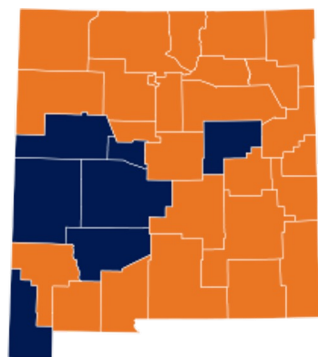


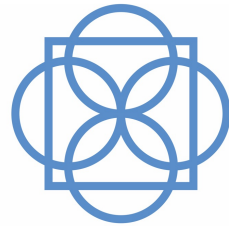
Opioid Remediation Collaborative (ORC) of New Mexico



Non-Pharmacologic
Treatment of Chronic Pain

Presented By:

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NEW MEXICO
**CENTER FOR
PAIN & WELLNESS**

Disclosures

I have no conflicts of interest to disclose.

Non-Pharmacologic Treatment of Chronic Pain

Objectives

- Describe evidence based, non-pharmacologic approaches to managing chronic pain.



Non-Pharmacologic Treatment of Chronic Pain

Agenda:

Description	Time Allotted
Introduction	~2 mins
Physical Therapies	~2 mins
Psychological Interventions	~2 mins
Complementary Therapies	~2 mins
Interventional Procedures	~16 mins
Regenerative Medicine	~4 mins
Conclusion	~2 mins
	~30 mins

Non-Pharmacologic Treatment of Chronic Pain

Introduction:

Many patients have a long history of opioid use, and/or struggle to access providers and specialists to effectively treat their conditions. They are often reluctant to try non-pharmacological treatments for fear of their pain worsening. Taking time to develop a relationship and establish trust between the provider and patient greatly improves this dynamic and opens the door to a broader range of treatment options to reduce the dependency on opioids.



Non-Pharmacologic Treatment of Chronic Pain



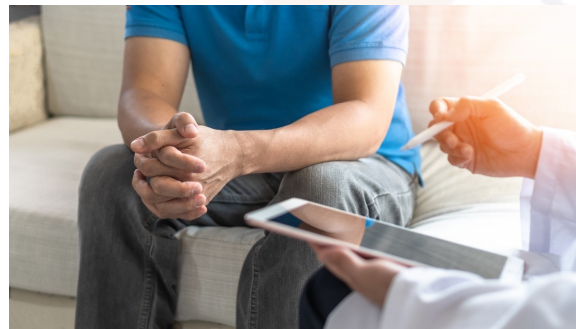
Physical Therapies:

- Physical therapies may improve function and reduce pain intensity and includes:
 - Stretching, strengthening, posture correction
 - Aerobic activity, yoga, tai chi, aquatic therapy



Psychological Interventions:

- There is a complex interplay between physical and psychological factors for individuals experiencing chronic pain. Psychiatry offers valuable insights and interventions to address the emotional, cognitive, and behavioral dimensions of pain, to assess and manage conditions such as depression, bipolar disorder, anxiety, panic attacks, grief, and post-traumatic stress disorder (PTSD), which often coexist with chronic pain. This is done through psychotherapy, cognitive-behavioral therapy (CBT), and medication management.



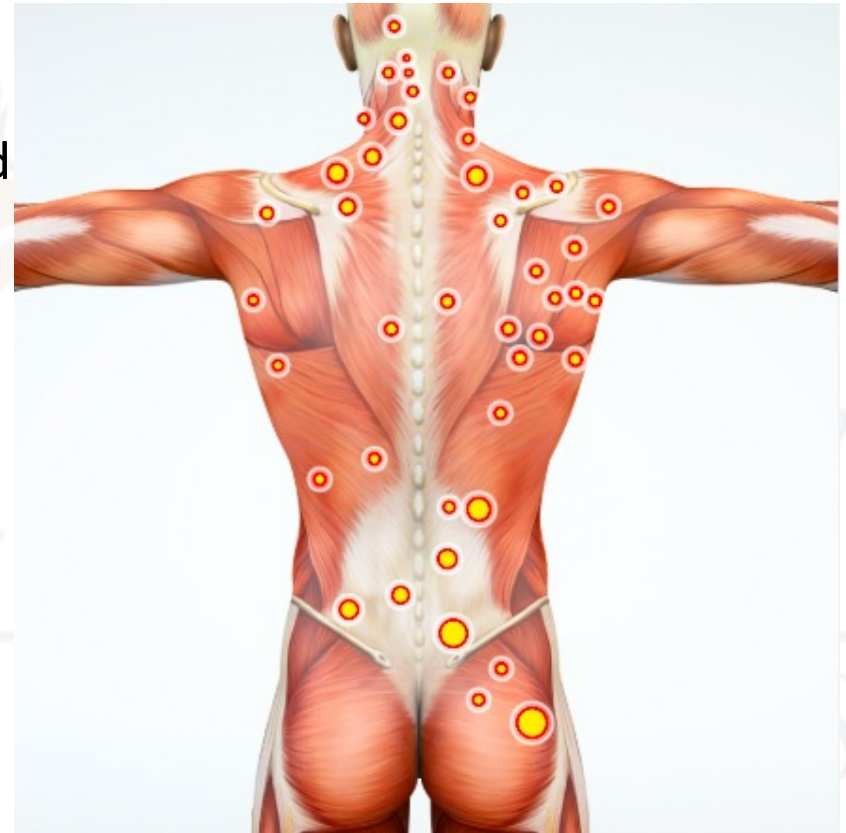
Complementary Therapies:

- **Diet and Nutrition:**
 - Anti-inflammatory diets, weight management
- **Massage Therapy:**
 - Muscle relaxation and circulation benefits



Interventional Procedures:

- **Trigger Point Injections**
 - **Description:** Insertion of a needle and possibly anesthetic, steroids, and/or local anti-inflammatory agents directly into hyperirritative foci in skeletal muscle (trigger points) to relieve muscle tension and reduce referred pain.
 - **Used to Treat:** Myofascial pain syndrome as a bridging therapy or as a single therapeutic maneuver



Interventional Procedures:

- **Joint Injections**

- **Description:** Joint injections involve delivering medication—typically corticosteroids, hyaluronic acid (viscosupplementation), or other agents directly into a joint space to reduce inflammation, relieve pain, improve mobility.
- **Used to Treat:** Osteoarthritis, Rheumatoid Arthritis, and Bursitis



Interventional Procedures:

- **Therapeutic Botox (migraines, spasticity, cervical dystonia)**
 - **Description:** Injection of botox (onabotulinumtoxinA) temporarily blocks nerve signals to muscles, and reduces abnormal muscle activity and pain.
 - **Used to Treat:** migraines, spasticity, cervical dystonia, TMJ



Interventional Procedures:

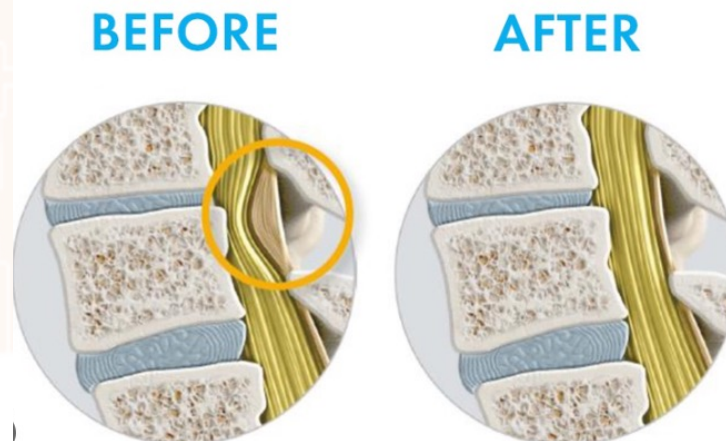
- **Epidural Steroid Injections**

- **Description:** Injection of a solution containing corticosteroids and/or anesthetic into the epidural space around the spinal cord or nerve roots to reduce inflammation and alleviate pain.
- **Used to Treat:** Spinal Stenosis with Neurogenic Claudication, Cervical/Thoracic/Lumbosacral Radiculopathy, Post-Laminectomy Syndrome, Herpes Zoster Associated Pain



Interventional Procedures:

- **Minimally Invasive Lumbar Decompression (MILD)**
 - **Description:** A small portion of bone and thickened ligament is debulked to relieve pressure on the spinal nerves to improve mobility and reduce pain.
 - **Used to Treat:** Lumbar Spinal Stenosis



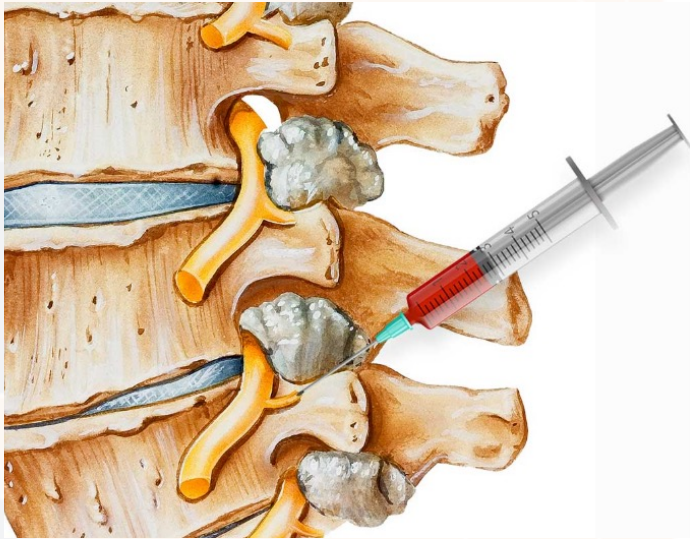
Interventional Procedures:

- **Interspinous Process (ISP) Spacers**

- **Description:** A small device is implanted between adjacent spinous processes to stabilize and decompress the spinal level and relieve pressure on the spinal nerves.
- **Used to Treat:** Thoracic/Lumbar Spinal Stenosis



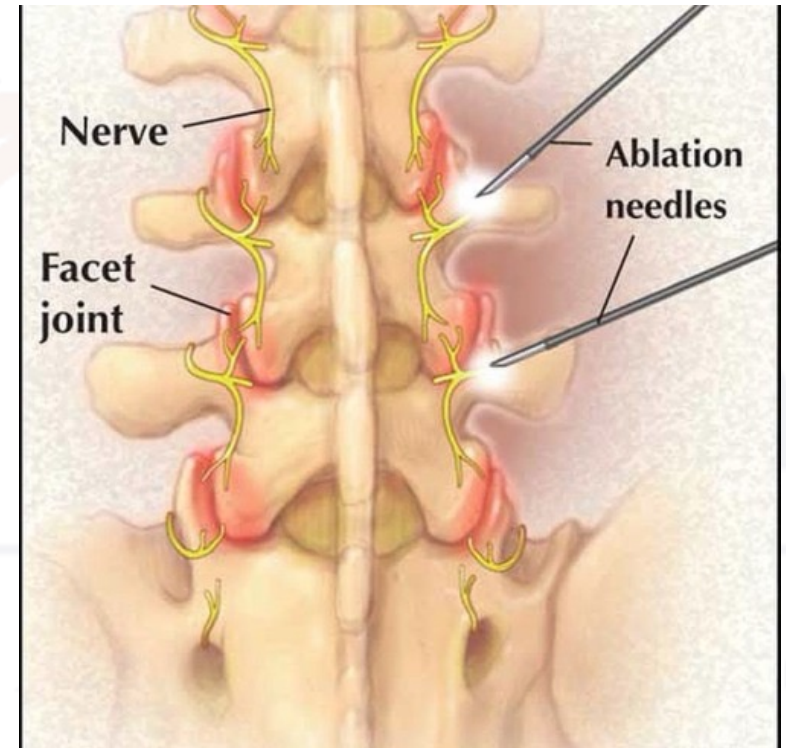
Interventional Procedures:



- **Medial Branch Block (MBB)**
 - **Description:** Injection of a local anesthetic onto the medial branch/innervating nerves, which transmit pain from the facet joints in the spine. Diagnostic injections are used to confirm whether the targeted facet joints are the source of back or neck pain. Therapeutic injections are intended to provide temporary relief; ablation provides longer relief.
 - **Used to Treat:** Junctional Pain from Spine Fusion; Cervical/Thoracic/Lumbosacral Spondylosis

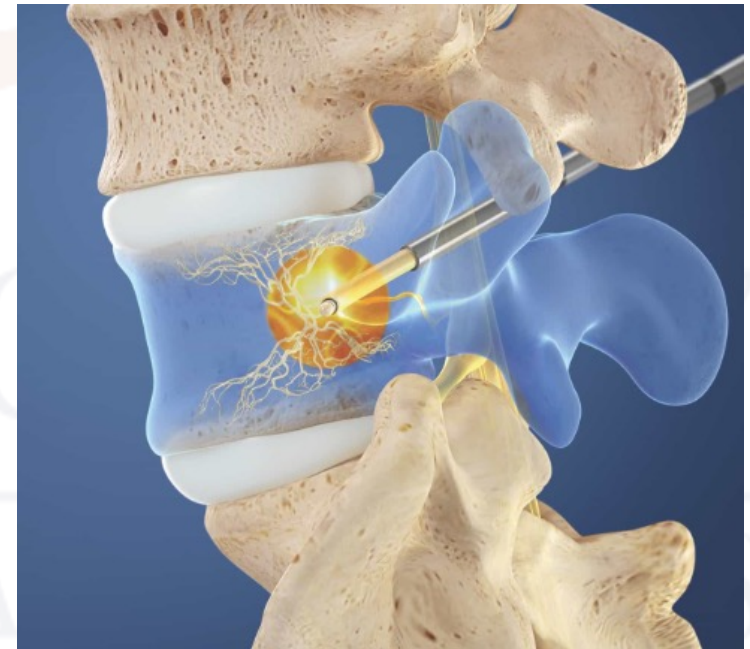
Interventional Procedures:

- **Radio Frequency Ablation (RFA)**
 - **Description:** Uses heat generated by radio waves to target and disable specific nerves transmitting pain, typically from the facet joints. It can provide long-lasting relief (≥ 6 months) for patients with chronic back or neck pain
 - **Used to Treat:** Junctional Pain from Spine Fusion; Spine Spondylosis

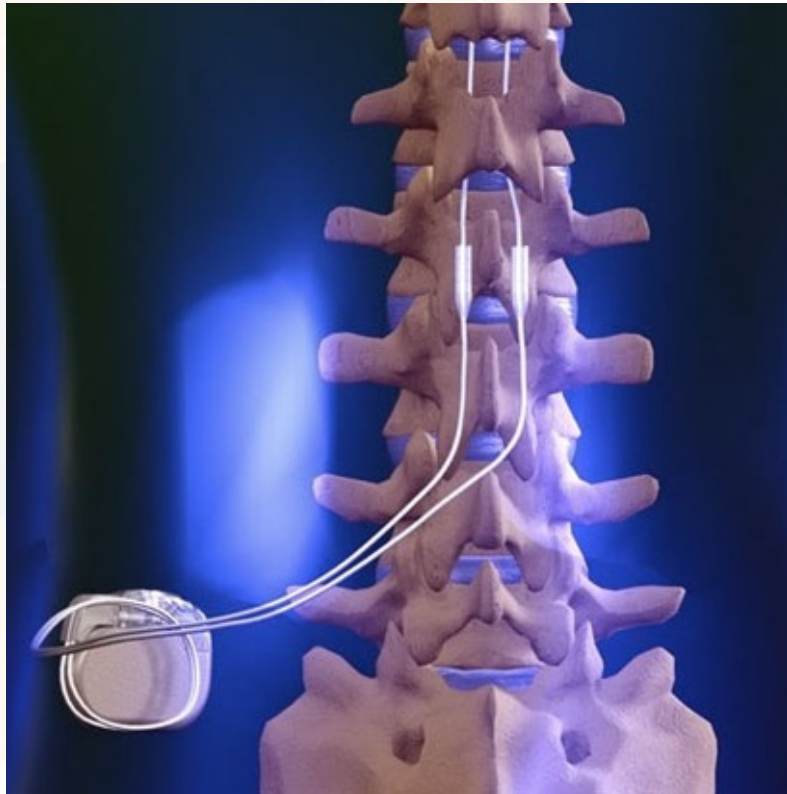


Interventional Procedures:

- **Basivertebral Nerve Ablation (BVNA)**
 - **Description:** Uses heat generated by radio waves to target and disable the basivertebral nerve within the vertebral body to relieve chronic low back pain originating from vertebral endplate changes (Modic Type I and II changes).
 - **Used to Treat:** Lumbosacral Vertebrogenic Endplate Pain



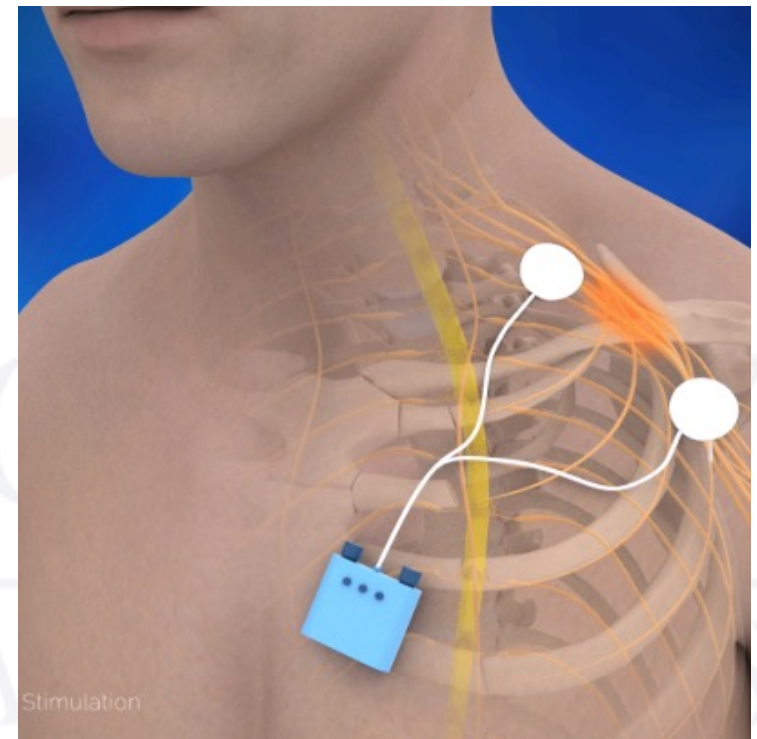
Interventional Procedures:



- **Spinal Cord Stimulator (SCS)**
 - **Description:** A neurostimulator device is implanted to deliver mild electrical impulses to the spinal cord, interrupting pain signals before they reach the brain.
 - **Used to Treat:** Radiculopathy, Failed Spinal Surgery, Complex Regional Pain Syndrome (CRPS), Diabetic/Other Peripheral Neuropathy, Phantom Limb Pain, etc.

Interventional Procedures:

- **Peripheral Nerve Stimulator (PNS)**
 - **Description:** A neurostimulator device is implanted to deliver mild electrical impulses to specific peripheral nerves, interrupting pain signals before they reach the brain.
 - **Used to Treat:** Radiculopathy, Failed Spinal Surgery, Chronic Shoulder and Knee Pain, Post Arthroplasty Knee Pain, Entrapment Neuropathies, etc.



Interventional Procedures:

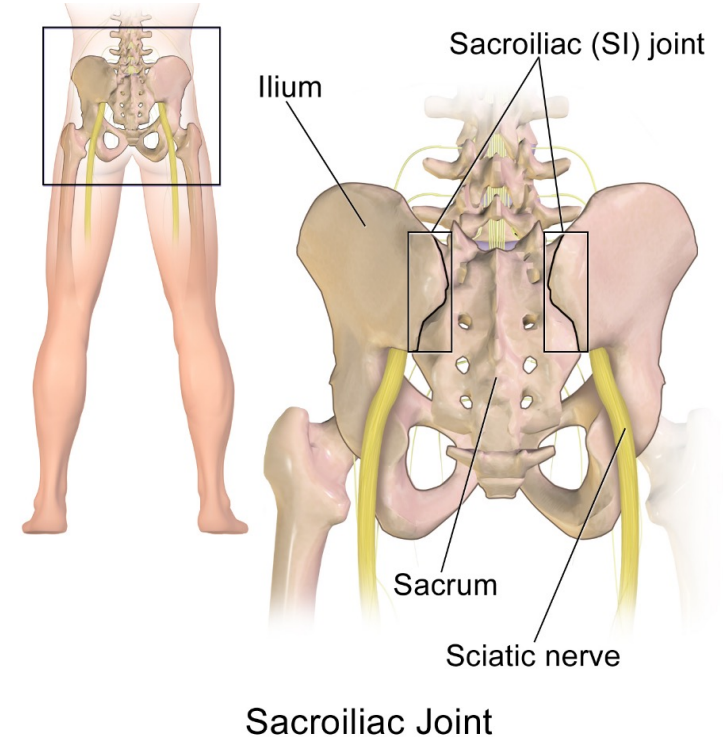
- **Dorsal Root Ganglion (DRG) Stimulator**

- **Description:** A neurostimulator device is implanted to deliver mild electrical impulses to the dorsal root ganglion, interrupting pain signals before they reach the brain.
- **Used to Treat:** Lumbosacral Radiculopathy, Failed Spinal Surgery, Chronic Regional Pain Syndrome (CRPS), Entrapment, Phantom Limb Pain



Interventional Procedures:

- **SI Joint Injection and SI Joint Fixation**
 - **Description:** SI Joint Injections may be diagnostic (local anesthetic only) or therapeutic (+steroid). SI Joint Fusion stabilizes and fuses the sacroiliac joint to reduce pain caused by SI joint dysfunction or degeneration.
 - **Used to Treat:** Sacroiliac Joint Dysfunction (Sacroiliitis)



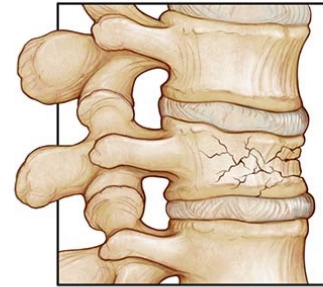
Interventional Procedures:

- **Kyphoplasty**

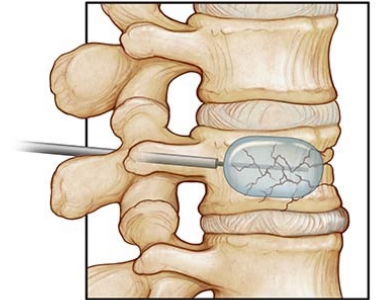
- **Description:** A minimally invasive procedure used to treat vertebral compression fractures by inserting a balloon or mechanical device (spine jack) to restore height, followed by injection of bone cement to stabilize the fracture.
- **Used to Treat:** Acute/Subacute Vertebral Body Compression Fractures

Kyphoplasty

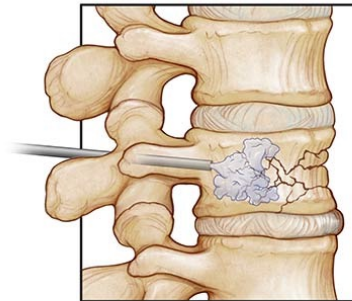
① Compression fracture



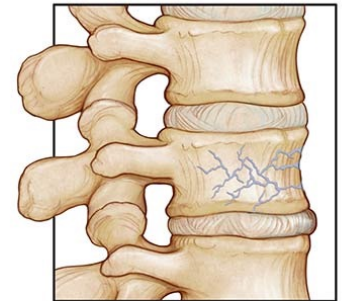
② Trocar placed and balloon inflated



③ Expanded vertebra filled with surgical cement



④ Vertebra strengthened and pain reduced



Regenerative Medicine:

- **Prolotherapy:**
 - **Description:** Injecting an irritant solution, typically dextrose, into ligaments, tendons, or joints to stimulate the body's natural healing response and promote tissue repair.
 - **Used to Treat:** chronic musculoskeletal pain, joint instability



Regenerative Medicine:

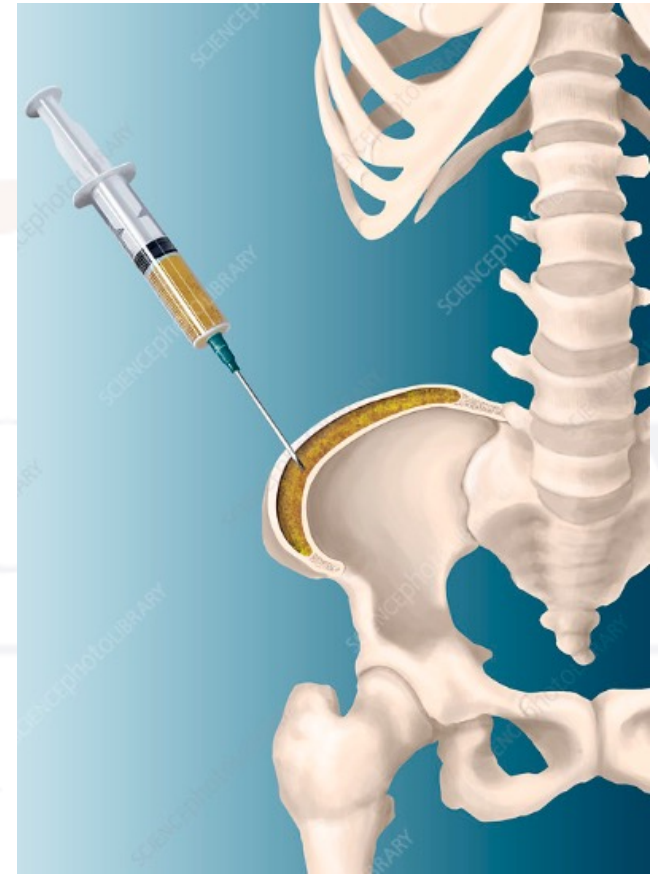
- **Platelet-Rich Plasma (PRP):**

- **Description:** Injecting a concentration of the patient's own platelets into injured or painful areas to harness the body's natural growth factors to heal and reduce inflammation.
- **Used to Treat:** tendon injuries, osteoarthritis, and other musculoskeletal conditions



Regenerative Medicine:

- **Bone Marrow Aspiration (BMA)**
 - **Description:** A small amount of bone marrow is extracted, typically from the pelvis, to obtain stem cells and other regenerative components.
 - **Used to Treat:** Supports tissue healing and repair, particularly in joint and spinal conditions.



Conclusion:

- **Key Takeaways:**

- Non-pharmacologic treatments are essential in chronic pain care
- Chronic pain requires individualized and multi-disciplinary treatment

- **Call to Action:**

- Greater awareness, early intervention, empathy in care
- Prioritize safety, function, and quality of life in chronic pain care.