

Topical Issues in Pain 4

Physiotherapy Pain Association Yearbook



Topical Issues in Pain 4

**Placebo and nocebo
Pain management
Muscles and pain**

Editor

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Foreword

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CNS Press Ltd, Kestrel, Swanpool, Falmouth, Cornwall TR11 5BD, UK
Email: info@cnspress.co.uk
www.achesandpainonline.com

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First published 2002

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ISBN 0 9533423 3 6

British Library Cataloguing in Publication Data
Physiotherapy Pain Association Yearbook. Topical Issues in Pain 4. Placebo and nocebo. Pain management. Muscles and pain.
Edited by Louis Gifford
Includes bibliographical references and index
616.047.2 dc21

Editing JJ Editorial Services
Indexing Master Indexing
Typesetting Sangar Services
Printed and bound by Rowe the Printers, Cornwall, UK

Foreword

In October 1998 a group of Scottish Physiotherapy Pain Association members hosted, by popular demand, a successful study day titled, 'Whiplash: science and management'. This coincided with the launch of the first book in the Topical Issues in Pain series appropriately named *Whiplash—science and management. Fear-avoidance beliefs and behaviour*. In his review of this first title Pat Wall stated, 'It is not an exaggeration to say that this book marks a milestone not only for an understanding of pain but also for the maturation of Physiotherapy.' He concludes,

I look forward to this series and to the activities of the Physiotherapy Pain Association because they promise to revolutionise the morale, dignity and way of thinking of physiotherapists and thereby to affect everyone concerned with pain.

I too have looked forward to this series, and four years on I am eager to see how both Topical Issues in Pain 3 and 4 will be received. Four books in four years; this is quite an achievement and I believe that the Editor, Louis Gifford, should be congratulated. First, for the original idea of committing to print the excellent material presented at Physiotherapy Pain Association study days, and secondly, for delivering the goods.

Four books in four years. So what has happened to physiotherapy and 'pain' in the last four years? Notably: the growth of pain management programmes, the acknowledgement of biopsychosocial factors in pain treatment and management, the integration of 'Yellow flags and Red flags' in both the acute and chronic pain patient assessments, acknowledgement of patient and therapist fears in fear-avoidance beliefs and behaviours, and the demands of proving clinical effectiveness. I also believe that there has been a general increase in knowledge and awareness of the mechanisms and biology of pain and its impact on clinical pain management and pain relief.

If he were alive today, I think Pat Wall would be pleased with the progress that has been made.

Topical Issues in Pain 1 and 2 are key texts that have contributed to these changes and have helped the beneficial shift in the practice of many individual clinicians. These books are fast becoming standard texts for outpatient and student physiotherapists. Recently, and supported in full by The Private Practitioners Education Fund, every Physiotherapy School in the UK was provided with copies of the two volumes for their student libraries. It is hoped that the recently published third volume as well as this one will also be made available for students in a similar way.

Also, in the last four years, the PPA membership has increased and become far more proactive. For example, early in 2000 PPA North was established and has been organising and running courses and study days on pain management and measurement and the pain patient. PPA North members have also had representation on the Scottish Cross Party Group on Chronic Pain and were involved in February of this year when the Scottish Parliament held a members' debate on 'The plight of the chronic pain patient.' The complexity of chronic pain was acknowledged and appropriately trained physiotherapists were considered to be the key professionals equipped to deal with chronic pain. As a result of the debate The Cross Party for Chronic Pain will continue to press for improvements in pain services. PPA North has also embarked on a project to develop a 'practical pain management module' at Masters degree level. Hopefully this will begin taking students this year.

The PPA has quickly become a significant and respected special interest group. There is no doubt that the material contained in the Topical Issues in Pain volumes is a major reason for this. This volume, in particular, adds to the debate and controversies surrounding the problems that arise from pain. All clinicians should be obliged to understand and appreciate the nature and impact of the placebo, the importance of pain management in the context of both acute and chronic pain states, as well as some of the more controversial aspects and findings relating to muscle and musculoskeletal pain syndromes. This volume has them all—read on!

It is with great pride that I write this Foreword and would like to thank the Editor and all the authors for enabling the physiotherapy profession to embrace, and lead the field in, the many changes in practice that arise from the challenge of pain.

Liz Macleod
PPA North Chairperson
July 2002

Preface

I am so pleased with this book because it contains some of the most important pieces of the pain jigsaw—the placebo-nocebo puzzle; issues of function, communication, and change in managing pain; and a much needed and challenging sideways glance at some of the issues involved in relation to ‘muscle’ and ‘musculoskeletal’ pain states. I am sure that all who read this book will change how they think and will be impressed by the unique way the information is presented. There are a great many pages where I found myself saying, ‘That’s amazing, that’s so interesting!’

The more I think about the difficulties and misunderstandings of those treating and managing pain, the more I think that *the* starting point for understanding pain should be with the placebo-nocebo phenomenon. In particular, the unique perspectives, interpretations and synthesis of the placebo-nocebo phenomenon and literature presented in Part 1 are those that are required for this understanding. I believe that if you can grasp this phenomenon in a broad and open-minded way, you grasp just about all the fundamental issues that cause so much trouble for such huge numbers of patients with pain. Understand placebo-nocebo and you immediately step into a more comfortable relationship with pain and the people it contains, restricts, and disables. Understanding the placebo and nocebo properly *must* change the way you think and work with your patients.

The authors of this section of the book are widely dispersed, and the information they provide is cutting edge! Huge thanks to Pat Roche over in Queensland, Nigel Lawes based in London, Mitch Noon down here in Cornwall, Richard Shortall in New Mexico, and Caroline Hafner in Wales.

To further set the scene I would like to make a few specific comments about two individual chapters and then the remaining two sections.

- At the back of any book like this there are usually one or two lonely chapters. While Ann Papageorgiou’s chapter is ‘at the back’ it should not

be considered as lonely or demoted! It demystifies epidemiology. It reviews the South Manchester Back Pain studies involving large numbers of patients and tries to seek answers to important questions relating to the occurrence and risk of back pain and chronicity. The study also asks similar questions about chronic widespread pains and the results are discussed here. The findings presented so clearly in this unique chapter add yet more weight to the validity and necessity of working within the framework of the biopsychosocial model.

- Good single patient case studies are useful sources of clinical information. Chapter 12, by Lorraine Moores, presents a single case study involving a fibromyalgia sufferer. This chapter is included for two reasons. The first is that it provides a useful clinical overview of how a difficult clinical problem can be managed, and of how fibromyalgia is complex and multifactorial. It has great clinical value. The second reason is that it stems from a highly praised MSc dissertation and provides a great model for the detail of research and the writing style required. Those readers embarking on an undergraduate or MSc research project should find this a very helpful chapter.

The two remaining chapters in the ‘Muscles and Pain’ section are by two world experts in pain-related research and the communication of their research to clinicians—Dr Paul Watson, who has the well earned honour of being the first Consultant Physiotherapist to be appointed; and Dr Trish Dolan, a well known researcher into the underlying causes of low back pain and impairment. Both chapters have considerable clinical impact and provide much food for thought.

Part II adds three more pieces of work to the ‘pain management’ chapters and sections of the Topical Issues in Pain series. Pain management is still a huge and challenging area that requires fundamental skills. We need to be careful, because there are a great many clinicians who profess to be skilled in this area when in reality they are far from it. I also believe that there are a great many clinicians, teachers, and bureaucrats in our profession who haven’t a clue about what pain management is, what cognitive-behavioural therapy involves, or the broader implications of what the biopsychosocial model means for us all. I make no apologies for writing bluntly; challenge and change are uncomfortable, but a growing body of recent research is devaluing the basic tenets of our traditional treatment models and methods and so is forcing us to look elsewhere and to think from different perspectives. Chapters and work such as the three presented in Part II should help not only those who are new to the concepts promoted here but also those already working in the area. A big thank you to Heather Muncey and Babs Harper.

I have included Pat Wall’s Introduction to the 4th edition of *Textbook of Pain* as the Introductory Essay to this Volume. It’s brilliant, it’s relevant to all the sections here, and I think you will all enjoy it! Much of Pat’s life was devoted to grappling with the blinkered thinking on pain by his medical

colleagues. Even though he was so respected and so eloquent with his messages, I know he struggled.

In a humble way it would be so good if this small book could take hold and spread its messages far and wide. This and previous volumes in the series are testament to the forward thinking clinicians who have listened to their patients, pondered the literature with them in mind and become involved in research so as to come up with something better.

I would like to thank and congratulate not only the authors of the work here, but also the team of key players who devote their time and patience to the continued success of the Physiotherapy Pain Association and all its work.

Louis Gifford

July 2002

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