

UW Psychiatry & Behavioral Sciences

Chronic Pain Groups in Collaborative Care

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Speaker Disclosures

The presenter of this session has NOT had any relevant financial relationships.



Learning Objectives

As the result of participating in this session, participants will:

- Be able to explain the rationale for taking a biopsychosocial approach to chronic pain.
- Recognize opportunities and strategies for creating dynamic partnerships between collaborative care and tertiary specialty clinics.
- Describe the core components of interventions for chronic pain provided in a group setting.
- Identify opportunities for continued learning about a biopsychosocial approach to chronic pain.

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UWMC Center for Pain Relief

- We provide consultation for patients from across Washington state and the Pacific Northwest, and are known as a center of clinical excellence at a national level.
- Our world-renowned team focuses on the diagnosis and treatment of people with ongoing pain. We provide multispecialty coordinated care and a wide range of advanced imaging techniques (3-D CT scanner, fluoroscopy and ultrasound), non-opioid medication and integrative medicine approaches, including training in relaxation and coping.
- We diagnose and treat complex and persistent pain resulting from a wide range of musculoskeletal and neurological pain conditions, including but not limited to arthritis and rheumatologic disorders; diabetes; cancer; neuropathy; surgery; chronic headaches; fibromyalgia; myofascial, visceral and pelvic pain.

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Behavioral Health & Pain Psychology at CPR

- Staffing: 2 PhD, 1 LICSW, 1 psychiatrist
 - Individual Interventions:
 - CBT-CP/CBT-HA
 - ACT-CP
 - EAET
 - PRT
 - CPT
 - PE
 - WET
 - Medication management
 - Group Interventions:
 - Chronic Pain Coping Skills
 - CBT-I

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All pain is real. Everything matters when it comes to pain.



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- Pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage.
- Acute pain is a normal sensation triggered in the nervous system to alert you to possible injury and the need to take care of yourself.
- Chronic pain persists >3 months. Pain signals keep firing in the nervous system for weeks, months, even years. There may have been an initial injury, but some people suffer chronic pain in the absence of any past injury or evidence of body damage. This pain can sometimes be explained through neuroinflammatory and neuroplastic processes.

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PAIN MANAGEMENT BEST PRACTICES INTER-AGENCY TASK FORCE REPORT

Updates, Gaps, Inconsistencies, and Recommendations

FINAL REPORT

- 50 million adults in the United States have chronic daily pain
- 19.6 million adults experiencing high impact chronic pain that interferes with daily life or work activities.
- Nation-wide the cost of chronic pain is estimated to be between \$560-635 billion annually.
- Our nation is facing an opioid crisis that, over the past two decades, has resulted in an unprecedented wave of overdose deaths associated with prescription opioids, heroin, and synthetic opioids.

pmtf-final-report-2019-05-23.pdf (hhs.gov)

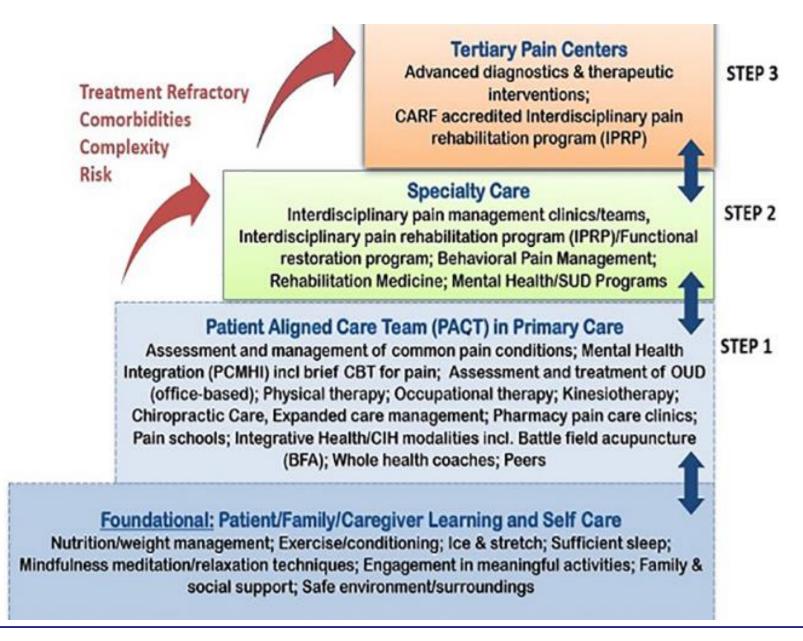
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GAPS AND RECOMMENDATIONS

- Access to evidence-based psychological and behavioral health approaches for treating chronic pain and mental health comorbidities (e.g., PTSD, depression, anxiety, mood disorders, SUD) is limited by geography, reimbursement, and education in primary care and specialty care settings.
 - RECOMMENDATION 1A: Increase access to evidence-based psychological interventions, including the full range of treatment deliveries (e.g., in-person, telehealth, internet self-management, mobile applications, group sessions, telephone counseling) and hub-and-spoke models.
 - RECOMMENDATION 1B: Educate physicians, dentists, and health care providers on the benefits of psychological and behavioral health treatment modalities in the multidisciplinary approach to acute and chronic pain management.
 - RECOMMENDATION 1C: Improve reimbursement policies for integrated, multidisciplinary, multimodal treatment approaches that include psychological and behavioral health interventions through traditional and nontraditional delivery methods (e.g., in-person, telehealth, internet selfmanagement, mobile applications, group sessions, telephone counseling).

pmtf-final-report-2019-05-23.pdf (hhs.gov)

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Creation of an Informal Hub and Spoke

- 8-hour training for UWMC & UWPC BHIP providers on pain neuroscience education (PNE) cognitive behavioral therapy for chronic pain (CBT-CP) in primary care and ability to refer to CPR's reoccurring chronic pain coping skills class.
- VA clinical protocols utilized in training
 - <u>CBT_ chronic pain (va.gov)</u>
 - Brief_CBT-CP-Manual-V2_5-6-2021.pdf (va.gov)
 - va.gov/PAINMANAGEMENT/CBT_CP/docs/CBT-HA_BOOK_061621_complete_508.pdf#

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Chronic Pain Coping Skills Class

- 8 weeks in duration. Meets for 2-hours each week via Zoom. Previously had 1-hour gentle movement component (seated Yoga facilitated by a physical therapist and billed as group physical therapy).
- Group participants are from Center for Pain Relief, BHIP providers who have been trained in CBT-CP by CPR providers, Oral Medicine, and Fred Hutch's Sickle Cell Service. Potential future expansion to Harborview behavioral health and physical therapy providers.
- 15-20 participants per cohort. Approximately 75% retention rate.
- Billed as Health Behavior Assessment and Intervention (HBAI) services
 - CPT Codes: 96164 and 96165
 - >\$200,000 revenue in 2023 from groups

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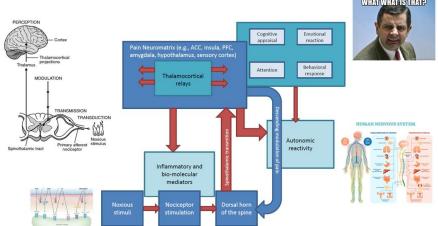
Week One

- Introduction and orientation to the group.
- Review of goals for group and topics covered.
- Overview of brain-body connection. Functional differences between acute and chronic pain.
- Discuss the goals of pain psychology, introduction of cognitive-behavioral theory, gate control theory, the role of relaxation and stress response, and participants are asked to identify individual goals for group. Neuroplasticity and pain introduced
- Relaxation & guided meditation:
- Home practice



Week Two

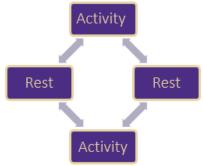
- Overview of pain neuroscience, immune system and pain, myofascial and muscle pain.
- Ongoing pain neuroscience education, including an overview of the pain neuromatrix, modulation of pain perception, the immune system's role in sensitization, and the role of emotion and appraisal in sensitization.
- Diet and pain
 Relaxation & guided meditation
 - Home practice



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Week Three

- Movement and pain, desensitization training, review of time-based activity pacing, relaxation practice.
- Review time-based activity pacing for desensitization and increasing activity, including a review of the chronic pain cycle and explanation of the "protect by pain threshold."
- The role of movement in addressing pain sensitization is also briefly reviewed.
- Relaxation & guided meditation
- Home practice





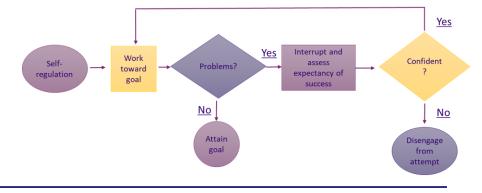
Week Four

- Addressing unhelpful thinking styles, reducing rumination/worry, thoughts and behavior, relaxation practice.
- Review cognitive tools and rational for addressing unhelpful thinking styles, including thought challenging, thought defusion, and automatic negative thoughts.
- The role of attention, appraisal, and behavior is reviewed with regard to pain sensitization and distress.
- Relaxation & guided meditation
- Home practice



Week Five

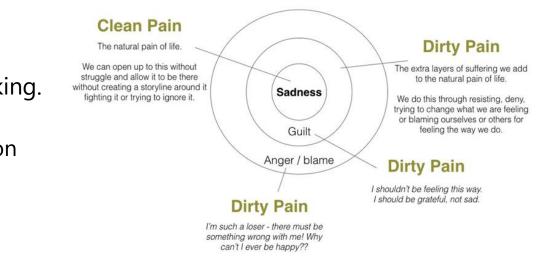
- Discussion of goal pursuit as a function of value and self-efficacy.
- Review SMART goal setting and values-based goal setting (short term, medium term, long term).
- Review importance of improving sleep quality with chronic pain.
- Review sleep hygiene and sleep promoting behaviors/tools.
- Relaxation & guided meditation
- Home practice



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Week Six

- Practicing acceptance, "clean vs. dirty pain."
- We review metaphors that illustrate the practice of acceptance and mindfulness, how acceptance may help to reduce distress associated with chronic pain, the concepts of clean vs. dirty pain, and emotion processing.
- Assertive communication
- Introduction of somatic tracking.
- Relaxation & guided meditation
- Home practice



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Week Seven

- Control agenda cost/benefit exercise, creative hopelessness, mindfulness practice, review of concepts, relaxation practice.
- Discuss cost/benefit analysis of control strategies and relate this back to acceptance and mindfulness.
- We discuss the concepts of creative hopelessness and assertive communication.
- Review the 7 key factors of mindfulness and the core concepts in acceptance and commitment therapy and relate them back to skills learned so far.
- Relaxation & guided meditation
- Home practice



Week Eight

- Review of concepts learned and goals of group, maintaining behavior going forward, additional resources, relaxation practice.
- Skills review, review goals set at the beginning of group, discuss creating a coping skills toolkit, and discuss using tools/skills to maintain gains going forward, and various online resources for pain and mood management.



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Future trainings through MHTTC

Webinar: A Biopsychosocial Model for Chronic Pain & Strategies to Support The Sensory and Emotional Experience Of Those Living With Pain

> May 21, 2024 10:30 AM – 12:00 PM

Learning Community: Pain Psychology Approaches in Therapy

July 12, 2024 – Pain Neuroscience Education July 26, 2024 – Cognitive Behavioral Therapy for Chronic Pain August 9, 2024 – Acceptance and Commitment Therapy for Chronic Pain August 30, 2024 – Emotional Awareness and Expression Therapy & Pain Reprocessing Therapy All sessions are 11:00 AM – 1:00 PM

Northwest MHTTC | Mental Health Technology Transfer Center (MHTTC) Network (mhttcnetwork.org)

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UW TelePain

UW Medicine

ANESTHESIOLOGY & PAIN MEDICINE

UW TelePain is a free weekly service funded by the Washington State Legislature for community providers, intended to increase knowledge and confidence in chronic pain management and to provide consultation for difficult chronic pain cases. TelePain sessions are provided via Zoom and include a network of interprofessional specialists with expertise in the management of challenging chronic pain problems.

UW TelePain – UW Anesthesiology & Pain Medicine

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UW Pain & Opioid Provider Hotline

- The Provider Hotline gives free on-demand clinical advice to health care providers caring for patients with complex pain medication regimens, especially high-dose opioids. We are staffed by UW Division of Pain Medicine pharmacists and physicians.
- The Provider Hotline is available Monday through Friday (excluding holidays):
- **Phone**: 844.520.PAIN (7246)
- Hours: 8:30 AM to 4:30 PM

UW Pain & Opioid Provider Hotline – UW Anesthesiology & Pain Medicine

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Self-Help Books for pain management and education

- <u>Managing Pain Before It Manages You</u>(fourth edition) by Margaret Caudill, M.D., Ph.D. This is an excellent self-help book with numerous practical suggestions for chronic pain patients.
- <u>The Pain Survival Guide: How to Reclaim Your Life</u> Dennis Turk and Frits Winter
- <u>Take Charge of Your Chronic Pain</u> Peter Abachi, MD
- Explain Pain by David Butler and Lorimer Moseley
- <u>The Brain That Changes Itself</u> Norman Doidge
- Painful Yarns: Metaphors and Stories to Help Understand the Biology of Pain Lorimer Moseley

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Books on emotion, meditation, and chronic pain

- Full Catastrophe Living by Jon Kabat-Zinn
- <u>The Mind-Body Prescription</u> by John Sarno
- <u>Unlearn Your Pain by Howard Schubiner</u>
- <u>Back In Control</u> by David Hanscom

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Miles for Migraines resources and support community: https://www.milesformigraine.org/

Tame the beast (rethink persistent pain): https://www.tamethebeast.org/

The Institute for Chronic Pain blog https://www.instituteforchronicpain.org/

Curable Health Blog https://www.curablehealth.com/blog

- Pain is weird (Paul Ingraham) https://www.painscience.com/articles/pain-is-weird.php

- NPR: Pain Reexamined, a New Look at How We Manage Pain <u>https://www.npr.org/series/774347723/pain-reexamined</u>

- Flippin' Pain https://www.flippinpain.co.uk/

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- Lorimer Mosely - Why Things Hurt https://youtu.be/gwd-wLdIHjs

- Understanding Pain: What to do about it in less than five minutes: <u>https://www.youtube.com/watch?v=5KrUL8tOaQs</u>

- Joshua W. Pate - The mysterious science of pain <u>https://youtu.be/eakyDiXX6Uc</u>

- Lorimer Moseley and Cormac Ryan - Pain: Do You Get It? <u>https://youtu.be/IQ1w3qoBWLA</u>

- Lorimer Moseley - 7 Amazing Pain Facts that Could Change Your Life <u>Https://www.youtube.com/watch?v=tAXXKiTpp0U</u>

- One Thing - video series on pain https://onething.painsci.org/about/

- Getting a grip on pain and the brain: Lorimer Moseley <u>https://www.youtube.com/watch?v=5p6sbi_0lLc</u>

- Dr. Howard Schubiner: The Reign of Pain Lies Mostly in the Brain <u>Https://www.youtube.com/watch?v=0VyH1laOd2M</u>

- Dr. Beth Darnall: Opening the Medicine Box of the Mind: The Psychology of Pain https://www.youtube.com/watch?v=ftmryljU-BE

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Videos (continued)

Dr. Howard Schubiner - What is Pain video series Intro - <u>https://youtu.be/jiUHfip84IU</u> What is Pain? - <u>https://youtu.be/rSgnFIJKY08</u> The Brain Creates Pain - <u>https://youtu.be/857ujR0p43Y</u> Predictive Coding - <u>https://youtu.be/Acl9mvX18Oc</u> How to Determine the Cause of Chronic Pain - <u>https://youtu.be/u3KVcqsaLR8</u> How to Reverse Chronic Pain - <u>https://youtu.be/ uQJBtKj5Nc</u> All MRI's are Abnormal - <u>https://youtu.be/czVW8wD-mHc</u>

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Guided Meditations

YouTube is a great resource for guided meditations. You can search by type of meditation and duration, if looking for shorter or longer options.

Here are a few examples to get started:

Demonstration of belly breathing (also called diaphragmatic breathing) https://www.youtube.com/watch?v=vMjTJf4-xz0

<u>Progressive muscle relaxation</u> <u>Https://www.youtube.com/watch?v=ihO02wUzgkc</u>]

Body scan meditation https://www.youtube.com/watch?v=i7xGF8F28zo

Meditations fostering self-compassion:

https://self-compassion.org/category/exercises/#guided-meditations

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Mobile Apps (some free/some paid)

- **Curable** - I highly recommend this as a resource. It is a great place to start educating yourself about the stress-pain connection, introduction to various behavioral coping skills, resources fo mindfulness and meditation, and links to the "tell me about your pain" podcast that is very informative. You can also find this podcast on other podcast apps/sites.

- Pathways pain relief app similar to Curable.
- Calm for sleep and meditation
- Insight timer guided meditations for sleep, anxiety, and stress
- The Mindfulness app deeper into mindfulness practice, beyond meditation.

- **CBT-i Coach** - CBT-i Coach is for people who are engaged in Cognitive Behavioral Therapy for Insomnia with a health provider, or who have experienced symptoms of insomnia and would like to improve their sleep habits

- **Breathe2Relax** - This app is a stress management tool, which will help you learn how to perform and use diaphragmatic breathing techniques for stress control

- **Tactical Breather** - Tactical Breather can be used to gain control over physiological and Psychological responses to stress.

- **PTSD Coach** - PTSD Coach was designed for those who have, or may have, posttraumatic stress disorder (PTSD). This app provides you with education about PTSD, information about professional care, a self-assessment for PTSD, opportunities to find support, and tools that can help you manage the stresses of daily life with PTSD.

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Takeaways

- All Pain is real. Pain is a biopsychosocial experience and needs to be managed with a biopsychosocial approach.
- Specialty/tertiary providers can create dynamic and effective partnerships that are financially viable and support the complex needs of people living with chronic pain.
- We're here to help support you as you work with patients living with chronic pain.

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Additional Free Resources for Washington State Healthcare Providers

*No cost

EDUCATIONAL SERIES:

- AIMS Center office hours
- <u>UW Traumatic Brain Injury</u> Behavioral Health ECHO
- UW Psychiatry & Addictions Case Conference ECHO <u>UW PACC</u>
- UW TelePain series <u>About TelePain (washington.edu)</u>
- TeleBehavioral Health 101-201-301-401 <u>Telehealth Training &</u> <u>Support - Harborview Behavioral Health Institute (uw.edu)</u> | <u>bhinstitute@uw.edu</u>

PROVIDER CONSULTATION LINES

- UW Pain & Opioid Provider Consultation Hotline <u>Consultation</u> (washington.edu) – 844-520-PAIN 7246)
- Psychiatry Consultation Line (877) 927-7924
- Partnership Access Line (PAL) (pediatric psychiatry) (866) 599-7257
- PAL for Moms (perinatal psychiatry) (877) 725-4666

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Questions and Discussion

 Ask questions in the chat or unmute yourself



Registration

 If you have not yet registered, please email <u>uwictp@uw.edu</u> and we will send you a link

