Acute vs. chronic pain **Emotional aspect of pain** More problematic than physical aspect Anxiety, fear, catastrophizing

ACE (Adverse Childhood Experiences) Study and link to pain

Chronic pain onset: Physical

& emotional

Pain vs. suffering Impact of pain

Prevalence

Societal costs

Chronic pain cycle **Psychological** 

Physical

Factors that impact pain Physical, thought, emotions,

behaviors

Social interactions Suicidality and chronic pain

#### **Opioids**

Scope of the problem The "painkiller" myth Not effective pain relief Medication assisted treatment Methadone

> Buprenorphine (Suboxone) Naltrexone injection (Vivitrol)

Risks

Men, women, elderly

#### **Assessment**

Impact of pain

Pain experience factors **Psychological** Behavioral Social Physical 5 E's of pain interview Self-report measures



**Questions?** Call customer service at 800-844-8260

#### **Treatment**

Treatment options Medication Invasive Non-invasive

CDC guidelines Behavioral treatment first Importance of therapeutic

relationship

Mindfulness

Powerful evidence-based interventions

Motivational interviewing

Proven techniques to move toward behavior change

Goal-setting

**SMART** goals

Matching goals with client values

Automatic negative thoughts Thought distortions

**ABC** worksheet

Decatastrophizing

Additional behavioral treatment tools

**Breathing Imagery** 

Pleasant activities

Progressive muscle relaxation Anger management

Time-based pacing

Stress management

Sleep hygiene

Research limitations and risks of psychotherapeutic approaches

- 1. Describe how the emotional aspect of client's pain can be more problematic than the physical aspect.
- 2. Specify the differences in risks of opioid medications use in men, women and the elderly and the related treatment implications
- 3. Assess the psychological, physical, social, and behavioral factors that contribute to chronic pain and articulate their treatment implications.
- 4. Implement motivational interviewing techniques to motivate clients towards behavior change that reduce the symptoms of chronic pain.
- 5. Summarize the CDC recommendations for the treatment of chronic pain and communicate how that impacts clinical
- 6. Utilize mindfulness-based strategies to decrease symptoms of chronic pain in clients.

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#### Target Audience:

Social Workers • Psychologists • Counselors • Addiction Counselors • Occupational Therapists • Psychotherapists Marriage and Family Therapists • Case Managers • Physical Therapists • Physical Therapist Assistants • Nurses Nurse Practitioners • Other Helping Professionals



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# BEHAVIORAL TREATMENT CHRONIC PAIN

Evidence-Based Techniques to Move People from Hurt to Hope

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BEHAVIORAL

**TREATMENT** 

CHRONIC PAIN

Evidence-Based Techniques to Move

People from Hurt to Hope

• Exposed! The biggest myth about

Master 4 pain-changing CBT tools

and practical evidence-based

approaches to treat chronic pain

• Transform your practice with creative

pain treatment





e are in the midst of a nationwide push to treat chronic pain and address our out of control opioid prescribing. At least 1/3 of the people we treat are dealing with this condition, yet most of us are ill-prepared to address this with skill and expertise. The CDC recently published recommendations for the treatment of chronic pain, specifically highlighting behavioral treatment as an approach that should be tried before opioids are prescribed.

# BEHAVIORAL TREATMENT CHRONIC PAIN

Evidence-Based Techniques to Move People from Hurt to Hope

We are witnessing a devastating public health crisis that is ruining individual's lives, tearing up families, and ripping through communities. We need to arm ourselves with the skills needed to offer our clients evidence-based behavioral interventions that will help them live healthy and

Come to this interactive and cutting-edge training and learn creative tools and techniques to transform your practice. Learn powerful mindfulness interventions and motivational interviewing techniques to move your clients towards behavior change. Master the four pain-changing CBT tools. You will leave with the skills and confidence to provide practical and life-changing help to help people move out of chronic pain and into active, healthy, and meaningful lives.

Robert Rosenbaum, Ph.D., has 30 years' experience as a neuropsychologist, psychotherapist and behavioral medicine specialist. In addition to his numerous journal articles and book chapters on brief psychotherapy, he is also the author of the books Zen and the Heart of Psychotherapy; Walking the Way: 81 Zen Encounters with the Tao Te Ching and co-editor of What's Wrong with Mindfulness (and what isn't). He is entrusted as a Zen teacher by Sojun Roshi of Berkeley and San Francisco Zen Centers and as a senior teacher of Dayan (Wild Goose) Qigong by Master Hui Liu of the Wen Wu School.

Dr. Rosenbaum worked for over 26 years at Kaiser Permanente clinics in California, where at various times he was chief psychologist, head of the neuropsychological assessment program, developed the mindfulness-based behavioral portion of the chronic pain management program in Kaiser Oakland and started the first programs of Dayan Qigong (which subsequently spread to medical clinics throughout California). He also did research on brief psychotherapy, single-session therapy and psychotherapy integration.

In addition, he has been a Fulbright Professor at the National Institute of Mental Health and Neurosciences in India, the director of the doctoral training program at the California Institute of Integral Studies, and a consultant on brief psychotherapy to clinics and academic institutions in Australia, Japan, and Canada. Whenever he can, he spends several months a year hiking in the Sierras and the Himalayas.

Financial: Robert Rosenbaum receives a speaking honorarium from PESI, Inc.

Non-financial: Robert Rosenbaum has no relevant non-financial relationship to disclose.

#### Live Seminar Schedule

7:30 Registration/Morning Coffee & Tea 8:00 Program begins

**11:50-1:00** Lunch (on your own)

4:00 Program ends

Speaker Disclosures:

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#### Treating Chronic Pain

Pill-Free Approaches to Move People From Hurt To Hope

#### By Martha Teater, MA, LMFT, LCAS, LPC, and Don Teater, MD, MPH

The best treatment for chronic pain isn't found in a doctor's office or pharmacy-it's in the therapist's office. Written by a mental health professional and a physician with over 50 years combined experience, this skills manual will teach you how to treat pain without pills and with confidence, using cutting-edge assessments, insights and interventions.



MINDFUL

WAYS BUILD RESILIENCE

#### **Anti-Burnout Card Deck**

54 Mindfulness and Compassion Practices To Refresh Your Clinical Work

By Laura Warren, MD, Mitch R. Abblett, Ph.D., Christopher Willard, Psy.D.

Stay attuned and empathic towards even the most challenging clients. The Anti-Burnout Card Deck will help you let go of emotional residue and countertransference between sessions, and finish each day with a sense of satisfaction.

## 101 Mindful Ways to Build Resilience

Cultivate Calm, Clarity, Optimism & Happiness Each Day

#### By Donald Altman, MA, LPC

101 Mindful Ways to Build Resilience will give you newfound hope, optimism, and strength. These are simple, yet powerful mindfulness practices that you can apply in just a minute or two—whether you're facing something extremely annoying or seemingly insurmountable. Discover how you can cultivate calm, clarity, optimism and happiness each day and retrain your brain to overcome any problem.

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