

# Managing chronic pain

A booklet for patients, their families and carers



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# Who is this booklet for?

**This booklet is for you if:**

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Or



- You are an adult who is living with chronic pain

- You are a family member, carer or friend of someone who is living with chronic pain.

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**This booklet explains:**

- how chronic pain is assessed
- what medication is available
- which psychological methods are available
- how physical therapy can help
- which complementary therapies are available
- what you can do yourself to help manage your pain, and
- where you can find more information.

# What is this booklet about?

**This booklet explains the recommendations in a clinical guideline, produced by the Scottish Intercollegiate Guidelines Network (SIGN), about:**

- how you can get your pain assessed, and
- ways of helping to manage your pain.

**It gives you information about the care you are likely to get.**

**This booklet is for adults. It does not explain treatment options for managing pain in children, which can be different.**

On pages 32–36 we give details of support organisations and other places where you can get more information about managing pain.

The clinical guideline was published in 2013 and is based on what we know from research into managing chronic pain. It also gives advice based on the opinion of healthcare professionals who are trained on how best to care for you. On page 37 you can find out more about us at SIGN and how we produce our guidelines.

## In this booklet we show four types of recommendation



Strong  
recommendation  
based on good-  
quality research  
evidence



Recommendation  
based on the  
research evidence



Recommendation  
based on clinical  
experience



Not enough  
research evidence  
to tell us if  
something is of  
benefit

If you would like to see the clinical guideline, please visit  
[www.sign.ac.uk](http://www.sign.ac.uk)

# What is chronic pain?

People normally think pain is there for a reason. For example, if you break your leg, the pain makes you rest it until it heals.

Pain in your stomach may tell you there is something wrong and you would go to your doctor.

Chronic pain is different as it normally lasts beyond the normal healing time and seems to be of little use. It can affect your daily life, which is very frustrating. It also causes suffering and can lead to depression.

“Chronic pain is pain that has lasted for longer than 3 months, after the usual recovery period for an illness or injury. It may be as a result of a chronic condition. It may start with a definite problem at a certain time or come on gradually, perhaps for no obvious reason. It may even come on some time after an event; where you have managed an activity at the time but you feel pain afterwards.

Chronic pain can be felt in a specific part of the body, eg back, shoulder, legs, or more generalised, throughout the body.

The pain may be continuous or occasional, you may feel more sensitive to pain and it may sometimes be prone to flaring up or getting worse very quickly.”

[www.moodjuice.scot.nhs.uk](http://www.moodjuice.scot.nhs.uk)

Chronic pain can affect people in many ways. It may change a person's pattern of activity, mood and relationships. Living with ongoing pain can be very difficult. It's important that you and your healthcare team work together to treat you as a whole person with pain, rather than just treating the pain itself.

Chronic pain can be difficult to treat and it may not be possible to get rid of it completely. A wide range of medication and other treatments can help reduce the pain and its effect on your quality of life. It can take some time to find what works best for you, as not all medication works for all people.

"My husband lives with pain every day because of his arthritis. It took a while to find treatment that worked for him. It was so difficult and it got us both down. He keeps active as much as he can and takes his medication regularly to keep the pain at bay." Carer, NHS Forth Valley



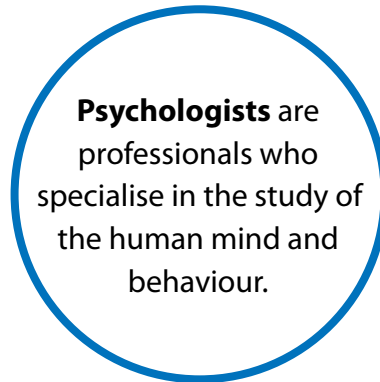
# Who will be involved in my care?

The various types of treatment described in this booklet may be provided by a range of healthcare professionals who specialise in different treatments.

These could include doctors, nurses, **physiotherapists**, **psychologists** and pharmacists. All these people will be professionally trained and experienced in providing the particular treatment.



**Physiotherapists** are healthcare professionals who help with physical difficulties.



**Psychologists** are professionals who specialise in the study of the human mind and behaviour.

# How will my pain be assessed?

Diagnosing chronic pain may take some time. It may take several visits to your healthcare professional to assess your pain and agree a pain management plan.



## Recommendation based on clinical experience

Your healthcare professional should ask you some questions and examine you. This will help them understand the type of pain you have and the amount of pain you are getting, as well as find and treat any cause of pain, and cure it if possible. They will ask you how your pain affects your daily life, including work, relationships, sleep, mood, and other parts of your life.

The following are some questions your healthcare professional may ask you.

- Where is the pain?
- What does the pain feel like? Can you describe the pain? For example, is it burning, tingling, aching or throbbing?
- How long have you had the pain?
- How bad is the pain? Your healthcare professional may use a visual or number assessment scale to help you tell them how much pain you are having.

Your healthcare professional will also discuss any treatments you have had to help manage your pain.

The goals of your pain management plan should be realistic. They should focus on helping you enjoy life as much as possible, despite having chronic pain.

Pain that doesn't go away can make you feel distressed and tired, which can affect your daily life. It can also cause relationship problems with family and friends. It's common for people with chronic pain to feel down or depressed.

Your healthcare professional will ask you how you feel and will look out for signs of depression and help you to deal with this. Your healthcare professional may offer you antidepressants (medication initially used to treat depression) if both of you think they could help.



### **Recommendation based on clinical experience**

If your pain management plan is not working and your pain is causing you distress, your healthcare professional may consider referring you to a specialist pain clinic to help get your pain under control.

“The service involves **Cognitive Behavioural Therapy** (CBT) guided exercises and challenges you to change your perspective on life. The service has enabled me to cope much better with my incurable pain and to live a fuller, richer life, gaining more confidence to take on new goals and challenges and not allow pain to control what I can achieve.

I cannot recommend this service highly enough for those struggling to cope with chronic pain.”

Patient, Care Opinion




Go to [www.careopinion.org.uk/opinions/332787](http://www.careopinion.org.uk/opinions/332787) to read the full story.

**Cognitive  
behavioural therapy**

can help you cope with your situation. It involves working with a therapist who will help you challenge unhelpful thoughts and behaviour.

# What can I do to help myself?

Nobody else can understand your experience of pain or what it feels like to live with it every day. You're the best person to understand your pain and the best person to manage it. The table below explains some things you can do to help control your pain.

How can I help control my pain?	How can this help?
<p>You can try to 'self-manage' your pain. This could include:</p> <ul style="list-style-type: none"> <li>• formal self-management programmes (group-based, individual or online), or</li> <li>• informal self-management (for example, learning about pain management by reading about it).</li> </ul> 	<p>Learning about your pain and understanding it can help you manage it well.</p> <p>Self-management programmes can help you to do this. You should consider them alongside other treatments.</p> <p>Healthcare professionals can help you find a self-management programme that suits you. </p> <p>The organisations on page 32–36 can help you learn more about your pain.</p>
<p>Take medication regularly</p>	<p>To achieve good pain control, it's usually important to take your medication every day, as guided by your healthcare professional, even if your pain doesn't feel as bad.</p> <p>You should not change the dose of your medication or when you take it until you have discussed this with your healthcare professional.</p>
<p>Exercise </p>	<p>Staying active can help reduce your pain in the long term. If you are not sure what exercise is best for you, discuss this with a doctor or physiotherapist.</p>

# What medication can help me manage my pain?

No medication is effective for everyone and all of it can have side effects, sometimes so bad that you cannot continue to take it. Most people, though, get some benefit from at least one medication.

You may need to go through a lot of trial and error to get the best medication for you. Your healthcare professional will consider both your own health and any other medicines you may be taking before deciding what is best and – most importantly – safe, for you to try. Your healthcare professional should work with you to find the most suitable medication and the lowest effective dose. They should discuss the benefits and side effects of treatments with you to help you make an informed choice.

When you take medication for pain, it's important to remember that it might not relieve your pain straightaway. It may take some time (perhaps several weeks) for medication to work and you may start at a low dose and build this up. You may need to try different treatments before finding one that works for you. Your healthcare professional will assess you within two weeks of starting a treatment to see if the medication is working. Your medication and the amount you are given may change. If your pain increases, your healthcare professional may change your medication.

Deciding on which medication to try will depend on:

- how bad your pain is
- the type of pain you have, for example nerve pain
- other health conditions you have
- other medication you are taking
- whether a medicine worked for you before
- any side effects you have experienced from medication before, and
- any risk of developing addiction.





### Information

The tables on pages 13–17 can help you and your healthcare professional decide which medication may be suitable for you.

**You should not stop taking your medication or change the amount you take without discussing this with your healthcare professional. Stopping some medication suddenly can cause withdrawal symptoms such as sleep problems, feeling sick, dizziness and headaches.**



## Medications

Medication	When can I use it?	What are the benefits?	What are the side effects?
<p>Paracetamol</p>	<p>To treat pain anywhere in your body. You can use it alone or with other medicines such as non-steroid anti-inflammatories (NSAIDs) or a codeine-like opioid, such as co-codamol and co-dydramol.</p> <div style="text-align: right; margin-top: 10px;">  </div>	<p>Relieves pain quickly.</p> <p>Has few side effects and is generally considered safe if used within the recommended dose.</p>	<p>Side effects from paracetamol are rare, if it's taken within safe limits. However, taking more than the amount recommended (more than 8 tablets a day) is very dangerous.</p> <p>Rare side effects can include:</p> <ul style="list-style-type: none"> <li>skin rash, and</li> <li>kidney and liver problems, if you take more than the recommended dose.</li> </ul>
<p>Oral non-steroid anti-inflammatory drugs (NSAIDs) in tablet form, for example ibuprofen, diclofenac, etoricoxib, ketorolac, piroxicam, naproxen and celecoxib.</p>	<p>Low back pain.</p> <p>Hip or knee osteoarthritis pain (pain that affects your joints).</p> <p>Musculoskeletal pain (pain that affects your muscles, ligaments and tendons and joints).</p> <div style="text-align: right; margin-top: 10px;">  </div>	<p>Relieves pain quickly.</p> <p>Reduces pain caused by inflammation, for example in joints.</p>	<p>Side effects can include:</p> <ul style="list-style-type: none"> <li>stomach pain</li> <li>diarrhoea</li> <li>heartburn</li> <li>high blood pressure</li> <li>rash</li> <li>dizziness, and</li> <li>headaches.</li> </ul> <p>In a few people, NSAIDs can cause heart problems. Overuse can lead to serious bleeding. This is why you must not use NSAIDs with aspirin.</p> <p>If you have asthma, there's a risk that NSAIDs will make it worse.</p>

**Many pain medications can make you sleepy. You should bear this in mind if you drive a vehicle or operate machinery.**






## Medications

Medication	When can I use it?	What are the benefits?	What are the side effects?
<p>Topical non-steroid anti-inflammatory drugs (NSAIDs), in the form of gel, cream or patches, for example ibuprofen, diclofenac, etoricoxib, ketorolac, piroxicam, naproxen, celecoxib and buprenorphine.</p>	<p>Should be considered when treating localised musculoskeletal pain, particularly if you can't take NSAID tablets.</p>  <p>Should be used for a short time.</p>	<p>Works directly on the affected area of your body.</p> <p>Less risk of side effects as the medication does not go through your whole body.</p>	<p>Side effects are rare but some people get mild skin reactions, for example a rash.</p>
<p>Other topical medicines. These are applied to your skin in the form of creams, gels or patches, for example:</p> <ul style="list-style-type: none"> <li>• capsaicin</li> <li>• lidocaine patch, and</li> <li>• rubefacients (substances that cause redness of your skin).</li> </ul>	<p>Should be considered if you have nerve pain or musculoskeletal pain which hasn't improved with other medication, or if you can't take other medication.</p> 	<p>Works directly on the affected area of your body.</p> <p>Less risk of side effects as medication does not go through your whole body.</p>	<p>Sometimes topical painkillers can cause:</p> <ul style="list-style-type: none"> <li>• redness</li> <li>• itching</li> <li>• stinging</li> <li>• burning, or</li> <li>• other skin reactions.</li> </ul>





**Many pain medications can make you sleepy. You should bear this in mind if you drive a vehicle or operate machinery.**

## Medications

Medication	When can I use it?	What are the benefits?	What are the side effects?
<p>Opioids include codeine, dihydrocodeine, tramadol, oxycodone, hydrocodone, tapentadol, morphine, diamorphine, buprenorphine and methadone.</p>	<p>Should be considered in the short to medium term when other medication has not worked. </p> <p>You should agree with your healthcare professional what you expect from the medication and only continue with opioids if they give you the improvements you were aiming for. </p> <p>Because opioids can have serious side effects, their long-term use should only be considered after discussion with your healthcare professional.</p>	<p>These medicines are powerful painkillers. In the short term they can very effectively reduce the intensity of pain and improve your physical symptoms and daily living. The long-term benefits are unclear. So they are only used by people with pain that is very difficult to treat and only after the pros and cons have been carefully considered.</p>	<p>Opioids have significant side effects and your healthcare professional should discuss them with you. </p> <p>Common side effects include:</p> <ul style="list-style-type: none"> <li>• feeling sick</li> <li>• being sick</li> <li>• feeling dizzy</li> <li>• constipation</li> <li>• feeling sleepy</li> <li>• feeling confused, and</li> <li>• breathing problems.</li> </ul> <p>Side effects associated with longer-term use of opioids include:</p> <ul style="list-style-type: none"> <li>• feeling lethargic</li> <li>• headaches</li> <li>• stomach problems, including constipation</li> <li>• urinary problems</li> <li>• hormone problems</li> <li>• addiction</li> <li>• sleep disturbances</li> <li>• overdose</li> <li>• heart problems</li> <li>• driving accidents</li> <li>• fractures.</li> </ul>




**Many pain medications can make you sleepy. You should bear this in mind if you drive a vehicle or operate machinery.**

## Medications

Medication	When can I use it?	What are the benefits?	What are the side effects?
<p>Anticonvulsants, for example gabapentin, pregabalin and carbamazepin.</p>	<p>This medication is commonly used to treat epilepsy but can also help reduce nerve pain.</p> <p>Gabapentin should be considered for treating nerve pain. </p> <p>Carbamazepine should be considered for treating nerve pain. </p> <p>Pregabalin is recommended for treating fibromyalgia (chronic widespread pain). </p> <p>Pregabalin is recommended for treating nerve pain if gabapentin or amitriptyline has not helped. </p>	<p>Can stop nerve impulses causing some types of pain.</p>	<p>Side effects may be worse in the first few days, when your body is getting used to new medication. The most common side effects include:</p> <ul style="list-style-type: none"> <li>dizziness</li> <li>drowsiness</li> <li>weight gain</li> <li>rash</li> <li>dry mouth</li> <li>feeling sick, and</li> <li>being sick.</li> </ul> <p>Less common side effects include swollen legs, blurred vision, headaches, diarrhoea and tremors (movement disorders).</p>

**Many pain medications can make you sleepy. You should bear this in mind if you drive a vehicle or operate machinery.**

## Medications

Medication	When can I use it?	What are the benefits?	What are the side effects?
<p>Antidepressants, for example amitriptyline, duloxetine and fluoxetine.</p>	<p>They can help some people who have depression. They can also help others with chronic pain.</p> <p>Amitriptyline (or nortriptyline) should be considered for treating fibromyalgia (chronic widespread pain) and nerve pain. </p> <p>Duloxetine should be considered for treating nerve pain. </p> <p>Fluoxetine should be considered for treating fibromyalgia. </p>	<p>They work by interfering with how nerve impulses are transmitted, and ease some types of pain.</p>	<p>Different antidepressants have different side effects, and side effects are rare with some of them.</p> <p>When you first start to take amitriptyline or duloxetine you may experience:</p> <ul style="list-style-type: none"> <li>• dry mouth</li> <li>• feeling sick</li> <li>• dizziness</li> <li>• urinary retention (not being able to urinate easily)</li> <li>• constipation</li> <li>• drowsiness</li> <li>• problems sleeping</li> <li>• anxiety</li> <li>• agitation, and</li> <li>• problems with your central nervous system.</li> </ul>

**Many pain medications can make you sleepy. You should bear this in mind if you drive a vehicle or operate machinery.**

## Can I take more than one medication at one time?



### Recommendation based on the research evidence

Often, one type of medication can work better when taken at the same time as another. For example, if you have nerve pain that has not been helped by anticonvulsant medication alone, your healthcare professional may consider a second drug such as an antidepressant.

## Side effects from medication

You should give your body a chance to get used to the side effects of a medication before deciding to stop taking it. Usually its benefits are more important than its minor side effects, which sometimes go away after a short while. Your healthcare professional should discuss side effects with you and may consider lowering the dose of your medication or changing it if they become severe.

## Is there a risk of becoming addicted to opioids?

There is a risk that people taking opioids for pain relief may become addicted to them. Your healthcare professional will need to know about past or current addiction so they can prescribe you opioids safely.



### **Recommendation based on the research evidence**

Your healthcare professional will consider carefully if an opioid would be right for you.



### **Recommendation based on the research evidence**

If you are likely to need a high dose of opioid you may need to see a pain specialist.



### **Recommendation based on clinical experience**

Your healthcare professional will review your opioid medication at least once a year and will ask about side effects and look out for and manage any risk of addiction.

## Will my medication be reviewed?

Once your pain is under control, you and your healthcare professional should review your medication within six months.



### Recommendation based on clinical experience

It's important that you continue to keep pain well controlled, so your pain and medication should be reviewed at least once a year. It should be reviewed more often if your:

- medication changes
- pain changes, or
- other health conditions change.



## Information

Things you may want to discuss at an appointment to review pain and medication.

- How well the pain medication is working.
- Side effects from medication.
- Changes in your quality of life.
- Self-management plans.
- Reducing the dose of medication to the lowest effective dose, or stopping it altogether.
- Increasing the dose, or adding or changing medication, if more pain relief may be possible.
- Changing the medication if you feel this would help.

If you are not satisfied with your pain medication, for example because side effects or pain gets worse, you can ask for a review with your healthcare professional at any time.



# Can physical therapies help?

Physical therapies, often provided by physiotherapists (and sometimes by other professionals), include treatments aimed at improving mobility, daily living and quality of life.

Therapies can help improve overall physical activity or specific causes of chronic pain. They should be used alongside medication and psychological-based therapies, after proper assessment.

Depending on where your pain is, your doctor may discuss referring you to other healthcare professionals to try physical therapies.

## Hands-on treatment



### Recommendation based on the research evidence

Your doctor should consider referring you for **manual therapy** for the short-term relief of pain caused by chronic low back pain.

**Manual therapy** involves a therapist applying slow movements to stiff joints to stretch them. It also involves twisting joints, giving a sudden thrust. You may hear a 'crack' or 'pop' when this is done, which is quite common. This doesn't mean something has cracked or broken. It doesn't mean you have been harmed.

## Exercise



### Strong recommendation based on good-quality research evidence

Exercise is recommended as treatment for chronic pain.

**Exercise** includes activities such as walking, swimming and exercise classes, to improve or maintain your overall fitness and quality of life.



### Strong recommendation based on good-quality research evidence

It's important that you stay active to help improve pain in the long term.



### Strong recommendation based on good-quality research evidence

You can decide what type of exercise would suit you best. You may prefer a supervised group session or to do your exercise at home, or both.

Your doctor or physiotherapist can advise you on the different types of exercise and can explain how to contact local services.

It's important that you find an exercise routine that suits you – what works for some people may not work for you. You should start off slowly with an exercise routine and gradually increase it over time.

With any exercise routine, your pain won't usually improve straight away. But if you keep exercising regularly, you may start to see improvements in both your pain and many other parts of your life and health.

“There is great value in being supported by a professional who is able to recognise reluctance rather than inability. If you get the opportunity to take part I can recommend that you do so as it is a great start to a healthier and more exercised life style.”

Patient, Care Opinion

Go to [www.careopinion.org.uk/opinions/435845](http://www.careopinion.org.uk/opinions/435845) to read the full story.

## Transcutaneous electrical nerve stimulation (TENS)



### Recommendation based on the research evidence

Your doctor or physiotherapist may suggest you use a **TENS machine** to help ease your pain.

A **TENS machine** is a small portable device worn on your body.

Wires with sticky pads are attached to your skin and electrical impulses like little painless shocks are transmitted to your body. TENS machines affect the way pain signals are sent to your brain. If the pain signals can be blocked by these impulses, your brain will receive fewer pain signals. This in turn can help to ease your pain. It's important that the pads are stuck in the correct place so you get the most benefit. A professional (for example a physiotherapist) can help with this.



### Information

You can read more about how TENS machines work at [www.patient.co.uk/health/tens-machines](http://www.patient.co.uk/health/tens-machines)



# Can other methods help me manage my pain?

Living with chronic pain can affect your thoughts, feelings and behaviour, as well as your response to treatment.

Pain is physical, but our response to it is related to what we think about it, how we feel about it and how we help control it. This is why **psychological methods** to pain management can help.

## How do psychological methods help?

**Psychological methods** aim to help you adjust to your pain by increasing your coping or self-management skills and improving your quality of life.



### Recommendation based on clinical experience

Your healthcare professional may suggest referring you for an assessment to see whether psychological methods that don't include medication could help you. Your healthcare professional will be able to answer any questions about this type of treatment.




## Who will provide psychological methods?

These therapies can be given individually or in groups. They will often be given by a psychologist, but other suitably trained members of your healthcare team may also provide them.

“I was made to feel valued, listened to and understood. I genuinely feel the programme offered me a holistic approach to managing my pain, which consisted of gentle exercise and stressing the importance of staying active, positive, encouraging and fun education sessions and individual pharmacist review each week.” Patient, Care Opinion

Go to [www.careopinion.org.uk/opinions/316706](http://www.careopinion.org.uk/opinions/316706) to read the full story.

## Which psychological methods are recommended for pain management?

Psychological methods for pain management	
<p><b>Pain management programmes</b></p> 	<p>One of the best ways of learning to manage your pain is by going on a pain management programme run by members of your healthcare team. Its aim is to increase your knowledge and skills about managing your pain. Many people find that attending a group is a valuable source of support. Your healthcare professional can refer you to a pain management programme if it's available in your area.</p>
<p><b>Cognitive behavioural therapy (CBT)</b></p> 	<p>This involves working with your healthcare professional to identify and deal with patterns of thinking that lead to increased distress. You will be shown how to analyse and challenge your own thoughts and be taught techniques to change your attitude, overcome your anxieties about pain and successfully change your behaviour. You will usually be taught a range of techniques, including problem solving, assertiveness, stress reduction and relaxation. Gradual exposure to exercise can also help overcome any worries you may have about activity being harmful. To help you improve, you will be set realistic goals.</p>
<p><b>Education</b></p> 	<p>If appropriate, you should be helped to understand the causes and effects of your pain. Any information you are given should say clearly the nature and type of pain you have, and the best way to manage it. Your healthcare professional can give you advice on how to stay active. Education should be tailored to your needs, and may include discussion with healthcare professionals, leaflets, books, websites or local support groups.</p>

# Can complementary medicine and dietary therapies help?

Complementary and alternative therapies are used to treat conditions alongside medicines and other therapies. They don't follow generally accepted medical methods and may not have a scientific explanation for their effectiveness.

Often, it's not clear whether complementary therapies really relieve pain. This may be because traditional scientific techniques may not be best suited to assessing any benefit of complementary therapies, or it may be that these therapies just don't work. It's also difficult to separate actual direct benefit from a **placebo effect**.

A placebo is a treatment that is harmless and ineffective. The placebo effect is a psychological response where people feel better because they have received a treatment, and not because the treatment itself has specifically improved their condition.



# Acupuncture



## Recommendation based on the research evidence

There is some evidence that **acupuncture** can be effective at easing pain. It may be considered for short-term relief of chronic low back pain or osteoarthritis.

**Acupuncture** is a therapy that involves having needles placed into your skin.

“A friend recommended me to Dr X for acupuncture to help ease the chronic pain in my head and shoulders. From the first appointment I began to feel relief which has lasted longer every following visit.”  
Patient, Care Opinion

Go to [www.careopinion.org.uk/opinions/375258](http://www.careopinion.org.uk/opinions/375258) to read the full story.



## Information

Acupuncture isn't always available on the NHS. So if you decide to try it outside the NHS, it's important to use an acupuncturist who is registered with the British Acupuncture Council or other recognised professional body.

## Herbal treatments



### **Not enough research evidence to tell us if something is of benefit**

There is no evidence that herbal treatments help. These treatments haven't been well researched and we don't know how safe they are.



### **Information**

If you decide to try herbal treatments, you should always tell your doctor or pharmacist in case they interact with prescription medication.

## Dietary therapies



### **Not enough research evidence to tell us if something is of benefit**

There is no evidence to suggest that special diets, vitamin supplements or mineral supplements can help to treat chronic pain.

A healthy diet is important for overall health and may also relieve conditions that may be linked with chronic pain, particularly if you are overweight.

# Where can I find out more?

## **NHS Inform**

NHS inform is a national health information service for Scotland.

Phone: 0800 22 44 88

Website: [www.nhsinform.co.uk](http://www.nhsinform.co.uk)

*Organisations that can help with chronic pain*

## **British Pain Society**

A professional organisation that aims to promote education, training, research and development in all fields of pain. It also aims to increase professional and public awareness of the power of pain and the facilities that are available to help manage it. It provides pathways (care options) for patient care. The website includes a list of UK-based organisations that specialise in helping patients with specific underlying conditions that cause chronic pain.

Phone: 020 7269 7840

Website: [www.britishpainsociety.org](http://www.britishpainsociety.org)

Email: [info@britishpainsociety.org](mailto:info@britishpainsociety.org)

## **Chronic Pain Policy Coalition**

A forum to unite patients, professionals and parliamentarians in developing an improved strategy for preventing, treating and managing chronic pain and its associated conditions.

Phone: 020 7202 8580

Website: [www.policyconnect.org.uk/cppc](http://www.policyconnect.org.uk/cppc)

Email: [info@policyconnect.org.uk](mailto:info@policyconnect.org.uk)

## **National Chronic Pain Website for Scotland**

Information, advice, education and resources for people with pain, their families and carers, and healthcare professionals. Provides details of specialist pain management services in Scottish NHS boards and voluntary organisations.

Website: [www.chronicpainscotland.org](http://www.chronicpainscotland.org)

## **Pain Association Scotland**

Provides self-management training for people with chronic pain. Looks at the non-medical issues, particularly the disabling effects of chronic pain on people's lives. The aim is to introduce people to, and quickly build, self-management skills, creating practical, positive change that leads to an improved quality of life and well-being.

Phone: 0800 783 6059

Website: [www.painassociation.com](http://www.painassociation.com)

Email: [info@painassociation.com](mailto:info@painassociation.com)

## **Pain Concern**

Provides information and support to people with pain and their carers. It aims to raise awareness about pain and improve pain management services. Its Airing Pain radio show is a series of podcasts featuring the experiences of people managing their everyday pain, and interviews with internationally recognised experts.

Phone: 0131 669 5951

Website: [www.painconcern.org.uk](http://www.painconcern.org.uk)

Email: [info@painconcern.org.uk](mailto:info@painconcern.org.uk)

Facebook: [facebook.com/painconcern](https://facebook.com/painconcern)

Twitter: [@PainConcern](https://twitter.com/PainConcern)

*Other organisations*

### **British Complementary Medicine Association**

A professional organisation that can help you find a registered therapist.

Phone: 0845 345 5977

Website: [www.bcma.co.uk](http://www.bcma.co.uk)

Email: [office@bcma.co.uk](mailto:office@bcma.co.uk)

### **Health and Social Care Alliance Scotland (the ALLIANCE)**

The Alliance is the national voluntary-sector healthcare and social-care intermediary. It brings together over 270 organisations to make sure people and unpaid carers, and sector experts, can help shape policy and practice.

Phone: 0141 404 0231

Website: [www.alliance-scotland.org.uk](http://www.alliance-scotland.org.uk)

Email: [info@alliance-scotland.org.uk](mailto:info@alliance-scotland.org.uk)

### **Healthtalkonline Database**

An online database of patients' experiences, with information on around 50 health conditions.

Website: [www.healthtalkonline.org](http://www.healthtalkonline.org)

*Other websites*

### **Pain Support**

This website provides pain-relief techniques for those with chronic pain. There is also a regular email newsletter, a discussion forum and a contact club for making new friends, plus a shop for books, relaxation CDs and downloads.

Website: [www.painsupport.co.uk](http://www.painsupport.co.uk)

### **Pain UK**

Aims to bring together pain charities in the UK to speak up about the needs of the people they represent. It aims to provide training and support to member charities, give information for people living with pain about where to find support and raise awareness for new forms of support, when needed.

Website: [www.painuk.org](http://www.painuk.org)

*Self-management tools*

### **Arthritis Care**

[www.arthritiscare.org.uk/LivingwithArthritis](http://www.arthritiscare.org.uk/LivingwithArthritis)

### **Centers for Disease Control and Prevention**

[www.cdc.gov/arthritis/interventions/self\\_manage.htm](http://www.cdc.gov/arthritis/interventions/self_manage.htm)

### **Living with chronic pain**

[www.paincd.org.uk](http://www.paincd.org.uk)

**Moodjuice**

[www.moodjuice.scot.nhs.uk](http://www.moodjuice.scot.nhs.uk)

**Pain Association Scotland**

[www.painassociation.com](http://www.painassociation.com)

**Pain Toolkit**

[www.paintoolkit.org](http://www.paintoolkit.org)

# How are SIGN guidelines produced?

Our guidelines are based on the most up-to-date scientific evidence. We read research papers to find evidence for the best way to diagnose, treat and care for patients. If we cannot find this out from the research evidence, we ask healthcare professionals to use their clinical experience and judgment to suggest treatments.



1

Gather lived experience



2

Identify the questions



3

Search for the evidence



4

Look at the evidence



5

Make judgements and recommendations



6

Ask people for feedback



7

Publish



8

Let everybody know about our guidelines

You can read more about us by visiting [www.sign.ac.uk](http://www.sign.ac.uk) or you can phone **0131 623 4720** and ask for a copy of our booklet 'SIGN guidelines: information for patients, carers and the public'.

**The Scottish Intercollegiate Guidelines Network (SIGN) writes guidelines which give advice for healthcare professionals, patients and carers about the best treatments that are available.**

We write these guidelines by working with healthcare professionals, other NHS staff, patients, carers and members of the public.

We are happy to consider requests for other languages or formats. Please phone **0131 623 4720** or email [sign@sign.ac.uk](mailto:sign@sign.ac.uk)



[www.sign.ac.uk](http://www.sign.ac.uk)



[www.healthcareimprovementscotland.org](http://www.healthcareimprovementscotland.org)

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Telephone 0131 623 4300

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Delta House | 50 West Nile Street | Glasgow | G1 2NP  
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The Healthcare Environment Inspectorate, the Scottish Health Council, the Scottish Health Technologies Group, the Scottish Intercollegiate Guidelines Network (SIGN) and the Scottish Medicines Consortium are key components of our organisation.

