The Nonpharmacological Approach to Chronic Pain Management

While many products and services can help to relieve pain, they aren’t meant to replace medication therapy, but can be a useful part of the pain-management toolbox.

By Surayyah Morris, PharmD

NOT ALL PAIN advice is the right advice. For example, losing weight isn’t always the answer. Drinking more water is not a cure-all. Being “positive” helps, but it doesn’t resolve pain. Such clichés are very familiar to chronic illness warriors who have heard them tenfold. And, even though medicines can be beneficial for controlling pain, patients may also benefit from safe and effective options in addition to those provided by a prescription pad and insurance formularies.

The Approach

While patients may not be able to immediately resolve pain, taking the edge off can provide relief while they figure out their next move; it is an effective way to buy time.

An important part of pain management is recognizing what makes them feel better and establishing a routine to remain in a state of relief. Just understanding relief is achievable can provide patients with the knowledge of what it takes to stay there.

Everyone experiences pain differently. Whether it’s acute or chronic, how pain is perceived is specific to the individual. We can do our best to help others understand the type and severity of our pain, but ultimately, it is a personal experience. Understanding this is imperative because it allows us to keep our pain management expectations in perspective and remain realistic when treating pain. In addition, some techniques are meant to alter how pain is perceived, while others are meant to have some physical effect on the actual source or location of pain.
Heat and Cold Therapy

Heat increases blood flow. Applying heat can help relax the pained area and allow more blood to flow to the area to relieve the pain. However, heat is a common trigger for symptoms caused by several conditions. Therefore, patients should be particularly cautious when using any type of heat therapy.

There are many types of heat therapy, including:

- Heating pads (dry or moist)
- Heated blankets
- Hot water bottles
- Hot/warm baths
- Steamed towels
- Sauna/steam rooms

Sauna and steam rooms can be pain-relieving options for those able to tolerate them. A sauna provides a dry heat that assists in circulating blood and promotes sweating and detoxification. Alternatively, a steam room provides moist heat, which can be more soothing and relaxing. Choosing which type of heat works best is key when using one of these therapies. However, keep in mind that some conditions may be worsened by the moist heat of a steam room and relieved by the dry heat of a sauna and vice versa. Therefore, use of sauna and steam rooms should be introduced in small increments of time.

Cold therapy helps to reduce blood flow, inflammation and nerve activity; dulls pain; and boosts the immune system. Types of cold therapy include:

- Ice packs. These are common items, but a thorough Amazon search provides a list of commercial products that make icing specific areas of the body much simpler. A homemade ice pack will also work. For instance, placing a regular gel ice pack into a fluffy sock can help to relieve burning neuropathic pain the same way as a product specifically designed in the shape of a sock.

- Topical cooling products (Biofreeze, IcyHot). These cooling products are available in sprays, creams, patches, roll-ons and more. When applied, relief is practically spontaneous. Many patients routinely bring this product along when leaving the house just in case immediate relief is needed.

- Ice bath. If the shock can be tolerated, an ice bath has many benefits. And while the feeling is intense, the duration of therapy doesn’t have to be long. Patients can start with a two- to three-minute bath and increase the time as tolerated. To ease the shock, it may help to warm a towel in the dryer for use when exiting the ice bath.

Hands-On Therapy

Massage and physical therapy can be very beneficial for treating pain.

In fact, massages aren’t just for pleasure; they can be a part of a pain management routine as well. Massages help to drain the lymphatic system, relieve stress (a big trigger for pain conditions), reduce tension and improve circulation. The level of pressure used can be adjusted based on tolerance. For instance, some pain conditions may only tolerate light pressure, and this should be communicated to the masseuse.

Other massage options include:

- Full-body massage chair
- Massage gun
- Portable neck massager
- Cloud foot/leg massager
- Roller balls and foam rollers
- Portable chair massagers for the office or in the car

Physical therapy introduces a movement variable into a pain-management routine. Physical therapy focuses on activities such as stretches, strengthening, flexibility and range of motion to relieve pain. Therapists are trained to safely incorporate specific exercises for the best outcome. They can also massage local areas of pain, which can take the place of a separate expense for personal massages. Patients should always wear appropriate clothing to appointments and show their assistive devices to the therapist who can ensure they are working and being used properly.

Investment Therapies

To say the following types of therapies are investments may be a slight understatement, because when they work, they work well. And, while they can be expensive, their long-term benefits are worthwhile.

**Spinal cord stimulator.** A spinal cord stimulator, a surgically implanted device that sends electrical signals through the nerves via the spinal cord to relieve pain in specific areas of the body, blocks pain signals from reaching the brain. The stimulation feels like a faint vibration on the inside of the body and, with programming, the rate, intensity and pattern of the pulses can be customized. For chronic pain originating from the arms/shoulders and up, a lead would likely be placed on the cervical portion of the spine to relieve pain. If chronic pain is in lower areas such as the legs, the lead can be placed on the lumbar spine. Patients should discuss with
Important Safety Information

Hizentra®, Immune Globulin Subcutaneous (Human), 20% Liquid, is a prescription medicine used to treat:

- Primary immune deficiency (PI) in patients 2 years and older
- Chronic inflammatory demyelinating polyneuropathy (CIDP) in adults

WARNING: Thrombosis (blood clots) can occur with immune globulin products, including Hizentra. Risk factors can include: advanced age, prolonged immobilization, a history of blood clots or hyperviscosity (blood thickness), use of estrogens, installed vascular catheters, and cardiovascular risk factors.

If you are at high risk of blood clots, your doctor will prescribe Hizentra at the minimum dose and infusion rate practicable and will monitor for signs of clotting events and hyperviscosity. Always drink sufficient fluids before infusing Hizentra.

See your doctor for a full explanation, and the full prescribing information for complete boxed warning.

Treatment with Hizentra might not be possible if your doctor determines you have hyperprolinemia (too much proline in the blood), or are IgA-deficient with antibodies to IgA and a history of hypersensitivity. Tell your doctor if you have previously had a severe allergic reaction (including anaphylaxis) to the administration of human immune globulin. Tell your doctor right away or go to the emergency room if you have hives, trouble breathing, wheezing, dizziness, or fainting. These could be signs of a bad allergic reaction.

Inform your doctor of any medications you are taking, as well as any medical conditions you may have had, especially if you have a history of diseases related to the heart or blood vessels, or have been immobile for some time. Inform your physician if you are pregnant or nursing, or plan to become pregnant.

Infuse Hizentra under your skin only; do not inject into a blood vessel. Self-administer Hizentra only after having been taught to do so by your doctor or other healthcare professional, and having received dosing instructions for treating your condition.

Please see Brief Summary of full Prescribing Information on reverse.
MEDICARE PART B COVERAGE FOR CIDP
is available for Hizentra!†

Get the convenience of self-infused Hizentra covered under the same benefit category as IVIg‡

Lower out-of-pocket costs than with Part D
Coverage includes pump, supplies, medication, and nurse training

We can help you get started today, even if Part B wasn’t an option before

Call 1-877-355-4447 or visit HizentraMedicarePartB.com to learn more and get started today!

‡Coverage of IVIg when administered in a clinical setting.
†100% coverage for those with Medicare Part B and a Medigap plan after Part B annual deductible is met.

Immediately report to your physician any of the following symptoms, which could be signs of serious adverse reactions to Hizentra:

- Reduced urination, sudden weight gain, or swelling in your legs (possible signs of a kidney problem).
- Pain and/or swelling or discoloration of an arm or leg, unexplained shortness of breath, chest pain or discomfort that worsens on deep breathing, unexplained rapid pulse, or numbness/weakness on one side of the body (possible signs of a blood clot).
- Bad headache with nausea; vomiting; stiff neck; fever; and sensitivity to light (possible signs of meningitis).
- Brown or red urine; rapid heart rate; yellowing of the skin or eyes; chest pains or breathing trouble; fever over 100°F (possible symptoms of other conditions that require prompt treatment).

Hizentra is made from human blood. The risk of transmission of infectious agents, including viruses and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent and its variant (vCJD), cannot be completely eliminated.

The most common side effects in the clinical trials for Hizentra include redness, swelling, itching, and/or bruising at the infusion site; headache; chest, joint or back pain; diarrhea; tiredness; cough; rash; itching; fever, nausea, and vomiting. These are not the only side effects possible. Tell your doctor about any side effect that bothers you or does not go away.

Before receiving any vaccine, tell immunizing physician if you have had recent therapy with Hizentra, as effectiveness of the vaccine could be compromised.

Please see full prescribing information for Hizentra, including boxed warning and the patient product information, available at Hizentra.com.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

You can also report side effects to CSL Behring’s Pharmacovigilance Department at 1-866-915-6958.

Biotherapies for Life® CSL Behring
Only from Hizentra

Simplify your infusions

Hizentra is the first and only Ig with the convenience of prefilled syringes.

Choose where and when you infuse

Self-administration with Hizentra means you and your doctor can decide when and where you can infuse. No more canceling plans due to IV infusion appointments.

No IV Infusions

Hizentra allows you to infuse just under the skin (after training from your doctor), not into a vein.

Medicare Part B coverage for CIDP is available for Hizentra*

Call 1-877-355-4447 or visit HizentraMedicarePartB.com to learn more and get started today!

*100% coverage for those with Medicare Part B and a Medigap plan after Part B annual deductible is met.

HIZENTRA®, Immune Globulin Subcutaneous (Human), 20% Liquid
Initial US Approval: 2010

BRIEF SUMMARY OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use HIZENTRA safely and effectively. Please see full prescribing information for HIZENTRA, which has a section with information directed specifically to patients.

What is HIZENTRA?

HIZENTRA is a prescription medicine used to treat primary immune deficiency (PI) and chronic inflammatory demyelinating polyneuropathy (CIDP). Infuse HIZENTRA only after you have been trained by your doctor or healthcare professional. HIZENTRA is to be infused under your skin only. DO NOT inject HIZENTRA into a blood vessel (vein or artery).

Who should NOT take HIZENTRA?

Do not take HIZENTRA if you have too much proline in your blood (called “hyperprolinemia”) or if you have had reactions to polysorbate 80. Tell your doctor if you have had a serious reaction to other immune globulin medicines or have been told that you have a deficiency of the immunoglobulin called IgA.

Tell your doctor if you have a history of heart or blood vessel disease or blood clots, have thick blood, or have been immobile for some time. These things may increase your risk of having a blood clot after using HIZENTRA. Also tell your doctor what drugs you are using, as some drugs, such as those that contain the hormone estrogen (for example, birth control pills), may increase your risk of developing a blood clot.

What are possible side effects of HIZENTRA?

The most common side effects with HIZENTRA are:

- Itching
- Fever and/or chills
- Shortness of breath
- Dizziness
- Fall
- Runny or stuffy nose

Tell your doctor right away or go to the emergency room if you have hives, trouble breathing, wheezing, dizziness, or fainting. These could be signs of a bad allergic reaction.

Tell your doctor right away if you have any of the following symptoms. They could be signs of a serious problem.

- Reduced urination, sudden weight gain, or swelling in your legs. These could be signs of a kidney problem.
- Pain and/or swelling of an arm or leg with warmth over the affected area, discoloration of an arm or leg, unexplained shortness of breath, chest pain or discomfort that worsens on deep breathing, unexplained rapid pulse, or numbness or weakness on one side of the body. These could be signs of a blood clot.
- Bad headache with nausea, vomiting, stiff neck, fever, and sensitivity to light. These could be signs of a brain swelling called meningitis.
- Brown or red urine, fast heart rate, yellow skin or eyes. These could be signs of a blood problem.
- Chest pains or trouble breathing.
- Fever over 100ºF. This could be a sign of an infection.

Tell your doctor about any side effects that concern you. You can ask your doctor to give you more information that is available to healthcare professionals.

Please see full prescribing information, including full boxed warning and FDA-approved patient product information. For more information, visit Hizentra.com.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

You can also report side effects to CSL Behring’s Pharmacovigilance Department at 1-866-915-6958.

Hizentra is manufactured by CSL Behring AG and distributed by CSL Behring LLC. Hizentra® is a registered trademark of CSL Behring AG. Biotherapies for Life® is a registered trademark of CSL Behring LLC.

©2021 CSL Behring LLC 1020 First Avenue, PO Box 61501, King of Prussia, PA 19406-0901 USA  www.CSLBehring.com  www.Hizentra.com  HIZ-0076-FEB2021
a pain doctor whether this is an option for them. If so, a trial run to test it can be conducted before having to commit to the real thing.

Transcutaneous electrical nerve stimulation (TENS). The external equivalent to a spinal cord stimulator is a TENS unit, which has electrodes with pads that connect to a handheld device to deliver pain-relieving electrical impulses through the skin and nerves. TENS units cannot target full-body pain at once, but they are ideal for localized pain in one area at a time. These units have advanced into wireless options and are commercially available, which makes them convenient to access and add to a pain-management routine.

Alpha-Stim. The U.S. Food and Drug Administration-approved Alpha-Stim device uses electrotherapy probes for pain or earlobe clips for anxiety, depression and insomnia that requires a prescription. The device is powered by batteries, and the probe and earlobe supplies and solution used with the device need periodic replacement. Fortunately, the risk of investment in this device is minimal because if it doesn’t provide relief, there is a 30-day money back guarantee.

Biofeedback. This electronic monitoring of automatic bodily function involves attaching electrodes from a computer to a body part to show visual activity, such as contractions, relaxation, brain activity, breathing patterns and more, to teach patients the connection between how their brain processes these movements to put them in control of their pain. Biofeedback can be performed in a doctor’s office, physical therapy clinic or with a wearable device.

Therapeutic Lifestyle Changes
To manage chronic pain, small daily habits can have a positive effect on how well it is controlled. A few ways to make small changes include:
- Establishing a daily routine
- Avoiding triggers such as stress, alcohol and heat
- Practicing yoga and meditation
- Laughing
- Incorporating anti-inflammatory foods into the diet
- Getting adequate sleep
- Exercising as tolerated, or going for a walk

If any helpful pain management therapies are too costly, a way around the expense is to create a homemade version of the product or service. For example, if a frozen ice pack isn’t available, one can be made with a Ziploc bag, two parts water and one part rubbing alcohol. If a massage is needed between professional sessions, a family member or friend can fill in as the masseuse. To achieve the incredibly low temperature of a cryotherapy machine, a tub filled with ice and cold water will provide a comparable sensation. The goal is to relieve pain. It doesn’t matter how elaborate the process is, as long as the goal is accomplished. Chronic pain can seem like a game that is based a little on strategy and a lot on luck. But, once patients find what works for them, they should maintain it as if it were gold.

Cold therapy helps to reduce blood flow, inflammation and nerve activity; dulls pain; and boosts the immune system.

Patients may also find it helpful to stay as involved in groups or organizations in which people share the same or similar conditions. Often, these groups allow patients to learn how others manage their conditions to gain ideas that may be useful. Most importantly, patients should be open to trying different strategies (as long as the benefits outweigh the risks). But, the common-sense test should always be used when trying something new.

Complementary to Medication
Chronic pain is likely to be ongoing, and managing it will require trial and error. And, while these options are not meant to replace medication therapy, it’s helpful to include nonpharmacologic therapies as part of the pain-management toolkit.

SUARAYAH MORRIS, PharmD, is an autoimmune small fiber neuropathy patient from Central Florida. As a medication therapy management and pain management specialty pharmacist, she enjoys supporting patients with chronic pain and chronic conditions to help find balance and improve quality of life.