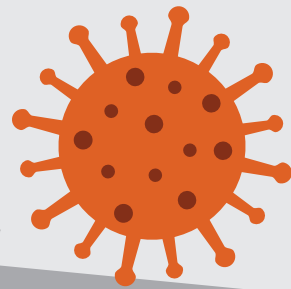


TAKE CONTROL OF PAIN DURING COVID-19



THE ACTION PLAN CHRONIC PAIN PATIENTS NEED NOW

KNOW THE STATS & FACTS

- A US Pain Foundation 2020 survey found that chronic pain patients:
 - are experiencing increased pain
 - are facing barriers to treatment – including coverage for telemedicine and prescribed medications
 - consider themselves to be at high risk for serious COVID-19.
- Pain-related conditions that may put people at higher risk of COVID-19 infection and complications include:
 - *inflammatory disorders* such as rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis, systemic lupus erythematosus, inflammatory bowel disease, Sjogren’s syndrome
 - *connective tissues diseases* such as systemic sclerosis and vasculitis
 - *neurological disorders* such as multiple sclerosis
- At-Risk individuals should:
 - wash their hands often.
 - have adequate supplies on hand.
 - keep space between themselves and others, especially in public.
 - avoid crowds and non-essential travel.



COMPARE YOUR SYMPTOMS



NEW CHEST PAIN

Chest pain can occur as a result of an anxiety disorder (eg, a panic attack), a cardiac event (eg, a heart attack), or a non-cardiac event. Note that chest pain is a rare symptom of COVID-19 and usually does not occur as the sole symptom. Shortness of breath and/or signs of upper respiratory infection (eg, coughing, phlegm) may also be present, but this is not always the case.

No matter the cause, any type of chest pain warrants immediate medical attention.

NEW/ENHANCED MUSCLE OR JOINT PAIN

Chronic muscle and joint pain may be exacerbated during times of increased stress, such as in the pandemic environment. COVID-19-related muscle pain is more likely to occur in multiple muscles and to be associated with fever, chills, insomnia, headache, and sore throat.

OTHER CONCERNING SYMPTOMS?

Use the CDC self-checker at www.cdc.gov/coronavirus

BUST MEDICATION MYTHS

MYTH: Stopping my routine medications will prevent me from getting COVID-19.

Reality: Most medications should not be abruptly discontinued as this can exacerbate systemic disease. If you are concerned about obtaining medications or managing pain flares, ask your doctor or pharmacy about home delivery and alternative medication choices.

MYTH: I should discontinue my immunosuppressant drugs.

Reality: The American College of Rheumatology (ACR) has issued clinical guidance that individuals with stable rheumatic/immune disease can continue taking hydroxychloroquine or chloroquine, sulfasalazine, methotrexate, leflunomide,

other immunosuppressants (eg, tacrolimus, cyclosporine, mycophenolate mofetil, azathioprine), biologics (including infusions), JAK inhibitors, and non-steroidal anti-inflammatory drugs (NSAIDs). If you have been exposed to or contracted COVID-19, your doctor may pause these treatments.

MYTH: If I have coronavirus symptoms or contract COVID-19, I should not use NSAIDs to reduce fever or pain.

Reality: Some have suggested that NSAIDs can mask fever and delay a COVID-19 diagnosis. Although all anti-inflammatories (and acetaminophen) are expected to reduce fever, the FDA and WHO have concluded that there is no evidence that NSAIDs worsen

COVID-19 symptoms or impact survival. If you rely on these medications for pain, ask your doctor about use and alternative options. If you do contract the virus and have severe respiratory symptoms, ACR recommends ceasing NSAIDs.

MYTH: Steroid injections put me at risk for infection or complications.

Reality: This can be true, as corticosteroids may inhibit immune response, especially at higher doses. Most medical organizations have recommended that corticosteroids not be injected into joints or soft tissues during the pandemic. If you rely on steroids for back or arthritis pain, discuss risks and temporary alternatives with your pain specialist.



MAXIMIZE TELEMEDICINE

AVOID THE RISK of contracting the coronavirus by using video and phone calls to ask your health-related questions.

USE VIRTUAL VISITS for all types of care, including regular communication with your doctor or nurse practitioner, clinical pharmacy evaluations to go over medications, specialty evaluations, guided physical therapy sessions, and telepsychiatry.

CHECK WITH YOUR INSURANCE provider to confirm coverage. Due to the declared public health emergency, many companies have broadened coverage.

PREEMPT PAIN FLARES

- **STICK TO YOUR MEDICATION REGIMEN:** Avoid hoarding or saving pills “for later” and avoid using muscle relaxers or antidepressants as “chill-out” pills.
- **MANAGE STRESS LEVELS AND MENTAL HEALTH:** Stress reduction and behavioral treatments are key to soothing the central nervous system and pain response. Find time to take mental health breaks daily (see ideas at right).
- **TRY HOME CARE DEVICES:** TENS units, vibration devices (eg, Vibra-cool), analgesic balms or rubs (eg, Biofreeze), heat or ice packs, digital light therapy, and other digital gear can deliver drug-free pain relief.
- **MAINTAIN PHYSICAL ACTIVITY:** Home-based exercise programs are available virtually and can continue under the guidance of your doctor. Wear comfortable clothes, consider home massage to alleviate flares, and build in a variety of exercises. Consider doing strength and balance activities to stay strong and reduce the risk of falling. Seek medical advice if you experience chest pain, dizziness, or sickness during exercise.
- **KEEP YOUR DIET IN CHECK:** High-fiber foods, such as whole grains, legumes, nuts, and seeds, as well as omega-3 fats, can help lower inflammation. It’s also important to avoid weight gain, which can exacerbate pain.

TAKE MENTAL HEALTH BREAKS

- **MOVE:** If you have reduced mobility, stepping outside to get fresh air can reduce anxiety or negative thinking.
- **BREATHE:** Practice deep breathing and relaxation exercises. Consider meditation, music therapy, and virtual reality programs to promote mindfulness.
- **CONNECT:** Chronic pain and illness can be debilitating and cause significant social isolation by itself. Find resources, support groups, and individuals to connect with virtually during this crisis to help regulate your mood and pain symptoms. Try a gratitude journal to divert negative thoughts.
- **CREATE:** Start or strengthen an artistic hobby to distract from ongoing pain.
- **LEARN:** Behavioral strategies to reduce mind-body stress, such as Cognitive Behavioral Therapy.

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Practical Pain Management (PPM)
Remedy Health Media, LLC
Spring 2020

SOURCES: US Pain Foundation, Chronic Pain & Covid-19 Survey Report, April 15, 2020. / CDC, Testing for COVID-19 webpage. Accessed May 1, 2020. / Yang W, et al. Clinical characteristics and imaging manifestations of the 2019 novel coronavirus disease (COVID-19): a multi-center study in Wenzhou city, Zhejiang, China. *J Infection*. 2020;80(4):388-393. / Mikuls TR, et al. ACR guidance for the management of adult patients with rheumatic disease during the COVID-19 pandemic. *Arthritis Rheumatol*. ePub Apr. 29, 2020.

