

5 STEPS FOR MANAGING PAIN

Pain is a common invisible symptom, affecting approximately two-thirds of people with MS over their lifetime

QUICK FACTS

Nerve (Neuropathic) Pain is caused by damage to nerves and impaired nerve signals. Can include facial pain (trigeminal neuralgia), burning or shooting pain, spasms caused by spasticity, or the “MS Hug” – a tight banding sensation around the chest.

Musculoskeletal (Orthopedic) Pain involves muscles, bones, ligaments, and tendons. It can be caused by strain, an altered or uneven gait, incorrect use of mobility aids, or poor posture.

Pain can be **acute** (sudden onset & sporadic) or **chronic** (lasting more than 6 months and ranging from mild to severe and disabling).

STEP 1: RECOGNIZING YOUR PAIN

The first step to managing your pain is taking note of what you're experiencing.

- Where does it hurt?
- What type(s) of pain are you experiencing? How would you describe how the pain feels?
- How severe is your pain? Does the severity wax and wane, or is it constant?
- Is the pain new, or have you had it for more than a month? When does it occur? How often?
- Is there anything that makes the pain worse or better?
- What have you done to try to relieve the pain?

STEP 2: ADVOCATING FOR YOURSELF

Describe your pain to your MS provider as clearly as you can and emphasize that it's a priority for you. For example:

- “I have constant pain in my neck and back that interferes with daily activities”
- “This stabbing pain makes it hard for me to speak, bite, or chew.”
- “My skin feels like it’s on fire – it hurts to put on clothing or get under the covers at night.”
- “Whenever I tuck my chin, I get this electrical sensation down the back of my neck.”
- “At night, I get excruciating spasms in my feet and legs when they rub against the sheets.”

STEP 3: WORKING WITH THE HEALTHCARE PROFESSIONALS WHO CAN HELP YOU

Your **MS provider** can help determine whether your pain is neuropathic or musculoskeletal.

- Neuropathic pain is best managed by a combination of medication (anti-seizure medications are most effective for treating this type of pain; standard pain treatments are generally ineffective), cognitive behavior therapy, mindfulness training, and relaxation training.
- Musculoskeletal pain is best managed with rehabilitation.
- Painful spasms are best managed by spasticity medications and botulinum toxin injections into specific small muscles.

Your **MS Provider** can recommend optimal medications for neuropathic pain.

A **Physical Therapist** can evaluate your gait, and other body mechanics, use of mobility aids, and posture, and recommend exercises and other modalities to relieve your musculoskeletal pain.

A **Mental Health Professional** can provide cognitive behavior therapy, mindfulness training, and stress management to help you manage your pain.

STEP 4: HELPING OTHERS UNDERSTAND YOUR PAIN

Your pain is invisible to others. You can help them understand what you are feeling and how they can be most helpful.

- “Being held or squeezed can feel painful to me. Your smile does more for me than a hug.”
- “I would love to play pickleball with you. I’m hoping that physical therapy will help with the pain I am having so, I can be back playing soon.”
- “Thanks for the invitation, but I need a raincheck please. The pain in my face makes it difficult to eat or talk comfortably.”
- “I’m sorry for waking you so often. These spasms in my legs are incredibly painful and out of my control. My doctor is recommending a new medication for me to try that I hope will make this better for both of us.”

STEP 5: TAPPING HELPFUL RESOURCES

Can Do MS has a variety of helpful programs and resources when it comes to symptom management. Check out our website to explore our offerings and learn more: [CanDo-MS.org](https://www.CanDo-MS.org)

