

Through attending a chronic pain rehabilitation program, you can learn simple, self-treatment and self-management techniques to reduce pain, improve functioning and ultimately improve your quality of life.

Competent, compassionate care

**PUBLIC TRANSPORT**

Cabrini Hopetoun Rehabilitation Hospital is conveniently close to public transport with train, tram and bus services all within a reasonable distance as indicated below:

**Train:** Elsternwick: Sandringham to City

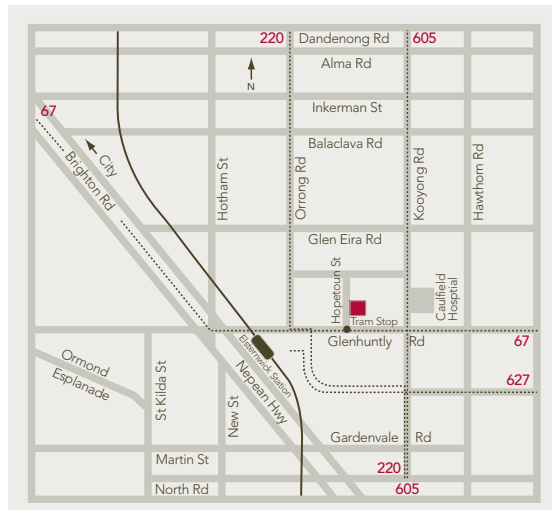
**Tram: 67** Glenhuntly Rd: Carnegie to Melbourne Uni via Glenhuntly, Elsternwick, Elwood, St. Kilda, St. Kilda Rd and Swanston St.

**Bus**

**220** Orrong Rd Sunshine Stn to Gardenvale via Footscray and City

**605** Kooyong Rd Gardenvale to Flinders St, City via Armadale and Toorak Stn, Punt Rd, Swan St and Melbourne Park

**627** Glenhuntly Rd Elsternwick Stn to Brighton East via Ormond, Oakleigh, Chadstone SC, Carnegie and McKinnon



**Cabrini Hopetoun Rehabilitation Hospital**  
 2-6 Hopetoun Street Elsternwick Vic 3185  
 Tel: (03) 9523 9116 Fax: (03) 9528 1815  
 Outpatients tel: (03) 9524 3712  
 Email: [reception@hopetounrehab.com.au](mailto:reception@hopetounrehab.com.au) OR  
[outpatients@hopetounrehab.com.au](mailto:outpatients@hopetounrehab.com.au) [www.cabrini.com.au](http://www.cabrini.com.au)



You have been referred by your doctor/surgeon for assessment and management of your chronic pain condition.

Please read this leaflet carefully as it is important that you understand the information contained within it. Without this understanding, the chronic pain rehabilitation program may not work for you.

The consultant in rehabilitation and pain management will discuss this information with you at the next appointment. He/she will assess your suitability and readiness to enter the chronic pain rehabilitation program.

## ACUTE PAIN

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Acute pain is caused by injury – tissues are damaged and inflammatory chemicals released, resulting in a combination of acute pain, increased local heat, redness, swelling and loss of normal function.

For most people, as the injury heals, the pain resolves. This occurs within 3 months of the injury. In some people, for reasons that are not clear, even though the injury heals, pain persists.

## CHRONIC PAIN

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When pain has persisted for greater than 3 months it is defined as chronic pain. The causes of chronic pain are different from those of acute pain. They may consist of a combination of factors that include:

- A persistent hyper-irritable muscular pain condition known as 'Myofascial Pain Syndrome', which can generate as well as refer pain through the development of 'trigger points' in the muscle tissue. This condition can last many months and even years.
- Biomechanical imbalance due to altered posture and movement patterns that serve only to maintain hyper-irritable muscles, increase stress on joints and other body parts.

- The development of 'pain sensitisation'. As a consequence of suffering persistent pain, one's pain system becomes 'irritable', leading to an organic change in function.

The pain system usually collects pain messages from the injured body part and sends them to the brain, to register as pain. This indicates to the injured person that tissues have been damaged. When the injury heals the pain messages stop and the acute pain goes away.

In people whom the injury heals but pain persists, there is change to the pain system resulting in pain sensitisation.

## PAIN SENSITISATION

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There are four major consequences of pain sensitisation. These include:

- Amplification of pain messages, so that even more severe pain is experienced.
- Spontaneous generation of pain, so that pain and injury are no longer linked. This can explain not only the constant pain one experiences, but also the sudden, unpredictable attacks of flares of pain that can occur without further or new injury occurring.
- Decrease threshold for pain production. Thus, over time, it takes less to activate pain messages e.g. less standing, sitting, walking, or even less pressure over the affected area.
- Recruitment of other parts of the body to experience pain, independent of further or new injury e.g. the opposite side of the body or even the whole body.

Chronic pain can be made worse by one's emotional state in reaction to the persistence and severity of the pain. These emotional reactions include frustration, anger, disillusionment, cynicism, anxiety and depression.

At this stage, there is no cure for chronic pain.

## CHRONIC PAIN REHABILITATION PROGRAM

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Through attending a Chronic Pain Rehabilitation Program, one can learn simple, self-treatment and self-management techniques to reduce pain, improve functioning and ultimately improve one's quality of life.

The chronic pain team may include a consultant of rehabilitation pain management, physiotherapist, occupational therapist, psychologist and psychiatrist. The therapy program is provided on a one-to-one basis, and you will have your own customised chronic pain program and team.

## THE CHRONIC PAIN REHABILITATION TEAM PROVIDES THE OPPORTUNITY TO LEARN HOW TO:

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- Reduce pain (not cure).
- Reduce the factors that aggravate and perpetuate pain.
- Desensitise.
- Improve posture and movement patterns.
- Improve day-to-day functioning.
- Make life more meaningful. (Being 'meaningfully occupied' is a key component to maintaining control over any chronic pain condition and is vital in desensitisation.)

## RESPONSIBILITIES

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The chronic pain rehabilitation program can provide you with the opportunity to achieve the above skills. In order to maintain the improvements, you must accept responsibility and be actively involved in your own therapy.

Please read the above carefully and if you have any queries, discuss them with your consultant.