Pain and Fatigue

Disclaimer

This factsheet is for advice and guidance only. It is not intended to replace advice from a medical professional. Please ensure you follow manufacturer's instructions for use and that you carry out appropriate risk assessments.

Types of pain

Acute pain

Acute pain often has a sudden onset, short duration and can be localised to one particular area – such as after an injury or illness.

Chronic pain

Chronic pain is when you have been experiencing persistent pain for longer than three months. Persistent pain is considered to be either constant pain or coming and going such as with migraines. Pain can be described in many ways, such as aching, burning, shooting, throbbing or stinging.

The NHS has advice about **ways to reduce pain**. If you have chronic pain, the **Pain Toolkit** offers information and advice about how to self-manage persistent pain.

Chronic pain can be caused by conditions such as arthritis, fibromyalgia, musculoskeletal issues such as back or neck pain, migraines, endometriosis, injury, illness or nerve damage. If you have had pain that has lasted for more than three months, you should speak to your GP other health professional for support.

Where to get support for pain

For both acute and chronic pain, you should seek the advice of your GP to investigate the cause of the pain, for treatment options and for support with pain management.

GP

If you have experienced pain for more than 12 weeks, the NHS offer various sources of support. In the first instance you are advised to contact your GP so you can discuss your symptoms, and they can investigate the cause of your pain and offer support. They may offer one or more of the following:

Pain medication

If you are using pain medication, you should obtain advice from your local pharmacist or GP regarding its appropriate use and any possible interactions with other medications you are taking. Only take medication as directed and seek medical advice if it is not controlling your pain.

There are many different types of medication that can be used to control pain and associated symptoms. The type of medication you may be given will depend on the type of pain you have, the cause of the pain and your age and overall health. There are also alternatives to pain medication that your GP can discuss with you.

Self-help techniques

Learning self-help techniques such as breathing exercises and mindfulness can be effective with managing pain. You can find more information and resources via the **NHS website** or **Pain Concern**.

Practical strategies such as pacing and planning your daily activities, setting goals, prioritising tasks, and learning what causes pain can help you to understand and manage persistent pain.

Complimentary therapies

The NHS considers complementary and alternative medicine as treatment that falls outside of mainstream healthcare. Examples include acupuncture and herbal medicines. Acupuncture is sometimes offered in GP practices, hospices and NHS pain clinics. If you are considering complimentary therapies, you are advised to contact your GP first, as some therapies may interact with medicines you are already taking or may not be suitable if you have pre-existing health conditions. More information can be found via **the NHS**.

Referral to support groups

There are organisations that support people living with long-term pain (such as **Pain Concern**) and these provide helplines and support groups. There are also organisations offering specialised advice and support to people experiencing pain caused by specific health conditions, such as fibromyalgia, arthritis and endometriosis. **The British Pain Society** has a useful list of organisations listed by health condition on its website.

Referral to specialist pain clinic/pain management programme

If you are referred to a pain clinic or onto a pain-management programme, you may be supported by a multi-disciplinary team of healthcare professionals including psychologists, physiotherapists, occupational therapists, nurses and doctors. Sessions can include gentle exercise, group discussions and learning relaxation and self-management techniques.

Cognitive Behavioural Therapy

Cognitive Behavioural Therapy (CBT) is a talking therapy which teaches you how your thoughts and behaviour are connected. It is about how changing the way we think about things can change the way we feel and behave, and can help you to feel more in control of your situation. You can find more information about CBT via **the NHS**.

Assessment of need and consideration of risk

Occupational therapists

If pain is preventing you from carrying out the daily activities that you want or need to do, you may benefit from an assessment by an **occupational therapist** who can advise on daily living equipment or home adaptations where required. You can speak to your GP or local council about arranging this.

Occupational therapists are Allied Health Professionals (AHP's) and are regulated by the Health and Care Professions Council (HCPC). They are qualified to carry out health and social care assessments, to formulate plans of care, recommend equipment, provide rehabilitation after illness or injury and to give advice and education on self-management of health conditions. They can make home visits to assess any particular difficulties you may be having with daily activities in your home environment and suggest aids or equipment that may help.

You can either approach your GP for a referral to the community occupational therapy team, or you can contact your local authority for a **needs assessment**.

Alternatively, you may choose to pay for a private occupational therapist. More information about how a private occupational therapist can help, and for a list of registered occupational therapists, is provided by the **Royal College of Occupational Therapists** (RCOT). You can also check whether an occupational therapist is registered with the **Health and Care Professions Council** (HCPC).

Trusted Assessors

Trusted assessors are qualified to carry out simple health and social care assessments and to formulate plans of care or recommend small pieces of equipment. To do this the health condition must be simple (not complex or have multiple health conditions), static (unlikely to deteriorate), standard (they do not require specialist equipment such as bariatric, or large equipment such as hoists) and there should be no additional risk factors to consider (such as a risk of falls). If the condition is not simple, standard or safe, it is advisable to instruct an occupational therapist.

Consideration of risk

When considering the purchase of products, there may be risk factors to be aware of. Some (but not all) of these are outlined below:

- Is your condition not static/is likely to deteriorate?
- Are you able to bear your own weight/transfer independently (for example from bed to chair)?
- Do you have difficulty sitting or standing unsupported?
- Do you suffer with fatigue?
- Do you have a visual or hearing impairment?
- Do you experience dizziness?
- Do you have osteoporosis?
- Do you have a cognitive impairment?
- Do you have issues with balance and/or muscle weakness?
- Do you have limb difference or impaired manual dexterity?
- Do you have difficulty with footcare which affects your mobility, or have inappropriate footwear?
- Do you have a condition that may affect your mobility/balance or present a falls risk (such as arthritis, diabetes, incontinence, stroke, syncope, diabetes, epilepsy, heart problems, inner ear problems, peripheral arterial disease or Parkinson's disease)?
- Do you have a history of falls or are at risk of falls?
- Are you currently taking more than four types of medication?
- Do you misuse drugs or alcohol which can impair your judgement/balance/coordination?
- Do you require adaptive equipment for your weight or height?
- Are there environmental hazards or other people in your house (a child or another adult) that would make the provision of the equipment unsafe or impractical?
- Do you have areas of numbness or neuropathy?
- Do you have reduced skin temperature sense?
- Do you have pressure sores or open wounds?
- Are you pregnant?
- Do you have any allergies or intolerances to the materials used?
- (For electrical devices such as Tens machines) Do you have an overactive bladder, epilepsy, heart problems, pregnancy, pacemaker, electrical implant or metal implant?

As a general guide, if the answer to any of the questions above is ‘yes’ then you are advised that you may benefit from a formal assessment. We recommend that you seek an assessment by a qualified health & social care professional such as an occupational therapist or physiotherapist. They will be able to consider your needs, taking into account your individual health, environment, and care and support circumstances.

Sleep, fatigue and driving

Sleep

Pain can make getting comfortable in bed more difficult and can lead to difficulty falling or staying asleep. There are products that are available that can make it easier to get into/out of bed, and others that can help you get comfortable in bed, such as special mattresses or posture supports.

You may also find the following sources of information useful:

- **Pain Concern** have produced a useful **guide** about how to get a good night's sleep if you have chronic pain. The guide is written in collaboration with the Warwick Sleep and Pain Laboratory and offers well-evidenced and comprehensive advice.
- **The Sleep Foundation** have published **'20 Tips for How to Sleep Better'** with practical advice on sleep hygiene.
- **The Sleep Charity** offers advice and support for better sleep.
- **Bed Advice UK** has sponsored The Sleep Charity's adult sleep eBook, 'Understanding Your Sleep' and can be downloaded from **The Sleep Charity website**.

If you have been having problems with your sleep for longer than three months, and for more than three nights per week, you should speak to your GP for support.

Fatigue

Occasional tiredness is a normal part of life, but if you are tired most of the time without any obvious cause and it is affecting your ability to carry out daily activities, you should seek the advice of your GP or other healthcare professional. This is especially if your fatigue is accompanied by other symptoms such as weight loss or mood changes, or if you are finding it difficult to breathe when you are sleeping.

If you have a health condition that is causing fatigue, making lifestyle changes, learning coping strategies to manage your energy levels, talking therapies like Cognitive Behavioural Therapy (CBT) and improving your sleep hygiene may help to manage symptoms.

The Royal College of Occupational Therapists (RCOT) have produced a guide to download in relation to **managing energy levels** and specific daily activities such as washing and dressing, cooking, shopping and doing the housework.

Driving

If you have pain or reduced mobility that makes it difficult to drive, you may need to speak to your GP and the DVLA about your fitness to drive. You can find information about fitness to drive **via the government website**, and you can check if you have a health condition that may affect your driving.

f you are finding that pain is affecting your ability to operate a car, you may want to seek help from the **Motability** charity who help individuals who receive the higher rate mobility component of Disabled Living Allowance (DLA) or Personal Independence Payment (PIP) to use the money to buy or hire a car. Their contact details are **on their website,** and include a Motability helpline (0300 456 4566), online contact forms and via a British Sign Language (BSL) interpreter.

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Living Made Easy Factsheets

Living Made Easy has produced a range of factsheets which explain how aids and equipment may be useful to help with daily living activities, how to use them safely, and which also provides practical information about funding and further sources of support. You can find the factsheets on the **Living Made Easy website**.

Further advice and support

When to seek emergency medical attention for pain

- If you experience chest pain, together with shortness of breath.
- If you experience low back pain together with difficulty standing or walking, loss of bowel or bladder control, loss of consciousness, sudden numbness in pelvic region or in one of both legs.
- If you have pain together with vomiting, a fever, confusion or fast breathing or heart rate.
- If you have a headache together with neck stiffness, aversion to bright lights and a rash that doesn’t fade when a glass is pressed against it.
- After a serious injury or accident.

The above list is not exhaustive, and for more information about when to seek emergency medical attention for pain, please see the NHS or National Institute for Health and Care Excellence (NICE) websites which offer more information about red flag symptoms.

Further sources of information and advice

NHS advice and guidance on pain

How to get NHS help for your pain.

Ways to reduce pain.

Pain medication (analgesia).

Get help for your symptoms.

Further sources of advice or support for pain

Flippin' Pain. A public health campaign to change the way we think, talk about and treat persistent pain.

The British Pain Society. Multidisciplinary professional organisation in the field of pain within the UK. Promoting best practice for clinicians and offering useful patient publications.

Pain Concern. Charity supporting those living with pain and those who care for them.

Action on Pain. Providing support and advice for people affected by chronic pain.

ESCAPE-Pain. Organisation enabling self-management and coping with arthritic pain using exercise. Supported by Orthopaedic Research UK.

Pain UK. An alliance of charities who support people in pain.

BeeFree. Pain and mental health advice.

The Pain Toolkit. Tools and resources to help people self-manage persistent pain.

National Institute for Health and Care Excellence (NICE), Guideline NG193 on chronic pain.

NHS advice and guidance on fatigue

Tiredness and fatigue.

Further sources of advice or support for fatigue

The ME Association. Provides information and support to those affected by ME/CFS and Long Covid.

UK Fibromyalgia. Offering advice, information and advocacy for those living with fibromyalgia.

National Institute for Health and Care Excellence (NICE), guideline 206 on ME and CFS.

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