

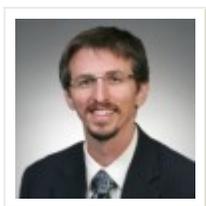
# The Comfort Ability: Addressing Pain Management Strategies in Pediatric Patients

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Managing chronic pain in the pediatric patient can be a challenge, not only for the patient, but for their caregivers. The introduction to biobehavioral and congestive behavioral pain management strategies can help patients cope with the everyday pain.

Dustin Wallace, PhD, started the Comfort Ability workshop, led by staff psychologists from Children's Mercy. This one day interactive workshop has been designed to teach new strategies to manage pain and improve day-to-day function.

Listen in to Dustin Wallace, PhD as he explains how the program emphasizes mind-body strategies for managing pain and pain-related stress, as well as individualized coping plans for improved pain management. Caregivers also gain an understanding of how to better support their child through their pain.



Featured Speaker:

## Dustin Wallace, PhD

Dustin Wallace, PhD, is a Clinical Psychologist within the Developmental and Behavioral Sciences Department at Children's Mercy Kansas City. Dr. Wallace earned his PhD at Seattle Pacific University and completed his Medical Psychology Fellowship at Mayo Clinic. Dr. Wallace has established the Comfort Ability program at Children's Mercy with the first session taking place on November 5, 2016.

Transcription:

Dr. Michael Smith (Host): Alright. Today's topic is "The Comfort Ability: Addressing Pain Management Strategies in Pediatric Patients". My guest is Dustin Wallace. He's a clinical psychologist within the Departmental and Behavioral Sciences Department at Children's Mercy Kansas City. Dr. Wallace, welcome to the show.

Dr. Dustin Wallace (Guest): Thanks. Glad to be here.

Dr. Mike: So, what are some of the main challenges that doctors and even the caregivers, the families--the challenges they face when dealing with chronic pain in a child?

Dr. Wallace: One of the biggest challenges in chronic pain is that it is a whole different animal from acute pain--the kind of pain that everybody is used to where you injure something and the pain is directly related to the injury itself; the pain continues to stop you from hurting it worse and help you take care of it; and then the pain goes away when that whatever issue is resolves or heals. Chronic pain is a whole different animal where the pain starts to take on a life of its own and really begins to live in the nerves and in your body in ways related to your body's changes and the nerve activity. And so, when families are trying to understand what's going on with their child who's in pain, they often start by looking at what's wrong: what's broken, what's not working properly, and doctors are doing the same. They're looking for blood clots; they're looking for injuries; they're looking for underlying infections that

haven't been treated and when those things aren't found, families and providers are at a loss and they're not sure what to do to help a child in pain. One of the biggest challenges is that chronic pain is so different from acute pain, people don't know how to recognize it as properly.

Dr. Mike: I like the way you said that. So, in chronic pain, it takes a life of its own outside of that initial injury or insult that caused the acute pain, right? So, that's an interesting way of looking at it. So, you have to imagine that if there are a lot of children out there who are suffering with chronic pain and they don't have a diagnosis . . .

Dr. Wallace: It's shocking how many children there are. Some of the population studies have shown anywhere from 5-15% of kids are having pain more than half of the days of the month. They're having recurrent pain over and over in the same areas; headaches, abdominal pain, pain in different parts of their body more than half of the days. If you think about it, even 5%, even the low one means one or two kids in every classroom is having pain more days than not.

Dr. Mike: That's amazing, yes. That's surprising. I would have never guessed it was that high. I mean, that really is amazing to hear. So, obviously, we have to approach this differently than we're currently approaching this, at least out in community settings, etc. So, I know that you guys at Children's Mercy are doing a lot with what's called "biobehavioral and cognitive" therapies. Tell us a little bit about that.

Dr. Wallace: So, typically when children and their families go down this path, they've seen doctor after doctor trying to understand what's going on with their pain and, eventually, they find themselves in a chronic pain clinic. Chronic pain clinics for kids typically are multidisciplinary programs with physicians, usually physicians with multiple specialties, psychologists, social workers, sometimes physical and occupational therapists, or even massage therapists, and nurses trained in this to really help families understand what the pain is and how they can manage it differently. And, in that, they learn biobehavioral skills. These are ways that you can actually use your mind and body to help treat some of the underlying causes of pain. These practice nerves, this fear of pain that keeps the nerves from getting normal stimulation, and how stress affects nerves throughout your body. Unfortunately, wait times for these clinics are huge. These clinics, as you just heard me say, have multiple different providers. When you get referred to one of those, it can take 2-6 months to even have your first appointment and start to learn about these things. So, learning bio behavioral strategies is something that can be done, even from the beginning. It can even help with acute pain, but it's often not provided until much later. The kind of strategies that might be included in this are like relaxation strategies. Not just to breathe to turn down the pain, although sometimes it can be distracting like that, but because over time, consistent, relaxed breathing, can actually help the nerves change so that they're not over-firing, so they're not working too much, which is one of the causes of chronic pain.

Dr. Mike: Right.

Dr. Wallace: Cognitive strategies relate to ways that you can change your thinking around the pain. A lot of times, when kids have chronic pain, even if it's not causing injury, they're worried about the pain, so they stop doing normal things with their friends. They stop doing normal attendance at school. They get distracted by it. And so, the cognitive strategies are ways to learn to put pain in its place--ways to make it not such a loud signal so that your brain can do other things, even while you're doing the appropriate treatment for pain over time.

Dr. Mike: So, this is interesting because we know that, in most cases, there is some sort of acute insult that begins the nerve damage, the muscle damage, the connective tissue damage, but then when the chronic pain develops, as you said, it takes kind of a mind of its own, it's its own entity now. And, I find what you just said was interesting to me. So, we know fear, right, chronic fear, chronic stress, Dr. Wallace, is associated with certain like stress hormones--cortisol, inflammatory cytokine release—so, in a sense, it's almost like the chronic pain has its own pathology versus that acute insult, so what you're doing here is you are addressing the underlying causes of chronic pain, right?

Dr. Wallace: You are.

Dr. Mike: In an acute setting, I might treat the connective tissue problem, and the chronic pain, I'm treating the fear, the stress that's driving these pathophysiological pathways that damage nerves and continue. So, that's an interesting connection and I like the way you said that. Now, in the report that I have here from Children's Mercy, it talks about a one-day workshop. What is that? How does that play in here?

Dr. Wallace: We are very excited to be launching a brand new one-day workshop called "The Comfort Ability" and this is brand new to Children's Mercy, but it was actually started out in Boston by a psychologist named Rachel Cokeley about three or four, maybe even five years ago, now, and this is a place where families can go much sooner than waiting for an appointment in a chronic pain clinic. This one-day workshop provides an introduction to these biobehavioral skills. It helps families to understand the difference between chronic pain and acute pain, and it helps kids and their parents to come up with plans for how to cope in the long run. It's appropriate for kids regardless of the cause of their pain, or even if doctors have fully understood what the cause of their pain is. If they're still being evaluated for illness or treated to rule things out, they can still learn a lot of very important things in this workshop to help cope and certainly kids who have already been through those kinds of evaluations and it's been determined the pain is the problem, this is a chronic pain problem, they can learn a lot from a workshop like this.

Dr. Mike: So, you mentioned families in there. That's, obviously, that the caregivers are obviously important to this whole process. So, the focus just isn't on the child with chronic pain, it's on the parents, the siblings. They play a role in all this, right?

Dr. Wallace: Yes. In fact, what we do is, for this workshop, when they come in, they're together. It's a child and a parent who come together and they're only together for about 15 minutes and then we split into the teams for the rest of the entire six-hour workshop. Kids get their own--and this is kids between ages 10 and 19--get their own programming where they are learning direct relaxation skills, guided imagery, strategies to boost their mood and to boost their motivation and their resilience. They're learning ways to be creative and use different kinds of coping and, at the same time, parents are learning ways to help their kids. To help their kids in ways that promote their kids' independent coping but also provide the right kind of structure and support as their children are getting back to activities and learning how to put these strategies into regular practice in their day.

Dr. Mike: So, now this one day workshop, again, is called "The Comfort Ability", correct? You haven't started this yet at Children's Mercy; it's based on a model out of Boston, is that correct?

Dr. Wallace: That's correct. Our first workshop is going to be on Saturday, November 5th, here in Kansas City.

Dr. Mike: And so, when you look at Boston, where this started, have they reported on some of the outcomes?

Dr. Wallace: Their outcomes are really exciting. Yes. They have shown that big changes in the parents. The parents who finish this workshop and report later say that they're less worried about their pain. Of course, every parent who has a child whose experiencing pain day in and day out is really worried about the cause of this and they're worried about what it's going to do to their child's life. As a result of this workshop, the parents are less worried; they're more confident in their child's functioning even with pain; they feel like they don't need to talk about pain as much. They can talk about other things with their child again, and pain just becomes less of the primary thing in their child's life. And the kids report the same. They're less worried about their pain, they're able to do more, and they're confident in their ability to do things like school, and hang out with friends, even while they're doing the treatment that will make their pain decrease in the long run.

Dr. Mike: Yes. You know, Dr. Wallace, conventional medicine, I think you would agree with me, we're really good at handling the acute diseases.

Dr. Wallace: The infections, the injuries, yes.

Dr. Mike: The infections, yes. We're really good at that and the technology and the knowledge base of our physicians and other practitioners is amazing, but where we do fall short, I think a lot of the time is in the after-affect. And that's kind of where chronic pain falls in. So, the work that you're doing, the work that Children's Mercy is doing, I've very excited for you with "The Comfort Ability" workshop. I think, I mean, this is the kind of stuff, when you really look at it, when it's all said and done, this is the kind of stuff that really gets kids, and even adults, back to a normal life. Back to a life that they're enjoying the way it should be. So, I want to thank you for all the work that you're doing. Good luck with "The Comfort Ability" workshop. I'm sure it's going to be very successful and I want to thank you for coming on this show today.

Dr. Wallace: Thank you, Dr. Mike.

Dr. Mike: You're welcome. You're listening to Transformational Pediatrics with Children's Mercy Kansas City. For more information, you go to [www.childrensmercy.org](http://www.childrensmercy.org). That's [www.childrensmercy.org](http://www.childrensmercy.org). I'm Dr. Mike Smith. Have a great day.