

Easing Pain in MS

for your loved ones and yourself

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First, Thank You.

Thank you for your work as a caregiver. And yes, it is work – rewarding, and doubtless at times. But always it is essential, important work. Thank you for doing good every day.

We at the VA's MS Centers of Excellence are honored to be of service to you and yours.

Pain in MS

It's hard to see anyone close to you in pain. Sometimes it's not clear why they are in pain. And it's frustrating if it seems you can't help them. Yet there are ways to help.

Today we'll discuss the types of pain in MS, and ways to help ease that pain.

Pain in MS

- Up to two-thirds of people with MS have pain.

Neuropathic pain most common.

- Burning, tingling, hot, stabbing, electrical, searing.
- “Weird” sensations.

Causes of Pain in MS

Spasticity – painful muscle contraction

Worse in a.m., with heat or cold, fatigue.

Trigeminal Neuralgia more common in MS

Musculoskeletal

Low back pain, joint pain

Headache - Migraine or tension

Reducing Pain

- Pain may be reduced but not eliminated.
- Approach from different directions:
 - Meds.
 - Lifestyle.
 - Coping skills.
 - Therapies.

How & When Does Pain Happen?

- “Pain Diary”
 - Track if pain is worse in morning, evening?
 - Any related events? Stress, work, family, illness?
 - Level of pain? 1-10 scale or Low-Med-High?

“With Less Pain...”

- Focus on the goals:
 - *“He wants to walk to the mailbox and back with pain less than 3/10.”*
 - *“He could fix breakfast for himself.”*
 - *“...take grandkids fishing”*
 - *“...sleep more comfortably”*

Pain-Management Planning

- Talk with your MS Provider about the pain.
- Discuss pain diary info – this helps tailor an individual pain-management plan.
- Individual goals will help measure how well the plan works, and if/when it needs adjustment.

Meds to help MS pain

- Antidepressants
- Anti-seizure meds (calm down zappy neurons):
 - gabapentin
 - pregabalin
 - carbamazepine
 - oxcarbazepine
 - topiramate

Trigeminal Neuralgia

- Carbamazepine
- Oxcarbazepine
- Lamotrigine
- Baclofen
- NeuroSurgical procedure. Often needs to be repeated after few years.

Opioids

- No clear improvement in function.
- Modest pain relief.
- Side effects: constipation, immune suppression, insomnia, memory impairment, hyperalgesia, overdose.
- Short-term use recommended.

Migraine

- Headache diary
- “Triptans”
- OTC ibuprofen, naproxen, meclizine.

Preventive:

- Topiramate
- Petasites (Butterbur) 50 - 75 mg 2 x day.
- Riboflavin (Vit B2) 200 – 400 mg/day.

What Else can Ease Pain?

- Exercise – not too much, not too little.
- Massage, myofascial release, stretching.
- Yoga.
- Acupuncture.

Easing Chronic Pain

- Mindfulness, meditation, relaxation practice.
- Counseling.
- “You are *more* than your pain.”
- Keep involved with family, friends.
- Humor
- Pets are great companions too.

Easing Chronic Pain

- Plan for fun and relaxing activities – or try something new!
- Re-focus on life happening now.
- Acknowledge and accept what can't change.
- Don't let the bad stuff steal your enjoyment of what's going right.

Tips for Living with MS Pain

- ✓ You are more than your pain.
- ✓ Meds are just 1 part of the plan.
- ✓ Talk with your health team:
 - what's helping and what needs review.
- ✓ Focus on function.
 - set specific goals.

Tips for Living with MS Pain

- ✓ Exercise: just moving around.
 - enough to challenge, not to exhaustion.
- ✓ Relaxation and real coping skills do help.
 - it takes practice.
 - it will get easier.
- ✓ Keep involved.
 - with family, friends, and activities.

Thank you.
Questions, Comments?

