

CHRONIC PAIN RECOVERY

A Practical Guide to
Putting Your Life Back Together
After Everything Has Fallen Apart

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WISE Ink
CREATIVE * PUBLISHING

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ISBN: 978-1-63489-063-2
eISBN: 978-1-63489-062-5

Library of Congress Catalog Number 2017938185

Printed in the United States of America
First Printing: 2017

21 20 19 18 17 5 4 3 2 1

Cover design by Emily Mahon



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Minneapolis, MN 55405
www.wiseinkpub.com

INTRODUCTION

I didn't really understand chronic pain until the day my spine ripped open.

I don't remember the month it happened, or the day of the week. All I remember is feeling as if someone had taken a meat hook and sliced it deep into my skin at the base of my spine, slowly hoisting me into the air until I was dangling above the ground, writhing like a fish in an open-air market.

Once I recovered from the shock of it, I remember crawling across the floor to an exercise ball in the corner of my living room. I hung myself over it and rocked slowly back and forth for a good long time, thinking to myself, "Something is very, very wrong here."

Eventually, I decided I needed some help. There was no sense going to the ER. I didn't need their scans to tell me something was damaged, and I already had the drugs and contacts they would have given me. No use hauling myself in there just to be told, "Rest, ice, and call your doctor. Bye, now!" Instead, I rolled my ball over to my cordless phone and began an endless game of upside-down medical phone tag to find a doctor with an actual solution in mind.

When I finally had an appointment scheduled, I hung up the phone, curled back around my ball, and wondered, "What

the hell am I supposed to do *now*?” The doctor couldn’t see me until the next day, so for the next twenty-eight hours it was just going to be me and my pain and this stupid exercise ball, which had suddenly become my best friend, on our own watching the clock.

I listened to the sound of children playing outside in my neighborhood, watched the dust motes dance in the sun streaming in through the window, and cried like a baby.

I had never felt so alone.

Before that day I had felt pain, of course. I have a few painful chronic health conditions, including spinal stenosis and degenerative disc disease. I herniated a number of disks in my lumbar spine in my twenties (a nasty affair each time), and during my time as a black belt in Tae Kwon Do, I was on the receiving end of some serious punches and kicks that left great blooming bruises on my body, followed by weeks of tenderness and aches.

My most memorable prior experience with pain had happened a year before I ripped my spine, when I struggled for hours to give birth my daughter. My neurologist at the time, an ancient man who really had no business making decisions about matters related to lady parts, decided that, in spite of the existing degeneration in my spine, I should push my daughter out instead of having a c-section.

Sadly, Dr. Grandpa made a bad call. As a result, I ended up laboring at length in a position called “the corkscrew” where one of my legs was wrapped around the other, like a vine climbing a tree, in an effort to ease my daughter’s passage into the world. In spite of this, my in-kinda-utero daughter was all, “No, I’m good here, ya’ll,” and decided to stay right where she was. After a good, long day of screwing (not the fun kind), I was left with a spine that resembled Pull and Peel licorice and

an emergency C-section prior to which I was wheeled into the operating room screaming so loudly they could hear me in the waiting room.

It was the torque from the corkscrew that did me in and led to the rip on that fateful day a year later. After months of painstaking physical therapy trying to gently shift my spine back into alignment, the lumbar discs finally ruptured, changing my life forever.

So there I was: unable to walk, unable to stand, unable to sit, unable to escape the bone-on-bone sensation I felt whenever I moved. For the first time I understood that **sometimes things are bad, and they *stay* bad, even if you try really hard to fix them.** That, I suppose, is the first lesson of chronic pain.

At my first surgical consult post-rip, I was hobbling past the holding pen where a bunch of surgeons were pouring over some sad sack's films. I heard one of them mutter, "This is a mess. There is nothing salvageable here." I joked to my husband, "Wouldn't it be funny if that guy turned out to be *my* surgeon and they were talking about *me*?"

He was, of course, and suddenly things were much less funny.

That surgeon was one of many who looked at my messy films and recommended a multi-level spinal fusion three months later—a fusion which healed and looked lovely in an X-ray, but *felt* . . . less lovely, a feeling that took nearly a decade to go away.

It was during that decade I began in earnest my quest to find answers to the question of chronic pain. I read books. I saw specialists. I explored a whole host of treatment options including physical therapy, surgery, electrical currents, acupuncture, massage, joint manipulation, positive thinking, magnets, pain pills, numbing creams, special cushions, hyp-

notherapy, and strong cocktails (with vodka, preferably.)

The whole time I was searching, I kept thinking, “Why am I so damn alone in this? **How come no one seems to know what to do here?**”

Because I knew *I wasn't alone*. An estimated 100 million Americans suffer from chronic pain, and a quarter of them say it is severe enough to limit their quality of life. In my recovery adventures I continually ran into other people in pain who seemed to be floundering, too.

I kept thinking there must be some sort of protocol I should be following, some sort of plan I should put in place to pick myself up off the ground where I had fallen. I quickly realized there was not. Once a doctor has written a prescription, operated on what can be operated on, or given you exercises to try, they usually run out of ideas. At that point, most of us are on our own, forced to cobble together some sort of game plan for the rest of our lives using whatever resources we can find.

Problem is, people in chronic pain are pretty awful at coming up with game plans.

Chronic pain is simply too big to wrap our painful heads around. Instead, we focus on accomplishing small tasks—where and when we are able—and live our lives as best we can.

That's what I did for many years. I repeated the things that seemed to work, I ditched the things that didn't, and I hunted, when I felt up to it, for new ideas to try. Then, after I had regained some semblance of my life, after I had *finally* recovered from the rip and the fusion needed to fix it . . . I blew some discs in my neck and had to repeat the whole process.

Joke was on me. Again.

THE SECOND TIME'S THE CHARM

After my second fusion, I wasn't sad. I was pissed off. I was still in pain, still alone, still puttering around the dark for solutions, so I decided to take a different approach to my recovery.

Instead of taking a bunch of ideas and putting them together to achieve my goal, I decided to do what I do professionally—start with a goal and develop a bunch of ideas to strategically support it.

Because, in addition to being a person with chronic pain, I am a strategic planner. I look at complex problems caused by interconnected, rapidly evolving factors and come up with plans to fix them, supported by equally interconnected, rapidly evolving strategies. This is a unique skill, apparently, shared by a whopping two percent of the population and just .08% of women. I guess I'm a unicorn or something.

I decided to build a framework for recovering chronic pain from the bottom up, one that worked for me and has worked for the people in pain whom I interviewed for this book. It starts with the goal, which I assume is the same for all of us: **to recover from chronic pain.**¹

That goal is supported by five focus areas, which address different components of pain recovery . . .

1. Body
2. Mind
3. Support Network
4. Lifestyle
5. Acceptance

¹ We will talk about how to refine this goal in the toolkit section at the end of this book.

Each of these areas has its own section within this book. These sections are further broken down into chapters that go in-depth into projects that can improve different aspects of your pain (all of which I have extensively researched and tested). Follow the lists of easy and inexpensive tasks included to get started on the projects you select. Many do not require leaving your house.

As you go through the book, it may be helpful to make a list of the projects you'd like to try in the future. The toolkit section at the end of the book will help you create a recovery plan with the projects you choose. Remember, you don't have to do everything listed in this book. These are simply suggestions. Choose whichever ones feel right for you.

This framework is designed to address all the components of chronic pain with as little reliance on medication as possible. This was a strategic choice I made, both in my own recovery and while writing this book, not because I am against pain medication but because those medications—specifically ones with opioids in them—may be much harder for you and I to secure in the future.

THE OPIOID WITCH HUNT

You may have heard reference to an epidemic of opioid and opiate abuse in the United States. It's an important situation for you to understand and for us to discuss, because it influenced how I structured this book and will likely affect your pain recovery plans, whether you take these drugs or not.

This epidemic initially began in the 1990s when a drug manufacturer took an older narcotic, renamed it OxyContin, and released it into the marketplace. The drug took off like

wildfire and spurred the creation of other, similar pain medications. While awesome initially, these drugs had some serious downsides, caused in part by being marketed dishonestly, being overprescribed, and being used without holistically addressing other aspects of patients' pain.

Unfortunately, many of these downsides were ignored because money was being made hand over fist. People in pain continued to rely upon the opioids, doctors continued to write prescriptions for them, and manufacturers continued to sell them while the problems ballooned out of control. Today . . .

- The total costs of prescription medications prescribed for pain in the United States are \$17.8 billion annually.
- Of the 9.4 million Americans who take opioids for pain, 2.1 million are estimated by the National Institute of Health to be addicted to them.
- According to the CDC, one American is killed every nineteen minutes due to painkiller overdoses. Overdoses of opioid prescription drugs now kill more people in the US than overdoses of heroin and cocaine combined.

Let me be perfectly clear, the opioid epidemic in the United States is not the fault of people in pain. It's the fault of greedy businesspeople, willing to overlook our health and safety in their quest to make a buck. Regardless, we are the ones now having to pay the price for their mistakes.

The Centers for Disease Control, politicians, and doctors alike have all issued a call to arms to radically change how we treat pain in the United States. Part of that plan is to reduce patients' reliance on opioids, and, in some cases, to transition them off opioids entirely. If your recovery strategy right now mainly consists of taking those medications, you need to find

new ways to address your pain before that happens.

Thankfully, this book is full of those ideas, because (unwittingly) I've already served as guinea pig to test drive an opioid-free approach to pain recovery. Opiates make me sicker than a vegan at a hot dog eating contest, so I was forced to pursue a more holistic, largely drug-free approach to pain recovery. That's what I describe in this book.

I am proof you *can* recover from chronic pain without opioids. It ain't easy, but it's possible.

MY FOUR BIG SECRETS

While I wouldn't consider myself totally "healed" (which I define as having NO pain) today, my pain *is* radically reduced, and my life is enormously improved. I am a lot happier, and I've been able to do things I had once written off as impossible, like write a book! The transformation has led me to four giant revelations about chronic pain recovery.

Want to hear them?

I know. I'm giving you the secrets right in the front of the book? Crazy, huh?

1. **There is no ONE thing to cure what ails you.** It's not that you haven't found the right solution, it's that you haven't found the right *combination* of solutions. Your chronic pain is a biological, psychological, and sociological phenomenon, and it's going to take strategies from all of those diverse areas to help you recover from it.
2. **YOU need to be in charge of the process.** Right now you're probably tired, stuck, and find the idea of being in charge of *anything* totally unrealistic, but it has to be this

way. You are best suited to manage your pain recovery because you know your pain better than anyone.

3. **Your recovery isn't going to follow a linear, predictable path.** Recovery isn't a destination, it's a process . . . a non-linear one. You won't work on one thing, fix it, and then move on to the next. Pain is a moving target. Some days you'll make progress. Some days you will not. Some of that progress may last the rest of your life. Some won't.
4. **Improvements in ANY area of your life can positively affect your recovery.** Think of your pain like a giant chunk of ice you're carrying around all the time. Since ice is always changing—melting and refreezing over time—other problems related to your pain have become frozen into and onto that block of ice. Even if the suggestions in this book don't help you magically dump your whole load of ice, they likely WILL help you chip off some of these smaller problems. Each time you do, it will lighten the total load you carry and help all of your ice melt more quickly.

I'll be honest with you—recovering from chronic pain is going to take some serious effort, and that may sound really unappealing right now. However, consider this: *being* in chronic pain is hard and *recovering* from chronic pain is hard. **Right now, you need to choose your hard.** You can either choose to keep feeling bad, wishing for someone to heal you, *or* you can take matters into your own hands and start making changes today.

The truth is, you already know how to do hard work. Anyone in chronic pain, whether you've been battling it for ten months or ten years, is a warrior who knows how to endure and push forward. Every day you likely wake up and think, "Ugh. I CAN

NOT do this anymore.” But then every day you *do*. You get out of bed and try to live your life with as much grace as you can muster. The fact you’re even reading this book tells me you’re not only a warrior, but a *brave* warrior who’s not afraid to step into the unknown.

DISCLAIMERS

[AKA “PLEASE DON’T SEND ME HATE MAIL OR SUE ME”]

- I’m not a doctor. Like, I don’t even pretend to be one in my imagination during a really good episode of *Grey’s Anatomy*. This book isn’t intended to be medical advice—merely suggestions to consider because they have been successfully used by other people in chronic pain. However, **you should run them by your doctor before you try them, too.**
- Unless noted, I have firsthand experience with everything recommended in this book, and then some . . . including non-doctor approved stuff like a Wiccan spell involving coal, spring water, and garlic.² I include my honest opinion on how many of these things *worked for me* (they may not work for you). I have not been paid to recommend anything mentioned in this book. (Although man, that would have been awesome. How cool would it be to be the Kim Kardashian of chronic pain and get paid to talk on social media about your seat cushions and heating pads?)
- If I included *everything* a person could use to recover from chronic pain, this would be a *Harry Potter*-sized book and

2 Not only did the spell not work, it made me stink so much no one wanted to be around me—a double whammy of awfulness.

no one would ever read it. I had to leave some things out and decided to mainly focus on the most widely used and well-researched ideas.³ Please forgive me if I left out something that has been very helpful to you. If it works for you and you love it, by all means, keep doing it!

Now, let's get started . . .

3 All of my research is included under the Notes section at the back of the book.