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Strategies for Chronic Pain Inspired by Contemporary Science

Nancy Hausauer

Chronic pain is at epidemic proportions. A 2011 Institute of Medicine report, *Relieving Pain in America*, estimates that chronic pain affects a mind-boggling 116 million — nearly 47% of American adults.¹ With those numbers, it is probably not just a statistic to you. It is likely you or someone you love suffers from chronic pain.

When we live with pain it is part of our internal landscape. We feel intimately familiar with it. But is it what we think it is?

Science has made huge strides in understanding this wild, mysterious and sometimes stubborn beast we call pain. Unfortunately, these new insights have not always filtered down into general public awareness, or sometimes even into general medical practices.

Let us have a look at what those new scientific views are and how they can be applied in our energy healing work with clients, family and friends.

Chronic Pain: The Old Scientific View

From the 1600s until a couple of decades ago, pain was thought to be a relatively straightforward physical phenomenon caused by tissue injury, with pain happening in the tissue and intensity proportional to the amount of damage. In that view, the peripheral nerves generated and sent a pain signal to the brain.²

The old theory of pain holds up pretty well for acute pain. You hit your thumb with a hammer and the tissue is smashed — it hurts. The pain goes away when the tissue heals. With acute pain, the sensations seem to correlate with the damage.

But this model breaks down with chronic pain, defined (in contrast to acute pain) by the International Association for the Study of Pain as “pain without apparent biological value that has persisted beyond the normal tissue healing time (usually taken to be 3 months).”³ It exists without an obvious cause in the tissue, demonstrating that pain is not just a straightforward damage-equals-pain equation.

Chronic Pain: The Current Scientific View

In the last few decades, pain scientists have been busy unraveling mysteries and updating old theories. The bottom line: it is complicated.

Contemporary science resoundingly sees pain as a phenomenon of the brain, rather than of the peripheral tissues. If you cut your finger, the nerves in your finger do not send pain signals to your brain. They send information. The brain decides whether to interpret this input as pain, based on its assessment of the level of actual or threatened damage. That assessment may or may not be proportional to the damage — or even correct at all.⁴



For example, a fascinating 2004 study showed that the brain activity of people hypnotized to believe they were experiencing pain was similar to that of people actually having a pain experience.⁵ This is not to suggest that pain that is disproportionate to tissue damage is not real. Pain is pain, and no matter what is happening in the tissues, it is real, as anyone who suffers from chronic pain can tell you. But again — it is complicated.

Scientists now consider pain to be much more than a mere physical event, corroborating most people's lived experiences. Partially processed in the brain's

with pain,⁸ but are there ways we could improve? Let us look at some of the insights and applications we can derive from contemporary science.

Take a Holistic Approach

Current science is clear that chronic pain is complex and multi-faceted with causes and effects that go beyond the physical body. It can be intertwined with depression, anxiety, sleeplessness, exhaustion and "brain fog." It often brings on financial or job stress and grief.

A major take-away from this is that there is not likely

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limbic system, which mediates the brain's emotional responses, pain is powerfully integrated with our emotions. This is a two-way dynamic, in which the experience of pain both affects our emotions and is affected by them.⁶ Chronic pain continues to be puzzling, but current science now views it as a dysfunction of the central nervous system. It is thought that the pain-processing system becomes over-sensitized and begins to assess tissue threat and damage, and therefore to create experiences of pain, even though there is actually little or no danger present.⁷ Like a malfunctioning car alarm, it has become hypersensitive to even minimally noxious stimuli. Eminent pain researcher Lorimer Moseley has called this "the dark side of neuroplasticity."⁴

Applying Insights from Pain Science to Our Practices

Given that many of these and other new theories and insights are not yet well integrated into public understanding or sometimes even into general medical application, it is no wonder that individuals who suffer from fibromyalgia, migraine, arthritis, neuralgia, long-term musculoskeletal issues, autoimmune disease and other chronic pain pathologies often turn to complementary medicine, including energy healing. Energy healing has a decent track record in dealing

to be a single, straight-ahead "cure." You should definitely use your most effective local techniques for pain, but do not stop there. Treat the whole person — the whole energy system. Be creative, be holistic, approach from multiple angles and remember that your therapeutic impact is always more than the sum of your techniques.

Calm the Nervous System

Since chronic pain is thought to be a disease characterized by an over-sensitized nervous system, it makes sense that giving clients a breather from this relentless, exhausting backdrop of physiological stress should be a top priority. Fortunately, energy healing excels at calming the nervous system. Use your best soothing and calming techniques. Also consider:

- The experience of pain is lessened when we feel safe,⁹ so aim to amplify your client's sense of security.
 - Present a reassuring persona and environment. Do a quick check of yourself and your treatment space, keeping in mind what makes you feel comfortable and secure.
 - Try working with the first chakra, the energy center at the base of the spine that is associ-



ated with our sense of safety and security.

- Ground your client during the session and also teach grounding for self-care.
- Consider incorporating belly breathing into your treatment. Breath, a bridge between physical and subtle energy, is a powerful tool for relaxing the nervous system.
 - Introduce it when your client is on the table, or after as a self-care practice. I usually suggest five minutes twice a day, plus whenever feeling particularly stressed. My instructions are included on page 57.
- Work with the third chakra (between the navel and bottom of the sternum), associated with how we manage stress.
- Working with the feet can also be a good way to quiet the nervous system. The Kidney 1 acupressure point (on the sole of the foot in the depression that forms when the toes are curled) is particularly calming and grounding for many people.

Incorporate Gentle Touch

Touch, another good way to calm the nervous system, can also temporarily reduce pain.¹⁰ That is why we instinctively rub a bumped noggin. This may be because of a phenomenon called “The Gate Theory of Pain,”¹¹ which posits that the central nervous system limits the amount of information sent to the brain. Sensations from gentle touch (as well as other things) can temporarily “close the gate” to sensations of pain.

- If it is within your scope of practice and your client is okay with it, include touch-based techniques in your session. Nothing fancy is needed. A 2008 *Annals of Internal Medicine* paper reported that both professional massage and simple touch decreased pain.¹²

Work with the Emotional Aspects of Pain

Since pain is so intertwined with emotion — worsened by fear and stress and often relieved by positive feelings — another good holistic strategy is to balance your client’s emotional state. You probably already have your own preferred tools and methods for this. Here are some additional ideas:

- Engage your client’s intellect. Employing “higher cognition” seems to help balance the exacerbating emotional components of pain.
 - Try body-mind techniques that bring in observation and mindfulness. For example, invite your client to bring awareness to the area that hurts. Ask them to describe obvious characteristics such as pain intensity, location, frequency and duration. Also encourage them to describe more imaginative characteristics like size, shape, color and sound. Often during this process clients realize that the pain, which felt all encompassing, is more localized and less threatening than it seemed.
- Work with the second chakra (between pubic bone and navel) to help modulate emotions and the sixth chakra (at the forehead) to foster perspective.
- Try this Energy Medicine technique. Place your fingertips on your client’s temples and your thumbs on their “forehead bumps,” the slight bulges that most people have on either side of their foreheads about two thirds of the way up. (Hand placement is reversed if you are teaching it for home-care.) Hold for minute or so. Encourage belly breathing as it is being done.

Nurture Optimism

The other side of the pain-emotion connection is that positive emotions such as hope and confidence have a beneficial effect.¹³ Studies have shown that a chronic pain sufferer’s expectations about their prognosis is the main determinant of outcome.¹⁴

What are some ways we can foster realistic optimism?

- Explore your client’s current expectations. With-in informed, realistic bounds (Do your homework!), discourage catastrophic thinking and whenever possible, within your scope of practice, encourage confidence about the possibility of improvement on some level.
 - Acquaint clients with research that shows the power of expectation on the outcome of pain and encourage them not to let their



x-rays define their destiny.¹⁵ It is not that simple, and in that potential lays hope.

- Keep session notes and draw attention to any positive changes over time.
- Make sure that your speech supports healing and avoids even subtly negative terms. Energy healing recipients often go into deep relaxation, a highly impressionable state in which our words can have an outsized impact. Affirm your client's endless ability to balance and heal and avoid even commonly used but negative terms about energy such as "stagnant" or "congested."
- Work with the fourth (heart) chakra to support optimism and help clients "take heart."

Promote Empowerment

Chronic pain can make people feel powerless and out of control,¹⁶ which can trigger depression and anxiety. Depression and anxiety, in turn, can worsen pain.⁷ Our approach should be to increase a sense of empowerment and agency. Some ideas:


- Many chronic pain sufferers have had their experiences discounted and invalidated. Neutralize this by listening deeply and showing unconditional regard and respect.
- Engage people in their own treatment and teach energy healing self-care techniques as forms of empowerment. (You may also want to share this excellent Institute for Chronic Pain page with motivated clients: www.instituteforchronicpain.org/resources/educational-links).
- Work with the third chakra, associated with personal efficacy and power as well as with how we manage stress.
- Help clients re-establish control over how they interpret their situations. Energy healing itself is a powerful reframing of conventional concepts of illness and healing. You can also:
 - Introduce the idea that pain may be providing information about something beyond the physical body, with clients who are open to it. For example, offering insights about disharmony or a need for re-balancing in some area of their lives.

- Try working with the sixth chakra to promote insight, clarity and mental flexibility, or the seventh chakra to encourage a sense of higher meaning about the situation. Meaning and context are powerful modulators of the pain experience.¹⁷
- If a client seems to have issues with depression or anxiety, refer them to a mental health professional.

A Few Final Words

A final suggestion is that, given how complex and stubborn chronic pain can be, it is particularly important to be realistic about results and to observe the often-given advice to remain non-attached to specific outcomes. For example, look for signs of improvement rather than complete cessation. If someone's regularly at an 8/10 level of pain and they decrease to 3/10, that is a huge improvement in quality of life.

Watch for change or growth on all levels, not just the physical. If you have helped someone learn to reframe their way of looking at a hardship, manage their own stress, shift their internal emotional landscape or increase their sense of empowerment, you have given them an invaluable life skill.

Lastly, science can point us in useful directions and suggest particular areas of emphasis, but in the end we must show up with open hearts and open minds, following the energy where it leads. 



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HOW TO BELLY BREATHE

Nancy Hauser

The exercise below will show you how to breathe optimally. “Belly breathing” like this will help you relax, communicating directly with your central nervous system to turn off the stress response. The exercise goes on to show you how to supercharge the relaxation response — which will help you manage and reduce pain.

1. Sit or lie down comfortably. Inhale in through your nose and out through your mouth for a while. Consciously slow your breath down a bit.
2. Inhale deeply (but comfortably) — all the way into the lower third of your lungs. Your belly should expand when you inhale and return to normal when you exhale. This is diaphragmatic breathing. (This should be a gentle, slow, natural movement. Do not try to fill your lungs until they practically pop!)
 - Place your hands flat on your belly, watching them rise and fall, to make sure that your abdomen expands as you inhale and contracts as you exhale.
 - Breathe like this for a while, until it feels comfortable and natural. Consciously see if you can slow it down a little more.
3. At this point, if your breathing is not already smooth and even, consciously even it out to a

nice, smooth rhythm. Smoothing it out relaxes you and helps you feel grounded.

- You can count to help you keep the rhythm even. (Unless it makes you tense to count — in that case, just estimate.)
4. After you have got the rhythm nice and even, slow down the exhale in comparison to the inhale, to super-charge the relaxation response.
 - Inhale for a certain number of counts, say six (or whatever is comfortable for you), then exhale for approximately twice as many counts. Do this for a minute or so. (As before, if it makes you tense up to count, then just estimate.)
 - By now you should be starting to feel more relaxed. Continue like this for as long as you wish.
 5. If at any time you start to feel dizzy or faint, you can either return to your normal breathing for a while, slow down your exhale or lengthen the natural pause between your inhale and your exhale.

Watch out for “paradoxical” breathing the first few times you do this exercise. When first trying to belly breathe, some people suck their bellies in when they inhale and stick their bellies out when they exhale. That is exactly opposite of how it should be.