons for pain.

4

Repeatedly assure patients of negative findings. Explain not all causes of pain are found but those that are dangerous have been excluded.

5

Reinforce the **vicious cycle of pain causing alarm and alarm causing pain** and inflammation. The Two-Step tool used many times a day lays the foundation for different responses

6

Physical therapies and home exercises can hurt. Remind the patient that hurt doesn't necessarily mean harm and sending comforting safety messages to the brain lowers alarm. Assess for over-achievers who push through pain and cause further injury.

9

Self-soothing techniques like tapping, 5-4-3-2-1 mindfulness grounding technique, Thoppukaranam (super brain yoga), and butterfly hugs, can be taught, using the body to lower brain alarm. All tools can be found on-line at minimal to no cost. Links can be placed on a template and easily pasted in the patient's chart, then printed or emailed.



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Consistent **writing exercises** have been shown to lower pain by creating a sense of psychic distance from events and emotions. David Hanscom's link provides an explanation.



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If patients don't like writing, they can stand in front of a mirror and talk to themselves. Speaking all the thoughts in their head creates a similar psychic distance from the limbic system.

11

As emotional regulation improves, more **mindfulness techniques** can be employed to notice dysregulation. Body scans can be used to pay attention to the parts of the body that hurt and those that don't. Patients can be taught to recognize when stress presents in the body and how the body response reflects thoughts and feelings. They can be taught about the flight, fight, freeze responses which vary individually and according to the level of threat. They can learn to recognize unique defence strategies that sabotage recovery.

7

Frequent short intervals, starting with 2 or 3 minutes, of walking, chair yoga, fascia stretching exercises, Qigong, and Tai Chi can stretch muscles, improve posture, and increase a sense of self-efficacy. These activities can be titrated up as tolerated. Pacing is emphasized as well as relaxation techniques to prevent guarding and muscle tension.



8

Internet-based exercise programs are available from Pain BC



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Patients are invited to contact Pain BC where pain coaches can help guide them to better well being



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Cognitive behavioral techniques can be incorporated to further subdue alarm. Patients can be referred to mental health professionals or self-management internet programs.

