Q & A with Chronic Pain Recovery author, Jennifer Kane

1. What is your connection to this topic?

I've had chronic pain for more than a decade. Because it's been such a big part of my life—and being in recovery from it is something I work to maintain every single day—learning more about chronic pain has become a passion of mine. I have spent years researching trends, reading books and blog posts, participating in online forums, and fielding questions posed by other people in pain who have contacted me for advice.

I've also had the good fortune and privilege to be able to experiment with hundreds of pain recovery ideas over the years—both the traditional and the wacky—personally test driving their effectiveness.

Since there are so many people in pain who are in crisis, I felt it important to share the information I've learned, especially since people with chronic pain are often misunderstood and underserved by the medical community.¹

2. Why is this book important now?

Currently the United States is in the middle of an opioid epidemic that rivals the scope of the AIDS epidemic back in the 1980s.² According to the CDC, one American is killed every nineteen minutes due to painkiller overdoses.

As a first step in responding to it, many doctors have begun actively reducing their patients' dependence on opioid medications. Unfortunately, these doctors have little else to offer their patients in return, (especially since options like medical marijuana remain highly regulated and largely inaccessible). The result of this shift is thousands of people in pain are losing the only life raft keeping them afloat.

My hope is this book will provide support for those people (as well as those who do not take opioids) because it outlines a largely drug-free approach to chronic pain recovery. It IS possible to recover from chronic pain without opioids (I am a testament to that fact), but it takes a multifaceted, holistic

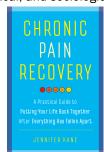
strategy like the one outlined in this book to make it happen.

3. Why are there five sections of ideas?

There is no ONE thing to cure chronic pain. When people are struggling, it's not because they haven't found the right idea to try, but because they haven't found the right *combination* of ideas.

In my research I've found that chronic pain is a complex biological, psychological, and sociological

phenomenon and it takes an equally diverse array of strategies to recover from it.³ That's why this book is divided into five focus areas addressing different components of pain recovery: body, mind, support network, lifestyle and acceptance.



Each of these areas has its own section within the book, which are further broken down into chapters that go in-depth into projects that can improve different aspects of chronic pain. Lists of easy and inexpensive tasks are included for each project to help readers get started on the projects they select.

4. How is this book different from others?

Most books about chronic pain are written by medical professionals. While the information they contain is undoubtedly helpful, oftentimes it can be overly theoretical or scientific, lacking practical suggestions for application.

For example, people with chronic pain often also struggle with depression and are frequently told to "see a therapist." But how does one actually do that when they can't drive a car, may have lost the job that pays for such appointments, or are surrounded by people who stigmatize mental illness and suggest they just "tough it out" instead?

I wanted to write a book for *those* people—a book that moved beyond the "why?" to the "what now?" This approach is reflected in the tone used throughout the book. I'm not trying to convince

¹ There are only 2,500 board-certified pain specialists in the United States—roughly one for every 25,000 patients with chronic pain. (Thernstrom, 2010)

² . Vox "How the opioid epidemic became America's worst drug crisis ever, in 15 maps and charts" $\mbox{(Lopez and Frontenson, 2017)}$

 $^{^{\}rm 3}$ The Institute for Chronic Pain, The Biopsychosocial Nature of Pain $^{\rm (2015)}$

people that I have all of the answers; I'm just trying to help them figure out the right questions to ask. My goal with this book was to give it to people straight, with a big dose of empathy and a splash of humor on the side.

5. What's with the toolkit?

While from the outset this book appears to consist of many lists of ideas, those lists are actually building blocks that represent all of the different aspects of pain recovery.

As readers go through the book they're invited to choose the building blocks that appeal to them most and then use the toolkit at the back of the book to assemble those blocks into a customized recovery game plan for themselves.

The toolkit walks readers through all of the steps in the planning process such as setting goals, choosing projects, implementing and evaluating those projects, and rewarding themselves for their efforts.

6. Some of the things in the first part are pretty basic. Doesn't everyone already know this stuff?

The audience may already know about some of the things suggested in this book (particularly in the section on physical health) but that doesn't necessarily mean they will *remember* those ideas in times of crisis, nor will they automatically know how to implement them with the resources they have on hand.

When you're in chronic pain, recalling which things have worked in the past, choosing new tactics to pursue, or making basic decisions about what to do next can all be extremely challenging.

That's why this book was designed to be simple, skimmable, and do-able, clearly spelling things out for an already overwhelmed audience. All of the ideas in the book were also chosen for their affordability and accessibility, so they would be practical for people who may be lacking money, mobility or motivation.

7. What do you hope will be the impact of this book?

My goal is to give hope to people who don't have a lot of it right now. I have been incredibly saddened over the past five years watching people succumb to their pain—either by suicide or from complications related to their use or overuse of opioid prescriptions.

When my pain was very bad, I remember feeling very hopeless, alone, and at the end of my rope. My hope in writing this book is to make sure other people don't feel that same way.

If this book can provide a lifeline that keeps even one person in pain from falling through the cracks or taking their own lives, this project will have been worth the effort.

8. So, does this mean your own pain is cured?

Right now I'm essentially in *recovery* from my chronic pain. My pain isn't gone forever. My medical conditions and injuries haven't magically gone away, but they are not controlling every moment of my life, either. I have good days and bad days—but currently the former outweigh the later.

To be honest, writing a book was a challenging endeavor for me physically, but I feel blessed to have been able to pull it off. (Even five years ago it would have been impossible.)

9. What was the most surprising thing you learned while researching this book?

There was one "person" mentioned over and over as a critical member of everyone's chronic pain support team: PETS! More so than supportive friends and family or a helpful doctor, people cited their furry friends as the key reason why they find the strength to make it through the day. This was an enlightening and moving realization for me and something I did not expect to hear heading into this project, (even though my own pets serve the same role in my life.)

10. What if I don't know anyone who has chronic pain? Why should I care about this book?

An estimated 100 million Americans suffer from chronic pain (and 20% of adults across the globe.)⁴ Although you may *think* you don't know anyone who has it, chances are you do.

It's important to remember that people in pain don't always talk about it publicly and don't always appear to be disabled. Also their pain might not be a stand-alone problem but a symptom of a painful medical condition they have, such as fibromyalgia, lupus, rheumatoid arthritis, migraines, endometriosis, or a side effect of treatments for others, like cancer. In other words, pain touches many lives in many ways. Chances are it touches the life of someone you know.

⁴ Science Daily (2015) BMC Public Health (2011)