Effective Psychological Strategies for Living with Chronic Pain
Ellen Snoxell, Ph.D., ABPP (Rp)
Gillette Lifetime Specialty Healthcare

Pain and Suffering
- Medical Model
- Individual Differences (Psychological) Model

Psychological Contributions to the Literature
Assessment

• Function vs. symptom
• Screen for other co-morbid conditions (anxiety, depression)
• P3 (Pain Patient Profile through Pearson)

Interventions for Suffering

• Behavioral/Cognitive approaches
• Psychotherapeutic and related techniques (biofeedback, self-hypnosis, guided imagery, meditation, progressive muscle relaxation, yoga, etc.)

Two Evidence-Based Approaches

• Cognitive Behavior Therapy-based approaches
• Acceptance and Commitment Therapy-based approaches
Cognitive Behavior Therapy (CBT)

Speaker Example

Maladaptive Pain Example
Adaptive Pain Example

Catastrophizing (Awfulizing)
Acceptance and Commitment Therapy (ACT)
• Similar to CBT but more oriented toward goals, process (instead of thought content) and experiential elements

ACT Elements
• Mindfulness
• Fusion
• Goal setting
• Exposure vs. Avoidance
• Acceptance

The Key to Carry-over
• Family/Support Network
So, why less emotional overlay to pain?

• From early age, individuals with CP expect a degree of physical discomfort and equate it as necessary to reach desired goal (Touch it/push it example from Laura)

• Early exposure to health care professionals might reinforce notion of “safe pain” for patients and parents

• Avoiding pain avoidance!