

# A guide to managing your pain during COVID-19

## Our services

Hospitals across Ontario are doing everything they can to limit the spread of COVID-19, including rescheduling non-urgent outpatient clinic appointments for the time being. What does this mean for the Pain Management Program? For now, our groups, workshops and face-to-face appointments have been put on hold.

Stay connected through our email distribution list to find out about virtual offerings and information for managing your condition. Contact Flora at 519 646-6100, ext. 61792 to have your name and email added to our list.

We know that managing chronic pain is difficult at the best of times. The stressors and uncertainty we are facing will have an impact on your daily routines and coping strategies. Have you experienced some pain flare-ups due to stress? Are you

finding it harder to cope with your pain, anxiety or depression symptoms? It's likely many of you answered yes to these questions. This guide includes resources to help you to self-manage your pain. Learn more about the following during COVID-19:

- How to access services in the pain program
- Our approach to treating chronic pain
- Accessing food
- Strategies to manage self-isolation
- Living with worry
- Mental health information and supports
- Crisis prevention
- Exercising with chronic pain
- Medication information

## How to access services in the pain program

At this time, our ability to provide in-person services to patients is limited. We thank you for your patience as we work through the restrictions needed to protect everyone from potential exposure to COVID-19. Our physicians and staff continue to provide scheduled patient

follow-ups via telephone and/or videoconferencing. *Please note: When we call you, you may see "blocked number" on your call display, or a message with no caller ID available.*

If you are a current patient and have a follow-up appointment scheduled in 2020, please call the clinic at 519-646-6000 ext. 61786 for questions/concerns about:

- your next appointment
- your medications
- changes to your pain that may require a nurse or physician consultation

We are gradually re-introducing some treatment groups and workshops through videoconferencing. You will be able to join a "virtual" group from the comfort of your home using your cell phone, tablet or computer. You will also have the option of calling in to teleconference (no video). The technology isn't perfect, and this format is new for us. There will be glitches, so we will all have to practice our relaxation and stress management skills. Some patients may be seen in clinic in the next few

months. How do we make the difficult decisions about who is offered an in-person clinic appointment? We must follow Ministry of Health guidelines regarding the reintroduction of scheduled services.

Certain services require clinic appointments (e.g. hands-on assessment / diagnosis for new patients, injections, orthotics etc.). These appointments will take priority, but the number of patients waiting for these appointments does exceed our current capacity.

For those of you who have relied on injections or infusions to manage your pain, COVID-19 has significantly impacted your usual access to healthcare. Your health care providers have likely evaluated your treatment plan, looking for opportunities to improve your pain management. You may have been asked to try new pain medications, treatments and coping strategies.

Please visit our website to learn what to expect when you come for an appointment

<https://www.sjhc.london.on.ca/infectioncontrol/novel-coronavirus-update>

## Our approach to treating chronic pain

Dr. Geoff Bellingham, Clinical Director of the Pain Management Program and Dr. Marilyn Hill, psychologist, share their thoughts on treating chronic pain through the Q&A below. View the full version on our Online Resource Library under the title above.

### **Dr. Hill: What does an ideal chronic pain treatment plan look like?**

**Dr. Bellingham:** I believe that ideal pain care comes from helping people develop strategies that promote self-management. This can include a daily therapeutic exercise program in someone's home, psychological ways of managing the stress or negative thoughts that can be associated with pain, or learning different ways of

moving or performing tasks with less pain. In other words, learning strategies and lifestyles that can help reduce the negative effects pain can have on a person's quality of life. Good pain care can also be enhanced using medications as well as procedures such as injections or infusions. These medical components should be used to facilitate the self-management

approaches and not replace them. For example, the short to medium term pain relief from a well performed injection may improve someone's ability to participate in and benefit from psychological counseling and educational programs.

**Dr. H:** I agree. The severity of chronic pain is influenced by many factors – the injury itself, activity levels, stress, emotional distress, how effective or harmful your coping strategies are etc. You need a full toolbox of pain management strategies to minimize pain severity. No single tool will provide optimal pain relief. I sometimes describe it this way. Would you attempt to do woodworking with only a hammer in your toolbox? Of course not. To me, it seems just as futile to try to manage pain with only injections or pain medications in your toolbox. That is why we developed our Pain 101 workshop, and encourage all new patients to attend. Pain 101 describes a wide range of pain management skills and treatments. It helps people to decide which tools they are missing, and develops a treatment plan to add new tools to their toolbox.

**Dr. H: How does a pain specialist decide on the best treatment plan for their patient?**

**Dr. B:** Pain specialists try to provide the most up to date and evidence-based care for a person's pain condition. That said, we need more clinical trials to understand what treatment options should work best for various kinds of pain conditions. We rely on research and clinical guidelines to help formulate a treatment strategy to provide the best possible outcome for a patient. For example, the American College of

Rheumatology has recently published a set of best practice recommendations on the optimal medication and injection strategies for the treatment of painful osteoarthritic conditions. By discussing these options, the physician and patient can work together to find the right strategy for their specific pain condition and personal circumstances. The guidelines also provide recommendations for physical, psychosocial, and mind-body approaches. Although physicians may not have expertise in these areas, our colleagues working within our pain clinic do. By asking them for assistance and input, we can work as a team to put forth the best treatment plan for an individual.

**Dr. B: What is the most rewarding part of your job?**

**Dr. H:** There are lots of rewarding moments. I enjoy watching someone master a new coping strategy. It's even more fun if they thought the skill was "baloney", and mastering it turned out to be life changing. I love watching someone gain confidence that they can cope with the pain, or find joy and laughter again. Some of my favourite moments at work are watching a strong, connected health care team in action. I might see a patient who has attended Pain 101, start asking for referrals to get the missing tools in their toolbox. I might see a physician or a physiotherapist, who asks the right questions and brings in the right team members to meet that need and help someone who is struggling.

**Dr. B: What is the most difficult or distressing part of your job?**

**Dr. H:** Our patients have the strongest voice on their

health care team. We can provide education and advice, but they get to choose how they will manage their pain. The problem is, we all tend to get stuck in familiar habits, even when those habits aren't healthy (think smoking, emotional eating etc.). We often see patients who rely on a pain treatment, such as a medication or injection. Or it might be pushing through the pain in order to do things the way they used to. These patients are asking us for help. They want things to be different. They are having major pain flare-ups. They are in distress and their quality of life is the pits. We may see that their pain management strategies aren't working well. We may offer more helpful treatments or coping strategies. However, for lots of different reasons, sometimes people stay stuck and they are on the same pain / emotional distress roller coaster months later. It's hard to watch someone make choices that hurt them in the long run, especially when it's your job to help them learn new ways to cope with their pain.

**Dr. B: What keeps people stuck?**

**Dr. H:** There are many different reasons. Sometimes people are stuck because they don't know what to do. Once they learn what to do to manage their pain, they take that info and run with it. More often, people are stuck because change is HARD. It can be scary and unfamiliar. Sometimes people are stuck because they know they need to change but they don't want to change. They are grieving and angry and the emotions keep them stuck in a miserable place. Sometimes people are stuck because that one treatment or coping strategy makes them feel that they have

some control over a life (or a body) that feels out of control. This can be true even when that strategy doesn't help control their pain very well at all.

**Dr. B: What helps people to make changes when they are stuck?**

**Dr. H:** Well, we know what doesn't help – telling people they need to change! How many times have we heard that we should eat healthier, exercise more, stop smoking? It doesn't help. We can help by:

Listening. Describing what we hear and see:

“Your family is your priority, so you push through the pain to cook and clean and care for them. But by the time your family comes home for supper you are in agony and miserable to be around. You go to bed and don't get to spend any time with the people you love.”

Exploring what works and what doesn't.

How do they want things to be different? “It feels good to take care of them, but it hurts them too.” “I want to enjoy time with my family.”

Acknowledging that change is hard, and that you can start with small steps.

If we hear: “I can't change, that's who I am,” maybe start with, “It is hard to change our habits and routines, isn't it? I can see lots of opportunities to help you enjoy more quality time with your family. Let's look at a few. Is there one small change on that list that seems like a step in the right direction?”

Understanding that change is a gradual process, and we can support people in different ways at different stages.

**Dr. H: What do you do when pain medications or treatments don't seem to be working?**

**Dr. B:** Unfortunately, this is not an uncommon situation. Even at best, we can only expect pain medications to provide approximately 20-30% pain relief. When pain medications or medical treatments don't seem to be working, this is when I believe we need to ensure that patients are afforded all resources our pain clinic has to offer. Modern medicine usually is not able to conquer chronic pain. It is the combination of these services that we hope can provide meaningful improvements in quality of life.

**Dr. H: Managing chronic pain during COVID-19 has been particularly hard for patients who relied heavily on injections or infusions for pain relief. What has it been like trying to help these folks?**

**Dr. B:** As a physician who can help patients reduce their pain intensity by using injections, it has been frustrating to have to delay treatment to facilitate social distancing. When someone relies primarily on regular injections for pain relief, their pain relief depends on external factors they have no control over. In other words, injections rely on a special set of circumstances that may not always be there. For example, injection therapy depends on the availability of things like proper equipment, specific physicians, the clinic schedule and the avoidance of any side effects or complications. What

happens if equipment breaks down? Or the physician that provides the injection has an emergency and cancels? Or we get shut down by a pandemic? Pain relief from injection therapy becomes completely ineffective in situations like these.

One of the 'silver linings' of our inability to provide injections is that it allows us to promote some of the other types of pain therapies that our pain clinic can offer that can have tremendous value, especially in the face of a pandemic. Good pain care promotes self-management. In other words, learning strategies and lifestyle changes to manage pain and improve quality of life. Lately, I've been thinking that learning these techniques is like building up your own store of personal protective equipment (PPE) against the negative effects a pain condition can have.

**Dr. H:** I agree. Pain Management skills can be adapted to fit many different situations or circumstances. In fact, many of our patients report they are using the skills they have learned to help themselves and their loved one's cope with COVID-19.

**Dr. H: Any last words of wisdom?**

**Dr. B:** In the end, I believe the greatest success that our clinic can provide is if someone who suffers from pain does not have to come back for repeated clinic visits. This would indicate to me that we have been able to provide them with the tools that they can use on their own to continue enjoying a good quality of life.

## Accessing food

Whether you are struggling to get out of your home to get groceries, or are having challenges in affording food, below are some London-based resources that may be helpful. If you are not from the London area, we encourage you to go to [www.thehealthline.ca](http://www.thehealthline.ca) for resources in your community.

	Location	Contact Information
<b>Food Banks and Meal Programs</b>	<b>London &amp; Area Food Bank</b> * satellite locations throughout the city. - You can either access the Leathorne (main site) food bank OR one of the satellite locations, which are associated with your postal code	<b>519-659-4045</b> 926 Leathorne St.
	<b>Men's Mission</b>	<b>519-672-8500</b> 459 York St.
	<b>Salvation Army Centre of Hope</b>	<b>519-661-0343</b> 281 Wellington
	* please go to the following website for comprehensive listing of food banks and meal programs:	<a href="http://www.informationlondon.ca/31/Mental_Calendar_Food_Bank_List/">http://www.informationlondon.ca/31/Mental_Calendar_Food_Bank_List/</a>
<b>Grocery delivery services</b>	<b>Loblaws</b> - Minimum order of \$10 - 5 % service fee and \$ 4-10 delivery fee	<a href="http://www.loblaws.ca/delivery">www.loblaws.ca/delivery</a>
	<b>Walmart</b> -Free for orders more than \$50 -\$5-10 fee for orders less than \$50	<a href="http://www.walmart.ca/en/grocery">www.walmart.ca/en/grocery</a>
	<b>Metro</b>	<a href="http://www.metro.ca/en/online-grocery">www.metro.ca/en/online-grocery</a>
	<b>Food Fund</b> -Customizable organic produce boxes -Uses rescued and 'ugly' produce -Weekly delivery (can opt out at no cost as often as needed) -Also available in areas surrounding London -\$10-40 per box	<a href="http://www.foodfund.ca">www.foodfund.ca</a>
	<b>Shoppers Drug Mart</b> -In-store items delivered along with prescription medication	Call your home pharmacy for details

	<b>Grocerocity</b> - charges \$25.00 flat rate for first \$100.00 Charges 25% of grocery bill <a href="http://www.grocerocity.com">www.grocerocity.com</a> <b>519-701-1681</b>
	<b>London Volunteer Task Force</b> - student volunteer-run task force to help Provide no-contact drop-off grocery service <a href="http://www.londonvtf.ca">www.londonvtf.ca</a>
	<b>On the Move Organics</b> - organic grocery store delivery service <a href="http://www.onthemoveorganics.ca">www.onthemoveorganics.ca</a> <b>519-266-2667</b>
<b>Frozen food delivery</b>	<b>Meals On Wheels</b> - Adults with disabilities and adults older than 55 years - Financial assistance may be available <a href="http://www.mealsonwheelslondon.ca">www.mealsonwheelslondon.ca</a> <b>519-660-1430</b>
	<b>Heart to Home</b> - Geared to seniors - Special diet options - Less than \$10 per entrée <a href="http://www.hearttohome.ca">www.hearttohome.ca</a> <b>1-800-786-6113</b>
<b>Meal kit services</b>	<b>HelloFresh™</b> -2 or 4 servings meals -3 or 4 meals per week -\$60-160 per week <a href="http://www.hellofresh.ca">www.hellofresh.ca</a>
	<b>Chef's Plate™</b> -2 or 4 serving meals -2 to 4 meals per week -\$50-160 per week <a href="http://www.chefsplate.com">www.chefsplate.com</a>
	<b>HelloFresh™</b> 2 or 4 servings meals -3 or 4 meals per week -\$60-160 per week <a href="http://www.hellofresh.ca">www.hellofresh.ca</a>
	<b>GoodFood™</b> -2 or 4 serving meals -2 to 4 meals per week -\$50-150 per week <a href="http://www.makegoodfood.ca">www.makegoodfood.ca</a>

\* Due to the COVID-19 pandemic, pressures on grocery delivery services are extremely high. We encourage you to plan your grocery needs and place your orders in advance to ensure you will receive your food in a timely manner. If you have family or friends who may be able to bring food to you, this is a great way to make sure you have the essentials.

## Strategies to manage self-isolation

Isolating yourself is hard. It is lonely and stressful and disrupts your habits, routines and coping strategies. Anyone self-isolating must



work hard to stay happy and healthy. However, the coping strategies are similar to what we teach in our groups:

**Develop a daily routine.** Your routine may look very different than before. Having a schedule can help you feel like you have some control over a situation that feels very out of control. Include different tasks in your day such as work/chores, self-care and leisure. I'm finding new activities to replace the things I can't do. I use you tube videos to do yoga, karate and stretching exercises and free apps to practice French and piano.

**Limit access to news.** It's important to be informed, but set limits, such as 15 minutes of news per day, so you don't become too distressed and overwhelmed.

**Focus on what you can control.** What can we control?

- We can save lives by doing our part to stop the spread of COVID-19. We can protect our families, our friends and our communities.
- We can work on the coping strategies that help us to be healthier and manage our pain
  - deep breathing
  - meditating
  - pacing
  - exercising
  - taking medications as prescribed
  - eating healthy
  - maintaining regular sleeping habits.

**Look for joy every day.** Work at it. This is more important than ever. Do something fun every day. Play board games, watch funny movies, listen to music. I start and end my day by actively looking for something new that is pleasurable or joyful. What have I found this week? Mo Willems, our favourite children's book author, giving daily lunchtime drawing lessons. I hope you explore, and find something that gives you a few moments of joy.

**Find new ways to connect with others.** Feeling connected is important for our mental health. Make connecting part of your daily routine. There are lots of ways to do this:

- Call, text or email family and friends.
- Chat with your neighbour over the fence.
- Send someone a note or a treat.
- Use videoconferencing for a playdate for the kids, coffee with a friend, a family gathering, or to read a bedtime story to your grandchild.

Do you have a special hobby or skill? Do you know someone who is homeschooling their children? Offer to help by teaching a lesson by phone or videoconferencing.

**Monitor your mood.** This is a difficult time for everyone, and it is normal to experience some emotional distress (uncertainty, anxiety,



fear, low mood). If your distress or anxiety starts to feel overwhelming, take advantage of available supports and resources. Our goal is to prevent a bout of depression and / or catch symptoms early on.

[Bounce Back](#) provides phone and web-based counselling for anxiety and depression.

[Big White Wall](#) is web-based resource that provides discussion groups, 24/7 support staff, and courses on managing depression, anxiety (health anxiety, obsessive compulsive disorder, post-traumatic stress disorder, panic, social anxiety) and emotional distress (anger, grief, stress/worry). We encourage you to check it out.

For those of you who prefer books over websites, try:

- Mind Over Mood or The Reality Slap: Finding Peace & Fulfillment When Life Hurts.

Do you need a refresher on pain management strategies? Was your Pain 101 or Pain Management Group delayed by COVID-19? The [Toronto Academic Pain Management Institute](#) offers web-based learning modules on pain management strategies. Take a look. It is an excellent resource.

## **Suggested Resources and links**

### **Information on COVID-19 and self-isolation:**

Middlesex-London Health Unit: [www.healthunit.com/](http://www.healthunit.com/) or COVID-19 Information Line: 1-833-784-4397

### **Look for joy links**

#### Concerts:

- Together at Home series: [www.globalcitizen.org](http://www.globalcitizen.org)
- Budweiser Garden's: [www.budweisergardens.com/news/detail/live-streams-concerts-to-watch](http://www.budweisergardens.com/news/detail/live-streams-concerts-to-watch)
- Extensive list of live-stream concerts, updated regularly. Current list includes Metallica, Phish, Coachella, Jason Mraz, Rob Thomas, Linkin Park, Ben Gibbard and more... Michael Buble: daily concert at 5PM on his Facebook page
- Neil Young's weekly Fireside Sessions <https://neilyoungarchives.com>
- Arkells – daily livestream on Instagram

#### Performances:

- The Show Must Go On You Tube Channel
- Andrew Lloyd Webber musicals released Fridays at 8PM and available

for 48 hours National Theatre At Home You Tube Channel

- New performances released every Thursday (April 9: Jane Eyre, April 16: Treasure Island, April 23: Twelfth Night) Bolshoi Ballet [www.youtube.com/user/bolshoi](http://www.youtube.com/user/bolshoi)
- Streaming full ballet and opera performances Cirque Connect: [www.cirquedusoleil.com/cirqueconnect](http://www.cirquedusoleil.com/cirqueconnect)
- New material released every Friday (Performances, behind the scenes looks etc.)

## Books:

- Mind Over Mood (Greenburger & Padesky; e-book available through LPL) The Reality Slap: Finding Peace & Fulfillment When Life Hurts (Russ Harris).

## Living with worry

All of us worry sometimes, but situations that involve uncertainty and potentially negative outcomes such as the COVID-19 pandemic are particularly likely to fuel worry. Now, saying that worry is normal is not the same

thing as saying it's not a big deal. It can be incredibly difficult and painful. Below are strategies to that may help take the sting and power out of worry and help you feel less tangled up by it.

## For current, here and now problems – use problem-solving steps

There's a difference between worrying about a problem and actually solving it. Worry is usually a passive process that goes on in the mind, without action to address the problem itself. Problem-solving is an active strategy that allows you to achieve at least a partial solution. Psychologists Melisa Robichaud and Michel Dugas have written a great workbook\* to help people define and work through problems with a very clear set of steps.

**Define the problem:** in specific, concrete, factual terms (no assumptions). It helps to write out your definition by describing:

- your current situation
- your desired situation
- and the obstacle between the two.

In other words, what's preventing you from attaining the desired situation? For example, "I am running low on savings, and need to pay my bills, but I don't have an income...".

**Formulate your goal(s):** What would a positive outcome look like for you? Your goals

should be concrete, specific and realistic. It can be good to identify short-term and long-term goals. One reason to formulate clear goals is so you will know you are making progress. Examples of goals include, "Obtain EI benefits...", "Get a full-time job...".

**Generate solutions:** To generate a wide range of options, brainstorm by writing down options without judging them. Generate as many solutions as you can, identify lots of types of options, and focus on solutions that are behaviours. Using the example of the person who has been laid off,

examples of varied solutions considered behavioural would be, “Apply for jobs/retrain in a number of different types of industries, in a number of locations,” or “Have my spouse help me practice job interview questions.”

**Make a decision:** Knowing there is no one perfect or right decision, ask yourself:

- Will this solution solve my problem?
- How much time and effort is involved?

- How will I feel if I choose this solution?
- What are the impacts of this solution in the short and long-term?

**Plan and carry out the solution and assess its effectiveness:** You might write out steps: “Set aside time to complete the EI application; set aside a time to look at the jobs boards; google ‘job opportunities during the pandemic’, etc.

Other workbooks may have somewhat different steps, but the main point is that sitting down and identifying solutions to achieve goals can help reduce worry. It’s easier to sleep, think, rest, and ‘let worry go’ when you know you’re trying to address the problem in a systematic way.

Open up, get present and do what matters: Another useful set of ideas for coping with worry during the pandemic comes from Dr. Russ Harris, one of the creators of Acceptance and Commitment Therapy (ACT). You may find his YouTube video, FACE COVID, to be helpful: [www.youtube.com/watch?v=BmvNCdpHUYM](http://www.youtube.com/watch?v=BmvNCdpHUYM)).

According to ACT, feelings, situations, and thoughts are constantly changing like the weather. Stormy weather is painful and difficult, but inevitable. ACT holds that stormy thoughts and feelings get worse when people judge themselves negatively for having them, struggle to eliminate them or let the thoughts and feelings make choices for them.

**Focus on what’s in your control**  
**Acknowledge your thoughts and feelings**  
**Come back into your body**  
**Engage in what you’re doing**  
**Committed action**  
**Opening up**  
**Values**  
**Identify resources**  
**Disinfect and distance**

Instead of getting swept up in or struggling against anxious thoughts and feelings, ACT encourages people to:

- acknowledge them
- allow and ‘make room for them’
- and see them as transient, feelings, ideas, or judgements we don’t have to buy or follow.

People are encouraged to allow stormy experiences to come and go, and to ‘mindfully’ bring their attention to what they are doing moment to moment. In this way, we get out of our heads, into our lives, and can do things that matter, one

step at a time. If you find FACE COVID to be a helpful framework, you can also explore other videos by Russ Harris on YouTube or at [www.ACTMindfully.com.au](http://www.ACTMindfully.com.au). His books include “The Happiness Trap”, “The Reality Slap”, and “The Confidence Gap”.

Additional resources:

Guide to Living with Worry During Uncertain Times [https://www.psychologytools.com/assets/covid-19/guide\\_to\\_living\\_with\\_worry\\_and\\_anxiety\\_amidst\\_global\\_uncertainty\\_en-us.pdf](https://www.psychologytools.com/assets/covid-19/guide_to_living_with_worry_and_anxiety_amidst_global_uncertainty_en-us.pdf)

\*Robichaud & Dugas, The Generalized Anxiety Workbook, New Harbinger, 2015  
[www.cci.health.wa.gov.au/Resources/Looking-After-Yourself/Worry-and-Rumination](http://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself/Worry-and-Rumination)

## Mental health information and supports

### Preventing and treating depression

What is depression?

Depression is very different from normal healthy feelings of sadness. When you become depressed, your emotional distress changes, becoming more frequent, intense and intrusive. These emotions start to have a detrimental effect on your day to day life. The

neurochemical “messaging” in your brain changes. You start to think and behave differently. Your body shows physical signs of depression. Depression can look different for each person, but here are some common symptoms:

- Prolonged sadness or feelings of emptiness
- Feelings of helplessness or hopelessness
- Feelings of guilt or worthlessness
- Anger, irritability, restlessness
- Difficulty concentrating
- Fatigue, loss of energy
- Changes in sleep patterns (too much or too little)
- Appetite changes (too much or too little)
- Chronic pain, headaches or stomach aches
- Loss of motivation or interest in activities
- Withdrawal from friends and family
- Thoughts of death or suicide

I’m not depressed. Am I?

That seems like a funny question. You would know if you were depressed, wouldn't you? Not necessarily. New patients in the Pain Management Clinic are asked by our

psychologist if they have been struggling with symptoms of depression. The most common



reply is, “No, I have chronic pain, but I’m not depressed.” However, when they are told the signs and symptoms of depression, many of those same people will reply, “Oh. Maybe I am depressed?!” How is this possible?

Depression symptoms tend to develop gradually. They sneak into your daily life without you being aware of it - until those symptoms seem normal. If you look at the list

### Why did I get depression?

Depression is not a sign of weakness.

Depression can happen to anyone in the right set of circumstances. Young or old, rich or poor, men or women, educated or not. Nobody is immune. There are many risk factors for depression such as; genetics, personality traits, life experiences, social connectedness, coping strategies, resources and current

### How do we treat depression?

It’s important to treat depression, sooner rather than later. Mild depression treatment is usually successful. Depression becomes harder to treat when it is severe, prolonged, or when you have had several bouts of depression over your lifetime. It’s important to understand that we can treat depression effectively, even when that depression is triggered by chronic pain. Depression may be treated with medication, psychotherapy (talking to a health care provider), or a combination of the two. We often suggest a combination of medication and therapy, as

### Interested in psychotherapy?

Although some psychotherapy programs are on hold due to COVID-19, there are several free web-based treatment resources available for those struggling with depression. Please see our resource list for more information. If

of symptoms, there is a lot of overlap between the physical symptoms of depression and chronic pain. When depression symptoms are new and mild, people often blame those symptoms on their pain. As a result, the early warning signs of depression in folks with chronic pain are often missed. Depression may not be diagnosed until it is more severe, and unfortunately, harder to treat.

stressors. You may have some of these risk factors and never had depression in the past. Suddenly a life stressor can trigger depression. Long-term stressors (e.g. chronic pain, COVID-19) are more likely to trigger depression, in part because these prolonged stressors wear us down physically, mentally and emotionally.

both approaches have certain advantages. For example, some antidepressant medications also help to reduce the severity of chronic pain. Medication and psychotherapy are equally effective in reducing the symptoms of depression in the short term, while psychotherapy often provides more long-term benefits and can help prevent the depression coming back in future. If you have any medication questions or you want to discuss whether antidepressant medication is right for you, please contact your family doctor.

you experience any suicidal thoughts, please contact REACH OUT crisis services at 519-433-2023 or [reachout247.ca](http://reachout247.ca)



Psychotherapy treats depression by identifying what triggers and maintains your depression symptoms and by helping you respond in new ways. The diagram on the next page shows some of the ways we think and behave differently when we are depressed. These changes make our depression worse. You can learn to interrupt

**Monitor your mood daily.** Remember, it's normal to experience some emotional distress (feeling overwhelmed, down, drained). To catch the warning signs of depression, ask yourself:

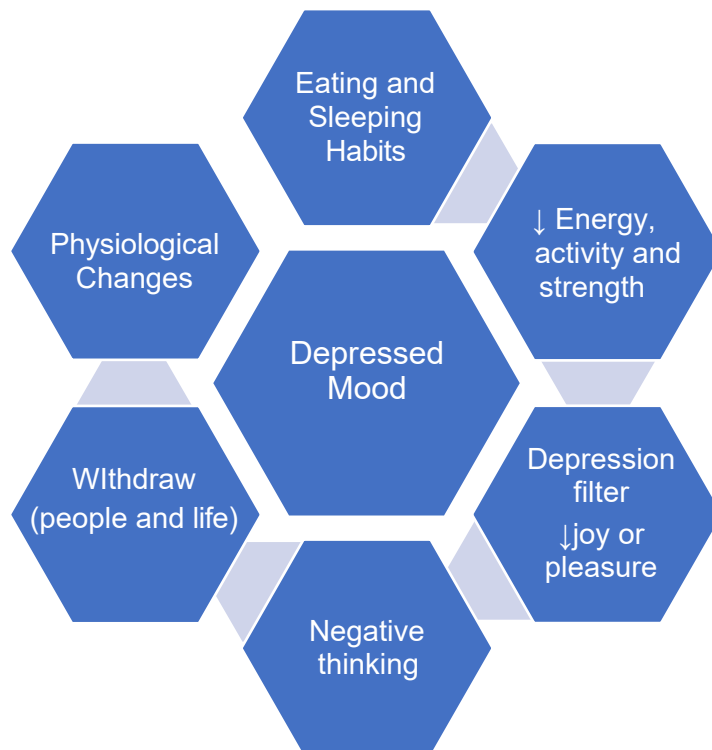
- Is this just a down day, or have I experienced several down days in a row?
- Am I having down moments, or does it last all day?
- Am I able to boost my mood by doing something I enjoy, or does the down mood take over?
- Do I still experience joy and pleasure when good things happen, or do I feel numb?

## How to help combat depression

**Develop a daily routine.** Have a regular bedtime / wake time (even if you didn't sleep), mealtimes and exercise or movement every day. These routines have a huge impact on our body and brain. It resets our body's clock, improves sleep quality and increases our energy levels and mood.

**Connect with others daily.** People who are depressed often isolate themselves, which makes depression worse. Call, text or email family and friends. Chat with your neighbour. Use videoconferencing to have coffee with a friend, dinner with family or to read a bedtime

this pattern by using some basic mood management strategies. That means that you can combat depression and change your brain biochemistry by making small lifestyle changes each day. Seem overwhelming? Start with one small change and try something new every week.



story to your grandchild. Try Big White Wall's support group.

**Small acts of kindness are a powerful mood booster for both the giver and the receiver.** Send someone a note or a treat. Tell someone that you are thinking of them. Praise your neighbours gardening efforts.

**Actively look for five positive or pleasurable events each day.** Do you remember the Oprah "gratitude journal" craze? She was on to something. When you

become depressed, you stop noticing positive details or events. Actively looking for five pleasurable things each day and enjoying them is a way to re-train your depressed brain. It may be very hard to do at first, but it gets easier over time. If you can't come up with five things, treat it like a scavenger hunt. Sit outside, or take a slow walk down the street. What do you see, hear, smell, feel? If we could look through a toddler's eyes - they would notice so many interesting things ...trees budding, the sight and smell of flowers, a bug, the feel of the sun or a breeze, a shiny car. Bringing a camera might help, as looking at the world through that lens changes your perspective.

**Schedule a pleasurable or joyful activity every day – whether you want to or not.**

One of the early signs of depression is losing interest and motivation to do activities you enjoy. As you stop doing enjoyable activities, your depression gets worse. The reverse is

true as well. Enjoyable activities help to turn depression around. If you can't do your favourite things because of pain or COVID-19, be creative and find new ways to engage that interest. For example, if you love baseball, but can't play or go to a game due to pain or COVID-19, find an excellent baseball biography or discover the best baseball movie of all time. Are you struggling to find happiness or joy? If you can invest a few minutes each day, Apps like Happify or JustOneMinute provide cues, tips and assignments to boost your mood. Can you commit an hour or two per week to your mental health? "The Science of Well-being" is a virtual course offered by Professor Laurie Santos, at Yale University, that anyone can audit for free, to learn the science of well-being and to engage in a series of personal challenges designed to increase your own happiness.

**Pain Management Program – Mental health resource list**

	<b>MENTAL HEALTH RESOURCES</b>	<b>Information/Contact</b>
<b>Anxiety Treatment Web Resources</b>	<b>Vancouveranxiety.com</b> <b>- Dr. Korol, Clinical Psychologist</b>	Excellent sessions on “Coping with Anxiety” & “Meditation for Busy Minds”. Highly recommended.





<p><b>Books About Depression, Anxiety, and Stress</b></p>	<p><b>Mind over Mood</b> – Dennis Greenberg and Christine Padesky</p> <p><b>How to be Miserable: 40 Things you do Already</b> – Randy Paterson (randypaterson.com)</p> <p><b>The Happiness Trap</b> – Russ Harris</p>	<p>An excellent book on strategies for managing depression, anxiety, anger etc.</p> <p>We can be our own worst enemy. An entertaining description of some common thoughts and habits that make us feel worse.</p> <p>Discusses ways to ‘unhook’ from painful thoughts and feelings and take behavioural steps toward a life you value.</p>
<p><b>Mental Health Web Education</b></p>	<p><b>Here To Help</b> (an excellent resource re: CBT for anxiety, depression, offered in many languages)</p>	<p><a href="http://www.heretohelp.bc.ca">http://www.heretohelp.bc.ca</a></p>
	<p><b>E Mental Health</b> Directory of mental health support services, information sheets on mental health, online screening tools, and information about community events in your area that are focused on mental health.</p>	<p><a href="http://www.ementalhealth.ca">www.ementalhealth.ca</a></p>
	<p><b>MindYourMind.ca</b> Available 24/7, providing information about mental health for youth ages 14-29, how to find help in your community, and interactive tools to help better manage your mental health.</p>	<p>www.mindyourmind.ca</p>
<p><b>Home-Based Mental Health Services</b></p>	<p><b>Bounce Back Ontario</b> A free guided self-help program for managing anxiety &amp; depression. Includes workbooks and telephone coaching sessions. Self-referral or physician referral.</p>	<p><a href="http://www.bouncebackontario.ca">www.bouncebackontario.ca</a> 1-866-345-0224</p>
	<p><b>iCBT</b> Free web-based counselling for anxiety, depression, and stress related to COVID-19. Self-referral.</p>	<p><a href="http://Ontario.ca/coronavirus">Ontario.ca/coronavirus</a> or <a href="http://MindBeacon">MindBeacon</a></p>
	<p><b>Big White Wall</b> Excellent self-guided mental health education and treatment resources, peer chat groups, and 24/7 support services.</p>	<p><a href="http://www.bigwhitewall.com">www.bigwhitewall.com</a></p>
	<p><b>CONNEX Ontario</b> Free and confidential telephone, email and web chat support for adults and youth looking for information on mental health, addictions, and problem gambling. Information on services throughout Ontario that offer mental health and addiction services are also available.</p>	<p>1-866-531-2600</p> <p><a href="http://www.connexontario.ca/Home/Contact">http://www.connexontario.ca/Home/Contact</a></p>
<p><b>Community Mental Health Services</b></p>	<p><b>Thames Valley Family Health Team</b> (depression, weight loss &amp; meditation groups)</p>	<p><a href="https://thamesvalleyfht.ca">https://thamesvalleyfht.ca</a></p>

	<b>Outpatient Mental Health Services, London Health Sciences Centre</b>	<a href="https://www.lhsc.on.ca/mental-health-care-program-adult/centralized-access-point-for-adult-ambulatory-mental-health-0">https://www.lhsc.on.ca/mental-health-care-program-adult/centralized-access-point-for-adult-ambulatory-mental-health-0</a>
	<b>Canadian Mental Health Association</b>	<a href="https://cmha.ca/">https://cmha.ca/</a> <b>(519) 434-9191</b>
	<b>Family Services Thames Valley</b> Counselling available to individuals, couples, and groups. Some subsidized sessions are available (call right at 9:00 am in order to access subsidized sessions).  * currently providing telephone counselling only.	<b>519-433-0183</b>
	<b>Daya Counselling Centre</b> Individual counselling available to individuals and families. Some subsidized sessions available  * currently providing telephone counselling only.	<b>519-434-0077</b>
	<b>Family Health Team</b> If your physician is a member of a Family Health Team, ask for a referral to the team social worker. There is no charge for services.  * providing telephone supports only.	<b>Contact your physician's office</b>
<b>Crisis Services</b>	<b>REACH OUT</b> Reach Out (Mental Health & Addictions Crisis Services). 24-hour crisis line for those with mental health and/or addictions concerns. Walk-in mental health services continue to be available. * please access the crisis line first, if possible, before coming in to walk-in mental health clinic	<a href="http://www.reachout247.ca">www.reachout247.ca</a> 519-433-2023 or 1-866-933-2023 Walk in service at 648 Huron St.
	<b>Kids Help Phone</b> National 24/7 services for youth, offering counselling, information and referrals by phone, text, mobile app, or through the website.	1-800-668-6868  <a href="http://www.kidshelpphone.ca">www.kidshelpphone.ca</a>
	<b>The Support Line</b> Volunteer-based telephone supports for those feeling lonely, sad, stressed, etc.	519-601-8055 1-844-360-8055
* This is only a partial list of community services that offer mental health supports during the COVID-19 pandemic. There are many other services available. Please note that most of these services will be temporarily provided by telephone or online. If you are already receiving assistance from an agency, please contact this agency to find out how their services		

have changed. For a complete listing of community and social services in London and the surrounding areas, you can access the “Help Yourself Through Hard Times” directory at [www.informationlondon.ca](http://www.informationlondon.ca)

## Crisis prevention

The uncertainty that COVID-19 has brought to so many of us has had a profound impact on many areas of our lives. Concerns about our own health, the health of those we care about, and worries about whether life will ever return to some semblance of normalcy are unnerving.

As we “open up” businesses and services in our province and country, some may feel a sense of relief, while others may feel increased anxiety. Safety and security are the foundation for our sense of mental well-being. When this foundation feels like it is crumbling, it is a very stressful – and even scary – time. Social isolation, quarantine and physical distancing has meant that many of us are physically separated from those we are closest with. For others, “stay at home orders” have meant more time is being spent with people who are key sources of stress.

Living with chronic pain has compounded the impact of COVID-19 in many of our patients’ lives. Not having access to your regular treatments, having reduced access to some medications, having surgeries postponed and engaging with health care providers in new ways are challenging transitions. Many of our patients also struggle with depression and anxiety, which can worsen when pain levels rise. If

anxieties and low mood go untreated, there is an increased risk for patients’ mental health to escalate into a crisis situation. When it comes to preventing mental health crises, a plan is very important. Take some time to understand what triggers your depression and/or anxiety, and what “red flags” exist for you that suggest your mental health is starting to decline. Do you notice that ongoing distance from your friends tends to trigger feelings of depression? Is wanting to sleep much of your day away a “red flag” that your depression may be worsening?

Crisis prevention planning is key to avoiding distress from escalating into a more serious crisis. Consider creating a crisis safety plan. You can find a safety plan guide at [eMentalHealth.ca](http://eMentalHealth.ca)

[www.ementalhealth.ca/Canada/Safety-Plan/index.php?m=article&ID=50966](http://www.ementalhealth.ca/Canada/Safety-Plan/index.php?m=article&ID=50966)

If you have been struggling to cope throughout COVID-19 – you are not alone. If you were initially coping fairly well with COVID-19 but, as the pandemic has continued, you have become more distressed – you are not alone. Help is available. Excellent confidential crisis resources, available 24/7, are noted below.

## Crisis Resources

- **Experiencing a crisis requiring immediate attention** **Call 9-1-1**
- **Experiencing a mental health crisis, are thinking about suicide, (or are worried about a loved one):**

**REACH OUT Mental Health & Addiction Crisis Services, 519-433-2023, 1-866-933-2023**  
(Elgin, Oxford, Middlesex/London)  
Walk-in Clinic available at **648 Huron St. London**

- **A young person in any type of crisis:**

**Kids Help Phone 1-800-668-6868**

**Text-based services 686868**

(Text "HOME" to connect with a crisis responder (or "PARLER" pour services en français))

- **An Indigenous person in crisis or distress:**

**Hope for Wellness Help Line 1-855-242-3310**

Crisis services are available in English, French, Cree, Ojibway or Inuktitut.

There is also a chat box available in English and French on their website.

- **Affected by abuse and/or sexual violence**

**ANOVA (London and surrounding area) 519-642-3000, 1-800-265-1576**

**ShelterSafe.ca** has an interactive map, identifying a domestic violence crisis lines.

**St. Joseph's Regional Sexual Assault and 519 646-6100**

**Domestic Violence Treatment Program ext. 64224**

## Exercising with chronic pain

Chronic pain occurs when pain persists even after the injury that caused the pain has healed. In short, the nervous system is sensitized. Exercise can help individuals with chronic pain to help manage their pain by maintaining and improving muscle strength and mobility. Now more than ever, it is important to spend some quality on your health and it is helpful to exercise and stay active during these unusual times.

Even though you may not be able to do your regular exercise routine due to COVID, like going to a gym, there are things you can do at home without much equipment to help your body and mind. One activity is incorporating a regular walking routine into your daily life. Walking is a type of cardiovascular exercise that can have many positive effects on your body and your mental health.

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## Benefits of Walking

A walking routine can help improve posture and flexibility, strength of the muscles in the lower extremity, bone strength and reduces bone density loss. It can also help with maintaining weight and improving cardiovascular endurance. Within the

context of chronic pain, aerobic exercises like walking helps with release of a hormone called endorphin which helps with pain-relief. Exercising can also have a positive impact on your mental health and self-esteem.

### Safety first

Before starting your walking program, please check the following:

- Check with your doctor before beginning this or any exercise program
- Walk with a friend, keep adequate physical/social distancing
- If you are walking alone, take your cell phone with you
- Do not push through pain, listen to your body, it's the best guide.

### What gear do I need?

You need the following items:

- Comfortable walking shoes.
- Comfortable clothing based on the weather.
- Cell phone if you are walking by yourself.
- A bottle of water. Stay hydrated.
- If you use a walker or cane or any other mobility aid, make sure you take it with you.

### What time of the day is best to walk?

The best time to exercise is mid-morning or early afternoon – or when any pain medication is at its peak effectiveness. Avoid exercising when your muscles are tensed or when you're fatigued.

### How long should I walk?

- According to physical activity guidelines, it is recommended to achieve up to 150 minutes of moderate to vigorous activity each week, or up to 22 minutes a day.
- It is recommended to start slowly and build up.
- Aim for 5 to 15 mins for the first day to a week. Once you can complete this easily, progress in 5-minute increments until you reach your desired time (eg. 30 minutes).

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## Warm up first

- Warming up loosens your muscles and prepares your heart for exercise.
- Do some gentle stretching for your arms and legs.

## Walking technique

- Try to stay upright, with shoulders relaxed. Avoid slouching forward.
- Let arms swing rhythmically and naturally at sides.
- Try to use smooth motion with a gentle steady pace.
- Try to engage the abdominal muscles by gently pulling in your tummy, but do not hold your breath.
- Walk briskly, but you should be able to comfortably talk when you walk. If you are gasping for breath it means you need to slow down or take a BREAK.

## What to expect after

It is normal to experience some temporary increase in pain or some soreness for a few hours post exercise or walking. Usually, it will settle down and you should be able to continue your usual activities of daily living.

***Inactivity can lead to stiff joints, decreased strength and mobility. These effects can worsen the symptoms of chronic pain. Engaging in a regular exercise routine can help manage the symptoms of chronic pain and thereby improve overall health.***

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## Medication information

Trivia Question	Trivia Response	Commentary
Due to pandemic restrictions, what was the maximum number of days' worth of medication Canadian pharmacies were dispensing?	30 days	Pharmacists have seen a tremendous surge in demand for medications as a result of the COVID-19 crisis. Pharmacies have to carefully manage their medication inventory to protect against the real risk of shortages during this critical period. Check out this video explanation from the Canadian Pharmacists Association for more info: <a href="http://www.youtube.com/watch?v=YP3-9y6ADBw&amp;feature=youtu.be">www.youtube.com/watch?v=YP3-9y6ADBw&amp;feature=youtu.be</a>
List common pain medications that mask/reduce fever.	Acetaminophen (Tylenol) Non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil), naproxen (Aleve), etc.	Many people take acetaminophen or NSAIDs as part of their pain management regimen. In some cases, acetaminophen is even used as part of a combination pain medication product such as Tylenol #3, Percocet/Oxycocet or Tramacet. If you take acetaminophen or NSAIDs and have been feeling unwell but haven't developed a fever, please recognize these drugs could actually be working to hide a fever. Check out the online COVID-19 self-assessment tool to learn more about coronavirus symptoms and for direction on what to do next if you have symptoms. <a href="https://covid-19.ontario.ca/self-assessment/">https://covid-19.ontario.ca/self-assessment/</a>
You may be at risk of an opioid overdose if you are experiencing a fever and are using this specific opioid medication for chronic pain management.	Fentanyl patch	When managing chronic pain, fentanyl is used as a transdermal patch. If you have a fever, the amount of fentanyl absorbed from the patch through the skin tissues can be increased and, because fentanyl is a potent opioid, an increase in fentanyl absorption can result in an unintentional opioid overdose (e.g., slowed/shallow breathing or a complete stop in breathing, pinpoint pupils, cold/clammy skin, blue lips/nails/skin, a limp body, or loss of consciousness).  If you use fentanyl patches to manage your chronic pain, it's a good idea to have a naloxone kit on hand should there ever be an opioid overdose emergency. Ask your community pharmacist about a naloxone kit if you don't already have one – these kits are paid for by the Ontario government so there is no out-of-pocket charge to the patient.
If you need to stay at home to avoid contracting the coronavirus but also require a medication supply, what service should you request from your community pharmacy?	Medication delivery	As you have probably already heard on the news (or may have heard multiple times on the news as there is nothing else on the news!), physical distancing is especially important for vulnerable Canadians, like seniors, people with chronic diseases and those who are at particular risk of coming into contact with the coronavirus. Increasing medication deliveries is one way to maintain physical distancing to protect people at risk while also protecting pharmacy staff.  Interesting fact: With the pandemic, pharmacy deliveries have increased an average of 85-150% per pharmacy, which translates to an increase of about 36 deliveries per day per pharmacy.

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<p>Who should you speak to if you have questions about a pain medication refill, but have no refills left on the prescription and aren't able to reach your doctor or nurse practitioner?</p>	<p>Community pharmacist</p>	<p>Pharmacists are the most accessible health care professionals in Canada. For this reason and because pharmacists are medication experts, the federal and provincial governments have made some temporary changes to the opioid prescribing rules in an effort to reduce the risk of medication interruptions during the pandemic when patients are unable to connect with their usual opioid prescribers. Effective April 8, 2020, pharmacists in Ontario are now authorized to renew or modify a prescription for opioids and other controlled substances, such as nabilone or benzodiazepines.</p> <p>Interesting fact: March was Pharmacy Awareness Month. If you wish to know more about what all a pharmacist can do or help with, check out this clip:</p> <p><a href="https://www.pharmacists.ca/pharmacy-in-canada/">https://www.pharmacists.ca/pharmacy-in-canada/</a></p>
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