



MANAGING YOUR PAIN

Pain is a common symptom reported by people with multiple sclerosis (MS). Approximately 50-60% of people with MS experience acute or chronic pain at some point during the course of their disease. People with MS can experience different types of pain such as headaches or neuropathic (related to the nervous system) pain. The severity of pain in people with MS can also vary, even within a single day. Fortunately, you can learn to manage your pain and limit its impact on your life.

How can pain from MS affect your life?

- Pain can interfere with your sleep, mood, energy, physical functioning, and enjoyment of life.
- You may experience pain alongside other conditions such as fatigue, anxiety, depression, and stress.
- Pain can make it difficult to participate in daily activities such as chores, work, or hobbies.

How to seek help for your pain

- Talk with your health care provider about your pain as soon as possible. Your provider can discuss with you

how best to manage your pain. We encourage you to share this fact sheet with your provider.

- Be honest about how much (or little) pain is affecting your life.
- Be open to options your provider suggests for managing your pain, including treatments that do not involve medications.
- Ask questions. Use your provider as a resource to learn more about your pain and how to manage it.
- Use reliable online resources to learn about managing your pain such as the National MS Society (see Resources).

How is pain from MS typically treated?

There are a number of treatments available to help you effectively manage your pain. Pain is often best managed by using more than one strategy.

Self-Management

While it is important to rely on expertise from your health care provider, you will play the most important role in managing your day-to-day your pain. Thus, we recommend that you adopt a

self-management approach to managing your pain. Self-management involves tracking your pain, setting goals, trying different pain management strategies and monitoring your progress.

Tracking your pain

- Notice what ‘triggers’ and relieves your pain such as changes in your activities, time of day, weather or other conditions like stress or depression.
- Keep a record of your pain and take that with you to your medical appointment. This may help you and your provider come up with a pain management plan.
 - ◆ The American Chronic Pain Association provides an online and printable version of a log for tracking pain
- Track your strengths: What are you doing well in dealing with pain and its effects? What are you successful at despite your pain? These will give you clues as to how to manage your pain in the future.

Set goals

- Create long-term goals such as increasing your ability to be more physically active or decreasing the impact pain has on your moods.
- Break the long-term goals into smaller short-term goals such as learning a new physical activity or learning relaxation skills to reduce stress. Be

realistic about your goals so you feel confident that you can achieve them.

- Use the information from tracking your pain to set new goals and pain management skills you want to develop. Many of the skills that people use to manage pain are based on behavioral treatments, described below.

Monitor your progress

- Monitor how different pain management strategies are working or not working. If one strategy does not work, try something else.
- Bring information about your progress to your health care provider to help refine your pain management plan.

Behavioral Treatments

Research on other pain conditions such as arthritis, back pain, and headaches have shown that behavioral treatments and skills are effective in helping people manage pain and reduce its impact on their lives. Research is under way to determine if these behavioral treatments and skills are also effective in helping people with MS manage pain. Preliminary results suggest that they are likely to benefit people with MS.

Behavioral treatments for pain include:

- **Cognitive behavioral therapy**, commonly referred to as “CBT”, is an approach to pain management which can help you learn a variety of skills for managing pain and decreasing

its impact on your life. It may include learning relaxation skills (described below), goal-setting skills, strategies for becoming more active, skills for pacing your activities, and other self-management or coping skills. It often also includes examining your thoughts (self-talk) about pain and learning ways to replace any unhelpful thoughts with more helpful ones. CBT has been shown to reduce pain, improve mood, and improve functioning. Ask your health care provider for more information on CBT or therapists who are skilled in CBT.

- **Relaxation techniques** such as diaphragmatic or controlled breathing can help you trigger the “relaxation response”, which counteracts pain. Relaxation can also reduce muscle and mental tension associated with pain. Other relaxation skills may include visualization, or tensing and releasing muscle groups (known as progressive muscle relaxation).
- **Mindfulness training or meditation** involves focusing on your present experience in a manner that is open and non-judgmental. Mindfulness meditation can help learn new ways of responding to your pain, of living more in the moment despite pain, and of living your life more fully. Mindfulness has been shown to be a skill that can be helpful in managing the suffering that can occur with pain.

- **Self-hypnosis** is focusing ones attention inward to change your perception and experience of pain. Self-hypnosis usually involves focusing on a single objective, image, or sensation in order to enter a deeper state of relaxation. In the relaxed state, you are given suggestions for positive changes such as feeling greater comfort. This technique has been studied in people with MS and shows promise as a useful tool in relieving pain. You can learn how to do self-hypnosis on your own or by working with a professional who is experienced in using hypnosis for pain management.

Physical Treatments

It is important to consult with your health care provider to discuss physical treatment options to reduce risk of further pain or injury,

- **Regular exercise** is often helpful in managing pain and improving function. Potential goals for exercise include aerobic fitness, improved flexibility, increased strength, and increased skill in performing physical activities. If you need help setting up a home exercise program, talk to your provider about whether physical therapy may be helpful to get you started.
- Some people with MS report that **movement activities** such as yoga, Tai Chi, swimming or water aerobics are helpful in managing pain.

- ◆ Find exercise classes by contacting local gyms, YMCAs, or searching the internet for local classes.
- ◆ If you have limited mobility, there are modified exercises available. For example, you can do exercises while you are sitting in a wheelchair.
- ◆ The National Center on Physical Activity and Disability (www.ncpad.org) offers free online exercise videos for individuals with different types of disabilities including MS.

- **Massage and acupuncture** have potential to help relieve pain, although there is limited research on pain associated with MS.

Tips for using behavioral or physical treatments

- See if your insurance covers non-medication treatments such as cognitive behavioral therapy, physical therapy or massage. If so, you may need a provider's referral to get them covered.
- Check with your provider before you begin any type of therapy including alternative treatments such as taking vitamins or supplements.
- Keep track of which therapies improve the quality of your life, and which ones do not, and discuss this information with your provider.

Medications

It is important to find the specific causes of your pain so it can be treated effectively. For example, anticonvulsant medication is often effective in treating neuropathic pain (described as a sharp, burning, stabbing sensation).

Pain from MS is often treated with over-the-counter or prescription pain relievers. Categories of medications and the types of pain they are used to treat include:

Over-the-counter medications

- Non-steroidal anti-inflammatory drugs (also known as NSAIDs) such as aspirin, ibuprofen (Motrin, Advil) and naproxen (Aleve) are most commonly used to treat musculoskeletal pain. Other common over the counter treatments are pain relievers such as Tylenol (Acetaminophen), which may produce fewer stomach side effects.

Prescribed pain medications

- Anticonvulsants (also known as anti-seizure medications) are the major category of medications prescribed for pain in MS, and are used to treat neuropathic pain.
- Antidepressants are used to treat neuropathic pain and depression. Antidepressants that selectively inhibit the reuptake of serotonin are called SSRIs and those that inhibit the reuptake of both norepinephrine and serotonin are called SNRIs. There is

evidence that the SNRIs Duloxetine and Venlafaxine are effective in the treatment of neuropathic pain but there is less evidence on the effectiveness of SSRIs.

- Narcotics (opioids) such as morphine, codeine, hydrocodone and oxycodone are sometimes used to treat neuropathic, acute tissue injury and musculoskeletal pain.
 - ◆ There is evidence that opioids reduce neuropathic pain, but research on their effectiveness in MS is limited.
 - ◆ Long-term use of opioids can result in tolerance and/or increased pain sensitivity in some people, so it is important to discuss these risks and other possible side effects with your health care provider.
- Muscle relaxants and anti-spasticity medications are sometimes used to treat spasm-related and musculoskeletal pain.
- Medical marijuana (also known as cannabinoids) is only legal in 18 U.S. states so is not available through the majority of providers. There is some evidence that cannabinoids reduce central neuropathic pain and spasticity in people with MS and more research is underway.

All medications have possible side effects, some of which can be serious. Discuss all side effects with your provider.

Tips for taking pain medications

- Let your provider know all medications you are already taking. This may influence which medications are recommended for pain.
- If medications are prescribed for your pain, here are some questions to ask your provider:
 - ◆ How do these medications work?
 - ◆ How often should you take them?
 - ◆ What side effects can you expect?
 - ◆ How long will they take to reduce your pain?
 - ◆ If they don't seem to be working, what should you do?
- If you have a bad reaction to your pain medication, immediately call your provider or go to the emergency room.
- Keep track of how well the pain medications work and any side effects that you are experiencing.
- Talk to your provider regularly about your pain medications in case adjustments are necessary.

Maintaining a healthy lifestyle

Maintaining a healthy lifestyle can help reduce your pain and decrease the effect pain has on your life.

- Be active. Keeping busy and challenging yourself physically and mentally will help you have the energy and focus to manage your pain.

- Maintain a healthy diet.
- Get enough sleep and rest.

Resources

National MS Society, Pain - <http://www.nationalmssociety.org/about-multiple-sclerosis/what-we-know-about-ms/symptoms/pain/index.aspx>

- 1-800-344-4867

“Getting a Handle on MS Pain” article can be found at <http://publications.nationalmssociety.org/momentum/winter2011#pg19>

U.S. Department of Veterans Affairs, Center of Excellence for MS, MS Pain, http://www.va.gov/MS/articles/Multiple_Sclerosis_Pain.asp

American Chronic Pain Association, <http://www.theacpa.org>

The American Chronic Pain Association provides an online and printable version of a log for tracking pain here: <http://www.theacpa.org/25/CommunicationTools.aspx>

American Pain Society, <http://www.ampainsoc.org>

Center for Mindfulness in Medicine, Health Care, and Society, www.umassmed.edu/cfm

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Authorship

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This information is not meant to replace the advice from a medical professional. You should consult your health care provider regarding specific medical concerns or treatment.