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Occupational Therapy and Pain

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Learning Objectives

- At the end of this session participants will be able to:
  - Define different kinds of pain
  - Explain occupational therapy’s roles with pain patients.
  - Discuss the impact of pain on occupation and participation in the lives of people who chronic experience pain.
  - Explain 5 things occupational therapists can do to contribute to pain management and education of patients in pain.

What is Pain?

- An unpleasant or noxious feeling
- “Pain is a uniquely individual and subjective experience that depends on a variety of biological, psychological, and social factors, and different population groups experience pain differentially” (IOM, 2011)
Acute Pain
- Normal sensation triggered by the CNS to alert you of something you need to know about (AAPM, n.d.)
- Sudden onset and expected to last a short time.
- Usually related to an illness or injury
  - Kidney stone, sunburn, muscle strain
- Usually treated with over-the-counter or short term stronger meds i.e. root canal.  
  (IOM, 2011)

Recurrent Pain
- Acute pain can be recurrent with episodes of pain and periods without pain.
  - Migraines, sickle cell, dysmenorrhea
    - (IOM, 2011)

What is chronic pain?
- Lasts more than several months (variously defined as 3 to 6 months, but certainly longer than “normal healing”)
- Chronic pain can be a disease in itself.
  - Chronic pain has a distinct pathology, causing changes throughout the nervous system that often worsen over time. It has significant psychological and cognitive correlates and can constitute a serious, separate disease entity. (IOM, 2011)
What is Neuropathic Pain?

- A type of chronic pain that results from a disease of the peripheral or central nervous system that arises when
  - a person’s nerves, spinal cord, or brain is damaged or fails to function properly for any of a large number of reasons. (IOM, 2011)

Neuropathic Pain

- All neuropathic pain is associated with poor general health, comparable with other severe chronic diseases.
- It is associated with worse health and quality of life than non-neuropathic pain, and its incidence, prevalence, and impact are likely to increase with the aging population. (Smith & Torrance, 2012)

Neuropathic Pain

- The cause may be
  - an underlying disease process (as in diabetes) or injury (e.g., stroke, spinal cord damage).
- but neuropathic pain may not have an observable cause and can be considered
  - maladaptive “in the sense that the pain neither protects nor supports healing and repair” (Costigan et al., 2009, p. 3). IOM, 2011
Impact of Pain

- “Pain is a universal experience.” (IOM, 2011)
  - Pain affects people of all ages, including children (King et al, 2011)
- Acute & chronic pain affects a lot of Americans with at least 116 million U.S. adults burdened by chronic pain alone.
- The annual national economic cost associated w/ chronic pain is estimated at $560–635 billion. (IOM, 2011)

Impact of Chronic Pain

- Chronic pain creates both physical and psychological problems that affect whether a person can engage in meaningful activities each day.
- Pain can decrease a person's strength, coordination, and independence in addition to causing stress that may lead to depression (AOTA, 2002)

Occupational Therapy’s Core Beliefs

- “All people need to be able or enabled to engage in the occupations of their need and choice, to grow through what they do, and to experience independence or interdependence, equality, participation, security, health, and well-being” (Wilcock & Townsend, 2008, p. 198)
Role of Occupational Therapy

- Look at how pain affects one's everyday life and one's ability to participate in the important everyday tasks of life and one's occupations
- Structures interventions to facilitate participation in important tasks of life or occupations (AOTA, 2002)

Impact of Pain on Everyday Life Activities

- Person unable to perform specific activities – self-care, work, leisure
- Results in loss of independence in various roles
- May have both physical and psychological problems
Occupational Therapy Evaluation

- Occupational Therapists look at the:
  - Person
  - Environment - Context
  - Occupation or Task (Law, et. al 1996)

Person

- Occupational Profile
  - Understand client’s history, prior level of function, experiences, patterns of living, interests, values, and needs
  - Look at person’s roles – i.e. mother, worker, student, caretaker, etc.
- Occupational Performance Analysis
  - Looks at problems in task performance skills and underlying body functions/structures which limit occupational performance

Environment - Occupation

- Context
- What are the person’s occupations?
Assessment Tools

- Interviews – structured and unstructured
- Observations of task performance
- Informal and formal testing
- Pain scales
- Environmental assessments

Assessments

UNIVERSAL PAIN ASSESSMENT TOOL

This pain assessment tool is intended to help patient care providers assess pain according to individual patient needs. Explain and use 0-10 scale for patient self-assessment. Use the facial or behavioral observations to interpret expressed pain when patient cannot communicate their pain intensity.

Activity Tolerance Scale

0 1 2 3 4 5 6 7 8 9 10

Worst

Pain

Possible

Verbal

Description

NO PAIN

MILD PAIN

MODERATE PAIN

SEVERE PAIN

INTOLERABLE

WORST PAIN

Possbile

Not

Distracting

Concentration

Distracting

DIFFICULT

Focus

Activity

INTOLERABLE

PAIN

CANNOT

Complete

Task

Environment

Occupation

Intolerable

Pain

REQUIRES

Rest

Continue

Person

“change the person”

Environment

“change the environment”

Occupation

“change the way the task is done”
Intervention Approaches

- Health promotion
- Remediation and restoration
- Maintain
- Teach compensatory techniques or adaptation
- Prevent further disability

(AOTA, 2014)

Person

- Person learns new ways of doing things – e.g., use proper body mechanics, ergonomic principles, pacing, assertiveness, relaxation techniques

Person

- Person incorporates new ways of “doing” into routine and/or habit
- Person restructures daily activities to provide a balance of activity and rest
- Person’s perception of disability changes through engagement in occupations
Environment - Context
- Modify/rearrange furniture or equipment
- Modify social situations to facilitate participation
- Modify cultural expectations/behaviors
- Modify temporal aspects

Occupation
- Use of tools, adaptive equipment and/or assistive devices to make it easier to participate in meaningful occupations
- Change type of materials used
- Modify timing or sequence of occupation/task
- Eliminate steps in task

Occupation
- Change the way occupations are performed
  - i.e. put things on wheels
- Use meaningful occupation to improve health
- Lifestyle redesign
Outcomes of Occupational Therapy

- Occupational performance
  - Improvement or enhancement
- Adaptation
- Health and Wellness – occupational balance
- Participation
  - "Achieving health, well-being, and participation in life through engagement in occupation is the overarching statement that describes occupational therapy in its fullest sense" (AOTA, 2014)

Outcomes of Occupational Therapy

- Prevention
- Quality of life – "occupational autonomy"
- Role Competence –
  - "The ability to effectively meet the demands of roles in which the client engages."
- Self-advocacy (AOTA, 2014)

Occupational Therapy

- OT can teach people with chronic pain to learn to manage the physical and psychological effects of their pain, and lead active and productive lives.
- Medication, surgery, heat, cold, nerve stimulation, and massage are not enough.
- What they need to learn is
  - How to manage daily activities and
  - Change their lifestyle to successfully cope with long-term pain (AOTA, 2002).
What Can Occupational Therapists Do?

- Identify specific activities or behaviors that aggravate pain, and suggest alternatives activities or ways to perform them.
- Teach methods to decrease the frequency and duration of painful episodes.
- Implement therapy interventions that may decrease dependence on or use of pain medications.

What Can Occupational Therapists Do?

- May include
  - Relaxation techniques
  - Guided imagery
  - Yoga
  - Biofeedback
  - Mindfulness

What Can Occupational Therapists Do?

- Facilitate the development of better function for daily activities at work and home.
- Collaborate with the client’s team of health care professionals, such as physicians, physical therapists, psychiatrists, and psychologists, to determine the best course of treatment and intervention.
- Recommend and teach the client how to use adaptive equipment to decrease pain while performing tasks such as reaching, dressing, bathing, and perform household chores.
What do we do in Occupational Therapy for Patients with pain

Case Study
Valerie is a 35 y/o women with Lichen Sclerosis. She has burning, and itching in the anogenital area. She is referred to occupational therapy because she is no longer able to participate in her normal occupations. In particular, she can no longer ride her bike - her hobby and major exercise outlet. She is having other difficulties with activities in sitting.

Valerie
The Occupational Therapist evaluates Valerie to see what she needs to do, what she wants to do, and what barriers prevent her from doing them.

The occupational profile shows that Valerie can’t ride her bike or exercise. She has difficulty with certain tasks while sitting. She is having difficulty with sexual relations, and feels very “stressed out.”

Valerie
Together, Valerie and the Occupational Therapist look at the Valerie, the tasks she wants to accomplish, and her environment to see what they can change to enable her performance.

They decide on a recumbent bike, an adapted seat cushion for work, and referral to an online support group for women with Lichen Sclerosis to look for solutions to Valerie’s issues with sexual relations. The occupational therapist teaches Valerie relaxation techniques.
Case Study

- Javon hurt his back and has low back pain. He wants to return to work but is concerned that his job as a cashier will aggravate his back.
- He is referred to occupational therapy to see if he can return to work, and do some lifestyle redesign to learn to change the way he does things so he can manage and rearrange the tasks that cause him pain.

Javon

- The evaluation shows that Javon has difficulty standing. Standing and bending exacerbate his pain. His back hurts when he stands at the sink to brush his teeth (task or occupation). An onsite job analysis (occupational performance analysis) provides a look at the tasks Javon must do in the environment in which he must do them. (environment)
- Reasonable accommodations to the workplace are discussed to enable occupational performance.

- Javon will need to sit while performing his job as a cashier. A specific chair was obtained for Javon and this was discussed with his employer. Javon needed a reacher to avoid bending. Body mechanics were discussed, demonstrated, and performed within different contexts.
Case Study

- Lila has Rheumatoid Arthritis. She is referred to occupational therapy because she is having difficulty with some activities of daily living – particularly meal preparation and other household tasks. She can no longer shift her car out of park because of the pain in her wrist.
- Her occupational profile shows that Lila is having difficulty opening cans and handling pots and pans in the kitchen. Both cause pain and are contributing to her deformities. Other household chores cause pain and fatigue. The deformities in her wrist and pain interfere with shifting out of park

Lila

- Lila and the occupational therapist look at her kitchen and how she performs the tasks in her home. Her pots are very heavy.
- Lila is given a can opener that uses a grip that doesn’t hurt and a tab-can opener. She agrees to change to a different, lighter set of pots, which have hollow handles that she can lift with 2 hands.

Lila

- Lila and the occupational therapist review the patient’s activity diary. Lila attempts to clean her entire house in one day. The OT and Lila discuss energy conservation and review a new schedule to divide the tasks and distribute them over the course of a week to decrease pain and fatigue.
- The OT adapts the automatic shift knob in Lila’s car to a ball grasp with a sponge and duct tape to change the grip so Lila can shift without pain.
Maria

- Maria has fibromyalgia. She is referred to occupational therapy because her pain and fatigue is making it difficult for do her job as a salesperson. She is also having difficulty coaching her daughter’s volleyball team.
- Her occupational profile shows her pain increases with carrying her briefcase and purse and other tasks on her job and she is not sleeping at night.

Maria and the occupational therapist complete a job analysis of Maria’s job as a salesperson. They also review Maria’s sleeping habits and coaching.
- The occupational therapist suggests putting Maria’s sample case on wheels. She also suggests a smaller purse. Maria likes the idea of wheels on her briefcase but will have to get used to a smaller purse or not carry unnecessary items with her.
Maria’s Intervention

Maria

- The occupational therapist also suggests that Maria:
  - Not watch television or read in bed;
  - Keep the bedroom for sleep and related activities;
  - Develop a definitive bedtime routine; and
  - Incorporate time for mindfulness into her day.
- The OT and Maria discuss coaching and agree that Maria needs to use a courtside chair and let the athletes carry the equipment and gatorade jug.

Maria

- The OT suggests that Maria participate in water exercise or water aerobics to help control her pain.
Summary

- Occupational therapists work with patients with chronic pain that can interfere with their occupations and participation
- Occupational therapists can help improve occupational performance and participation in people who experience chronic pain and improve their quality of life

References