

LIVING BEYOND YOUR PAIN

Using Acceptance and Commitment Therapy to Ease Chronic Pain

JoAnne Dahl, Ph.D., and Tobias Lundgren, MS

VICTORY THROUGH SURRENDER

For those who live with chronic pain, what if finding the best method of pain control is not the answer? *Living Beyond Your Pain* tackles the subject of chronic pain using just this concept. The authors, Dr. JoAnne Dahl and Tobias Lundgren, MS, recommend accepting that your pain may never leave and deciding to live your life anyway, rather than waiting for a time when you are pain-free. "Pain is very much like quicksand," they say, "The more you fight against it, the more of your life it takes away. The harder you struggle, the more it pulls you down."

Based on Acceptance and Commitment Therapy (ACT, pronounced as one word), one of the most promising and fastest growing psychotherapies being practiced today, this book breaks with conventional notions of pain management. These "feel good" approaches — including the use of painkillers — all work to prevent painful sensations. The ACT approach, however, begins with the assumption that pain is a normal part of living that teaches us a lot about the state of our bodies and our minds. Attempts to avoid it often cause more harm than good, and by accepting and learning to live with pain, readers limit the control it exerts over them.

According to the authors the ACT approach to pain involves two fundamental concepts: "The first is that you must accept the aspects of your pain that you cannot change, including all of the difficult thoughts, feelings, and bodily sensations that come with it. The second is that this acceptance allows you to open a space where you can commit to acting in ways that make you feel vital and energized."

Mindfulness exercises play a significant role in helping to transform pain from a life-defining preoccupation to a simple experience, leaving those experiencing the pain the energy to make choices that will lead to greater happiness and contentment.

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Living Beyond Your Pain
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the PROBLEM with PAIN RELIEVERS

Excerpted from *Living
Beyond Your Pain*

Modern Western culture is characterized by a general feel-good orientation that teaches us to avoid pain, suffering, or any other undesirable feeling... Never before in human history have we had so many ways to alleviate, control, or numb pain. What is the result? The number of people who suffer from chronic pain has never been greater.

Approximately 50 percent of people on disability in the United States and Europe are unable to work due to chronic musculoskeletal pain.

Despite the fact that more people in pain use analgesic drugs (painkillers) than any other treatment method, there are surprisingly very few controlled studies showing their effectiveness.

The few studies that have been done only focused on short-term relief of temporary pain. The general recommendation from the review done by the U.S. Agency for Health Care Policy and Research (now the Agency for Healthcare Research and Quality) is that painkillers shouldn't be used in the long run for chronic pain (Bigos et al. 1994). At best, they're ineffective for long-term use, and at worst, they're addictive and have potentially damaging side effects. The review also points out that long-term use of painkillers may, in fact, cause more pain.

Some examples of the most common painkillers that have been evaluated are acetaminophen (brand names include Tylenol and Panadol), codeine, acetylsalicylic acid (more commonly known as aspirin), and dextropropoxyphene (brand names include Darvon and Doloxene).

About the Authors of *Living Beyond Your Pain*



JoAnne Dahl, Ph.D., is senior lecturer and associate professor of psychology at the University of Uppsala in Uppsala, Sweden. She is a prominent acceptance and commitment therapy (ACT) researcher who specializes in the use of ACT to treat chronic pain and epilepsy. She travels internationally to conduct ACT workshops and training sessions for professionals. She also continues to research the use of ACT to treat chronic pain and other conditions.

Tobias Lundgren, MS, is a licensed clinical psychologist with a specialization in cognitive behavioral therapy. He is active both as a clinician and researcher of behavior medicine. He has carried out applications of ACT in the clinical research areas of epilepsy, diabetes, and chronic pain. Lundgren works out of the Department of Psychology at the University of Uppsala in Uppsala, Sweden, but he has conducted clinical research with epilepsy clinics and organizations in Pune, India, and Johannesburg and Cape Town, South Africa. Besides clinical research, Tobias conducts educational workshops and clinical trainings and supervises staff members of treatment homes.

Q & A With JoAnne Dahl & Tobias Lundgren.

Q: What is the basic premise of ACT and how is it applied to the treatment of chronic pain?

A: Here are the basic premises of ACT applied to chronic pain.

1. Pain is normal, it is a vital sign and everyone has it.
2. You cannot deliberately get rid of your pain, (only temporarily) and when you try you cause yourself more suffering in the long run.
3. Pain and suffering are two different states of being.
4. You don't have to identify with your suffering and if you do you cause yourself more suffering.
5. Accepting your pain is a step toward ridding yourself of your suffering. It is like victory by surrender.
6. You can live a life you value, starting right now together with your pain.

In ACT suffering is seen to be much more than pain itself, it is seen also as the struggle with difficult emotions, thoughts, unpleasant memories, unwanted sensations. As if pain weren't enough, people think about their pain, worry about the pain, resent having pain, anticipate future pain and dread the thought of a life with pain.

Q: With the inefficacy of so many pain treatments, what do you suggest readers do to avoid or alleviate the depression and feelings of hopelessness that may arise from unsuccessfully treated chronic pain?

A: We know from large studies evaluating most all treatments of chronic pain show that these methods not only don't work for you but they don't work for most people and they probably even create more problems. This means that the hopelessness you feel is legitimate and clearly based in the reality of its non-workability. One of the reasons you may feel this hopelessness is because of the promise of it working and the image our society presents of the desirability of a pain-free life. If everything around you gives you the message that you shouldn't have to feel

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pain and if the commercials provide a quick-fix solution promising a pain free life, but you still are in pain, feeling hopelessness is pretty likely. Feeling hopeless about your unsuccessful attempts to get rid of your pain carries some critically important messages. **One**, is that your attempts to get rid of your pain may be exactly as hopeless as you have experienced them. But that means, that it is those attempts to get rid of the pain that are hopeless, NOT YOU!

The second is that all the energy you have put in trying to get rid of your pain has been taken away from doing the things you want to do in your life. Struggling in a hopeless battle against yourself rather than engaging in what you love to do is depressing. The third message is that there is an important underlying value in your hopelessness. You are not just trying to get rid of your pain. You want to get rid of your pain IN ORDER TO LIVE., the life that you want to live. You want your pain out of your way so that you can get back to the business of living. You wouldn't feel depressed or hopeless if you didn't want your life back. Your feelings of hopelessness are therefore critical in helping you back on the road to getting your life back. Don't try to avoid or alleviate them, let them speak to you and help you on your way. Taking that feeling seriously, may be the first step is getting back on track. The question is, have you suffered enough? If the answer is yes, it might be time to let go of that struggle and start living.

As physical pain and mental pain seem to fuel each other and increase the patient' s suffering, what is the best method of reconciling the two?

In an ACT way of thinking physical and mental pain, whether it is damaged tissue or a broken heart, are the inevitable events of living a vital life. The only way you can avoid either pain is to avoid living. No one wants to be afflicted with an illness or be abandoned by the one you love, but these are the risks you take in the game of life. You cant have one without the other. If you want to give yourself the opportunity to love and be loved you will need to risk rejection. If you want to get into good physical shape you will need to strain your muscles and risk tissue damage. ACT is not going to help you to avoid pain but it asks you to shift the way you deal with your personal experiences. Physical and mental pain are not things that can be solved, the way you might fix your car. Trying to solve these pain issues will undoubtedly create more suffering for you and probably those around you. Acceptance of "what is" be it an aching joint or a broken heart is the first step in lessening your suffering and getting your valued life back

What do you mean by *values illness*?

The concept of values illness means putting your valued life on hold in the service of reducing your pain. ACT is based on research showing that the more you try to get rid of your pain, the more you actually amplify it, get tangled into it and the more your valued life gets pushed aside. Loosing the life you want to live creates depression. You are caught in a struggle you cannot win, because it is against yourself. One of the reasons you got into it to start with is because the whole western society presents a picture of a successful life as one that is painless. And if you feel the slightest discomfort, there are shelves and shelves of quick fix solutions at the drug store. Drug companies are making multimillion fortunes based on this concept while pain is flourishing and suffering is at all time high. If you feel that you have had enough of this struggle and want to get back to living your life, ACT can help.

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Q & A With JoAnne Dahl. & Tobias Lundgren

Q: Treating chronic pain with ACT is more about dealing with the suffering associated with the pain than it is about dealing with the pain directly. What prompted the authors to break with tradition and approach pain treatment from this angle?

A: From our professional experience from rehabilitation medicine, feelings of hopelessness are abundant, not only among clients but among those dealing with client, whether they be the physicians, psychologists, vocational advisors, insurance companies. When it comes to chronic pain, western modern medicine just doesn't work and no one seems to know what to do. The medical model of "fixing" what is wrong just seems to make everything worse and the personal and societal costs are astronomic. Trying to fix something that cant be fixed seems to be the root of this problem.

ACT presents a totally different approach by suggesting accepting the pain that cannot be fixed and focusing on helping the person in pain to utilize resources to get back into the mainstream of life. Suffering is seen as caused more by the struggle with "what is" than by the actual pain itself. When pain is unavoidable, it is bearable, when it is avoided, it becomes unbearable. ACT views the pain itself as normal but the suffering as under voluntary control. Professionals suffer the same hopelessness as the clients by trying to solve that which is unsolvable. They can reduce their own suffering by working with the client towards reestablishing vital life, rather than reduce symptoms first.

Q: After establishing their values and making goals by which to live in accordance with those values, what is the best way for patients to avoid slipping back into a world of "dirty" pain and suffering?

A: This is a good place to practice the ACT skills learned from the book. As you put down the book and go on your way, all kinds of familiar "road blocks" will get in your way. The only way to avoid those obstacles is to stay home and avoid life. Experiencing those obstacles that want to pull you off course is a sign that you are on the right path! They wouldn't show up if you were sitting at home twiddling your thumbs. One of the best ways to lessen their effect on you is to start actively looking for them.

"Looking for mister discomfort" is an effective means of strengthening your skills. As you get back into your life, look for those thoughts and feelings that jump out at you and warn you of danger and try to pull you off course. Look at them with compassion and curiosity. They are a part of you and mostly just want to remind you of some past event that flopped. Accept them for what they are and invite them to go along for the ride. We are creatures of habit and falling into an old familiar behavior will undoubtedly happen. Accept that as well and give yourself time to examine this as a learning experience that will help you get back on track. Getting off track is a valuable experience. Choose your life hundreds of times a day!

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