



NOTES

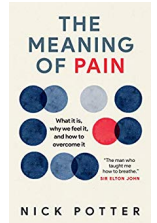
The Meaning Of Pain

WHAT IT IS, WHY WE FEEL IT, AND HOW TO OVERCOME IT

NICK POTTER

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225 PAGES



KEY POINTS

Your Pain Is Real,
Very Real

Pain: What is it?
It's Complex

Bio Psycho Social!

Pain as Habit:
Unlearn Your Pain

Breathing:
Is Yours Inverse?

Stress Can Make
You Hurt!

“But what if everything you thought you knew about pain and where it came from turned out to be wrong or only half the truth? What if I told you that your experience of pain in the present moment might in fact be connected with the very origins of Homo sapiens—that it might have evolved as a warning of imminent danger?”

Don't worry... I'm not about to suggest that your ankle fracture is all in the mind. It hurts, of course it does. No one is doubting that. But we now know there is a great deal more to the experience of the pain you have that just the broken bone, damaged disc or grazed skin. What I'm talking about is the new – but now well-evidenced—bio-psycho-social model of pain science. In these pages, I will endeavour to explain as clearly as possible this complex concept, to help you reframe how you experience pain and spur you into action to seek new ways of approaching and curing, or at least relieving, it.”

Nick Potter from ‘The Meaning Of Pain’

I'd love to hang out with Nick Potter. He is an osteopath with 27 years of clinical practice. He has travelled the world studying both medical and non-medical approaches to health. While working at the London Spine Clinic he became known as ‘Nick the Neck’ and impressively reduced neck surgery by 80 per cent. If you have suffered from persistent pain you need to read this book. As per the sub title Nick teaches us what pain is, why we feel it and most interestingly how to overcome it. Pain is a complex phenomenon and opening your mind to a different way of viewing your pain could be exactly what you need to get yourself out of it.

“What I am about to explain is going to require some processing and mental leaps, but if I do my job right, it will change your whole mindset towards your pain, forever. Knowledge and insight have the power to transform, and in my clinical experience I have found that insight can often be more helpful to people than advice. As the palliative care and addiction expert Dr Gabor Mate says: ‘If we gain the ability to look into ourselves with honesty, compassion and with unclouded vision we can identify the ways in which we need to take care of ourselves.’”

I help people who are in pain every day and many of them are frustrated by the fact that they are still in pain. After all the things they have tried they don't seem to get any better. It can be really hard to change your mind about what is causing your pain when you have been taught or think that pain is all about tissue damage. The science says that pain is much more complex than that. So let's open our eyes and minds and jump into a new

life leaving our pain behind.

Your Pain Is Real

“Before I go any further, let’s be very clear. Your pain is real; it hurts; and the symptoms associated with it, such as fatigue and anxiety, are also real. We clinicians have to remember that a patient is always in exactly as much pain as they say they are, and that pain does not have to come from a tangible source to be a valid problem.

How else could we explain Couvade syndrome, a condition in which men have been known to physically experience some of their expectant partners’ symptoms, including labour pains? Pain can be a shared phenomenon (more on this later).”

Yes your pain is real, very real but that pain does not have to come from an injury or tissue damage to be a real problem. Most of us believe that we feel pain when our tissue has been damaged and while that is partially true it’s not the whole story. We don’t have pain receptors in our body. We have ‘nociceptors’ and they are not responding to pain stimulation they are looking for danger. Have you ever cut your hand while wearing a glove, not noticed because you couldn’t see the cut, only to remove the glove later and feel the throbs of pain when your eyes saw the blood and the cut and your brain then interpreted the signal of nociception as dangerous. It’s not all about tissue damage! Pain can become worse in specific environments, around certain people and because of inflammation in the system that can not be seen on a scan but is still causing your body to signal ‘danger’!

In his great book Back in Control spine surgeon Dr. David Hanscom states

“Mainstream medicine doesn’t have the correct diagnosis for chronic pain; that’s why medical training doesn’t teach physicians effective treatments. Instead, the profession is focused on finding a structural reason for every symptom, while it’s 99 percent more likely that your physical symptoms are arising from physiological responses to the environment. This concept has actually been known for many centuries, dating back to Hippocrates. But the technology explosion combined with the business of medicine has railroaded this approach.”

Your pain is real: YES. But there is not always a structural cause for your pain. If there is no structural cause we must embark on a different journey.

Pain: What is it?

“The International Association for the Study of Pain defines it as:

An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage

...which, although rather convoluted, is at least a fairly accurate definition and reflects much more of our current understanding, because it highlights some of the curious aspects of pain that we will be covering: that it is both a sensory and an emotional experience and that it can be caused by both actual and potential tissue damage. Or, wait for it, even no damage at all. Confused? You won't be, I promise."

Did you get that? Let's take another look. Pain is an unpleasant sensory and emotional experience. Our pain is influenced not only by the unpleasant sensory experience but also by emotional experiences. Emotional pain can be expressed physically.

In the book Nick explains that on his way home from work recently he found himself stuck in traffic and looking out his window to see two captains picking teams. It reminded him of when he was little and would always be picked last. He was so struck by his emotion that he got out of the car, went over to the teacher and explained how this method affected those picked last. The teacher was receptive and as he walked back to his car he felt his back start to ache. An injury that was normally dormant was brought back to life by what he was feeling. He then says....

"And it dawned on me then that I was experiencing what so many people world-wide suffer from every day—the raw physical manifestation of emotional pain. My mind had found the weak spot in my body, the place where the injury had previously existed, to give me a little reminder of past feelings that I had parked. The memory of playground dread had allowed the physical pain memory to pop up its head; and, as physical pain is easier to salve, it is often substituted for the emotional one"

So the way Nick felt by being reminded of a childhood memory of 'always being picked last' resulted in him feeling the pain of an injury suffered years ago. He had sparked a 'neuro-signature'!

Bio-Psycho-Social

"So what is the Bio-Psycho-Social Model? It is a medical approach that sees pain as an experience that results from the deep interrelation of three domains: Biology, psychology and sociology. That's it! A simple sentence encapsulating a massive idea. Biology (genetics, biochemistry), psychology (mood, personality, behaviour) and sociology (culture, family, socio-economics) are the three realms or domains that influence our physical and mental health. When the balance is lost between these three interlinking planes, pain and suffering occur."

Pain is Bio-Psycho-Social! Let's dig into that a little deeper. Pain is a response to biological factors such as the biochemistry of having too much cortisol (stress hormone) in your system! Psychological factors, such as your current mood, and the behaviours you engage in. And sociological factors, such as the culture you were raised in, your family dynamics and

how much money you earn. It's a complex multifaceted response to your environment. If you are in pain I highly suggest you get the book to find out more.

Pain As Habit

"At most, a memory of the injury or the action which led to it will be stored or logged for future quick response. It will be tagged. So, too, the key departments necessary to deal with it will be remembered for quick mobilisation. The whole event will leave a response 'signature' that is unique to each event. In pain science we call this a 'neuro-signature'."

What we understand now is that pain gets linked to other experiences or memories that seem important to the brain regarding the experience. The context of the whole pain experience, fear associated with the pain, the trauma of the pain, the people who helped or didn't help during the event etc. In time we can amplify the signal of pain. Our brain and nervous system practice sending the danger signal and as a result we feel more pain. Our body is letting us know we are in danger but we cannot work out what is causing the danger so we don't understand how to turn it down. The total experience of the pain will create a 'neuro-signature' and our system will develop a central sensitisation'.

"Central sensitisation is defined as an 'amplification of neural signalling in the central nervous system that elicits pain hypersensitivity', and is the process by which the brain becomes involved in prolonged stimulation from inflammation in the tissues in the periphery. Basically, it turns up the volume and intensity on everything"

Our body wants to eliminate the danger so nerves fire at the smallest sensation. Also other signals coming from surrounding tissues may be seen as dangerous when in fact they are not. Welcome to 'central sensitisation'.

David Hanscom describes it like this

"When the brain is hammered with unpleasant emotional or physical impulses day after day, week after week, it becomes more and more efficient at processing them. Subsequently, it takes less of an impulse to elicit the same response in the brain. It's this process; called sensitisation that causes patients to complain that their pain is getting much worse in spite of the lack of additional trauma."

When we are in pain the brain gets better at sending pain signals, which makes sense. We all know if we want to get better at something then we must practice. But getting better at sending a pain signal with less of an stimulus input is not exactly great.

Beth Darnall is an Associate Professor at Stanford University. She has conducted some very interesting research regarding chronic pain. She says

that it is really important not to catastrophise pain and it's vital to not develop a negative pain mindset. Someone with a negative pain mindset might feel helpless about their pain, expect it to get worse and may ruminate on their pain. These very acts are practicing neural pathways that we don't want to reinforce. Therefore we should aim to develop a healthy attitude towards our pain. We need to remember that it is there to help us and that we have the power to overcome it. We also need to understand that we can learn what is contributing to the pain and then focus on what we can do to reduce it.

Breathing: Is Yours Inverse?

“Healthy breathing is slow and deep, flowing rhythmically through the nose, belly and chest. This is how we are designed to breathe throughout our lives. When this pattern is lost, which can happen for a variety of reasons, both physical and emotional, things can start to go wrong.”

How are you breathing, long and slow? Is your mouth shut or are you breathing rapidly through your gaping mouth? Close your mouth, relax your belly and breathe. But before you do that try this...

Place one hand on your belly and one on your chest, shut your mouth and take a big sniff in through your nose. What happens? Did your hand on your chest stay still as you breathed deeply into your stomach or did your shoulders rise and your chest puff up? For most of you it was probably the latter. Which means you have an inverse breathing pattern. You are going to want to change that. Get the book to see the exercises that Nick suggests but start improving your breathing right now by closing your mouth and using your diaphragm to breathe down into your belly.

“This poor pattern of breathing also leads to significant changes in the posture of the head and neck, as well as increased ‘sway’ in the low back—the pelvis tilts and the back is overextended, resulting in misalignment of the entire body.”

Need any more motivation to pay more attention to your breathing?

“At least 30 percent of any neck problem is breathing-related.”

Stress Can Make You Hurt

“Any one of us can succumb to illness and pain at any time. We then have a choice: we can take a passive role, allowing the doctor to take authority, or we can decide to be actively and knowledgeably involved in our care—which implies taking a more holistic approach: i.e. why have I developed this pain? How is it going to affect my life? How do I feel about it? It is enormously empowering to realise that one is not a passenger but a co-driver on the route to health. And to do this we need to get to grips

with the link between psychology, emotion and physiology because understanding this gives us a vital tool for the process of our recovery”

Are you taking an active or a passive role in your recovery? Are you doing all you can to heal yourself or do you expect the doctors to fix you? May I suggest you take an active role? And do you understand the links between psychology, emotion and physiology? If not, get the book.

“The most pertinent element of the cortisol response for our purposes, as we think about chronic pain is its effect on inflammation.”

“Obesity is another cause of stress on our systems that results in inflammation”

Stress and Obesity increase the levels of inflammation in our systems and inflammation can make us hurt. If your system is inflamed do whatever you can to reduce your inflammation. Breathing, diet and movement can all help with that. Relax your system. If you find it hard to relax take the time to learn. It will change your life.

About the Author of ‘The Meaning Of Pain’

Nick Potter

Nick Potter is a registered osteopath. He works in the worlds of clinical practice and performance medicine. He works with Formula 1 teams, elite golf, tennis and track athletes. He is the man who taught sir Elton John to breathe and someone you want to find out more about if you suffer from persistent pain. You can find out more about Nick at www.backscience.co.uk

About the Author of this Move Note

Hazel Boot

Hazel has a degree in Exercise and Sports Science. She is also an Anatomy Trains Structural Integrator and a Restorative Exercise Specialist. She works with clients to improve movement and reduce pain. She loves reading and geeking out on movement books. She writes notes on the books she loves to help others learn faster.

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I hope you enjoyed the content of this note but please remember that it is not medical advice and should not be used as such.