



LA CLINICA

 **30** YEARS

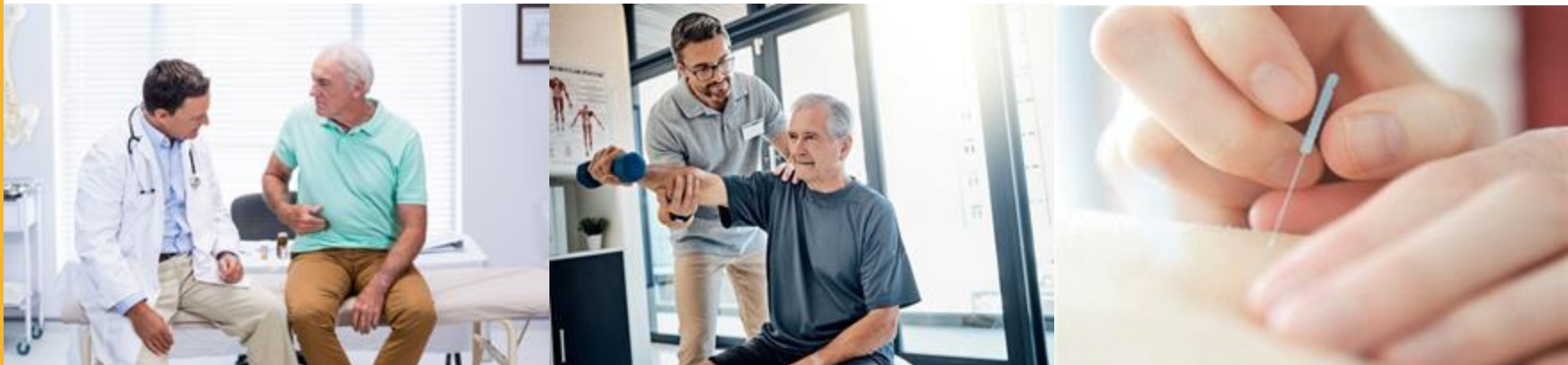
OUR MISSION

We serve the people who need us most through exceptional, affordable, and compassionate care, inspiring all those we touch to lead full and healthy lives.

Understanding pain: Become your own pain specialist

Dr. Justin Adams MD - Chief Medical Officer

Joshua Graner MS, LAc - Functional Pain Specialist



Chronic Persistent Pain is a BIG Problem

- In 2016, approximately 1 in 5 adults in the U.S. had chronic pain, affecting more Americans than diabetes, heart disease, and cancer combined.
- Chronic pain contributes an estimated \$560 billion annually in direct medical costs, lost productivity, and disability programs.
- Socioeconomic status is an important predictive factor in developing chronic pain.

Source: CDC

Impacts of the Opioid Epidemic

- 115 death related to opioids occur every day in the United States.
- The cost of the opioid epidemic is estimated to be over \$1 trillion since 2001.
- In Oregon, an average of 1 person dies of an opioid overdose every day.
- The rates of opioid use, abuse, and overdose in Jackson County are all higher than the state and national averages.

Source: National Institute on Drug Abuse and local sources

The Old Model of Pain Care

“Tissues with issues”

- Overly focused on structural and mechanical problems
- Does not take into account all the other pain triggers
- Does not focus on overall health and disease factors
- Symptom-driven
- Costly interventions that often prolong the problem
- Overprescribing medications



Integrative Pain Reduction Program

Helping patients to be their own pain specialists

- A community-based approach
- Serving OHP/Medicaid recipients
- Education
- Evidence-based
- Physical therapy
- Acupuncture and massage
- Nutrition and dietary education



Who am I?

Joshua Graner MS, LAc - Functional Pain Specialist

Education and interests:

1. Nutrition and biochemistry
2. Traditional Chinese medicine
3. Functional medicine
4. Neuroscience of pain

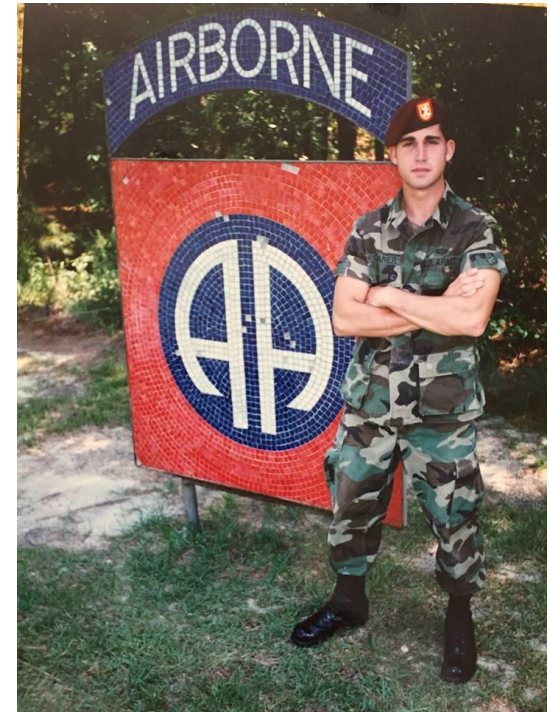


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Looking at the underlying causes of disease and dysfunction

Why Study Pain?

Parachuting injury created 20 years of chronic pain
Trying to understand why we suffer and how to
alleviate it.



How?

“A good physician must first be a humanist, then an excellent diagnostician and finally a competent technician, in that order” - Paracelsus

1. Connect with our patients and building trust by caring deeply for their well-being.
2. Consider all the factors by asking better questions.
3. Constantly learn and hone technical skills.

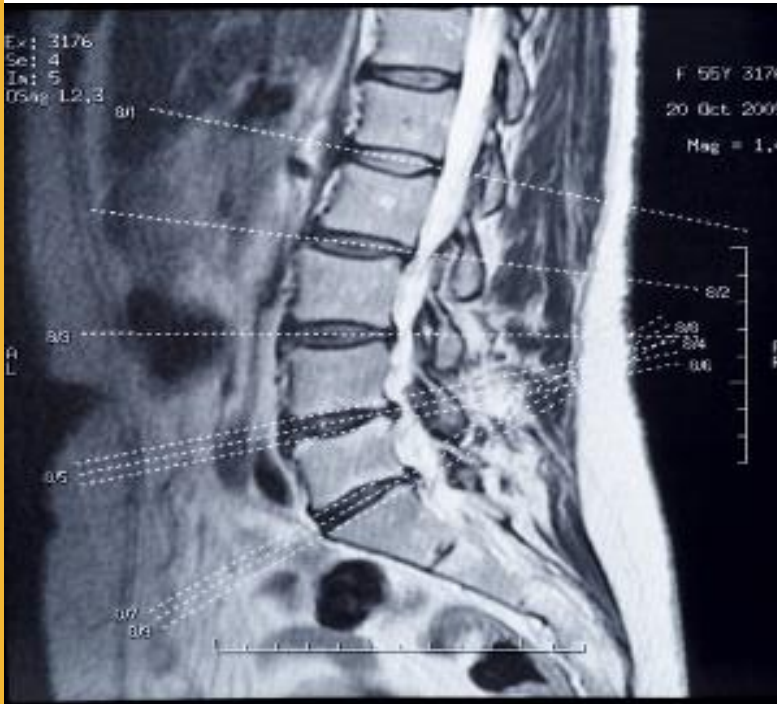
What I Do

1. Pain education and coaching
2. Acupuncture and bodywork
3. Movement and mobility training
4. Nutrition and dietary advice
5. Coordination of care



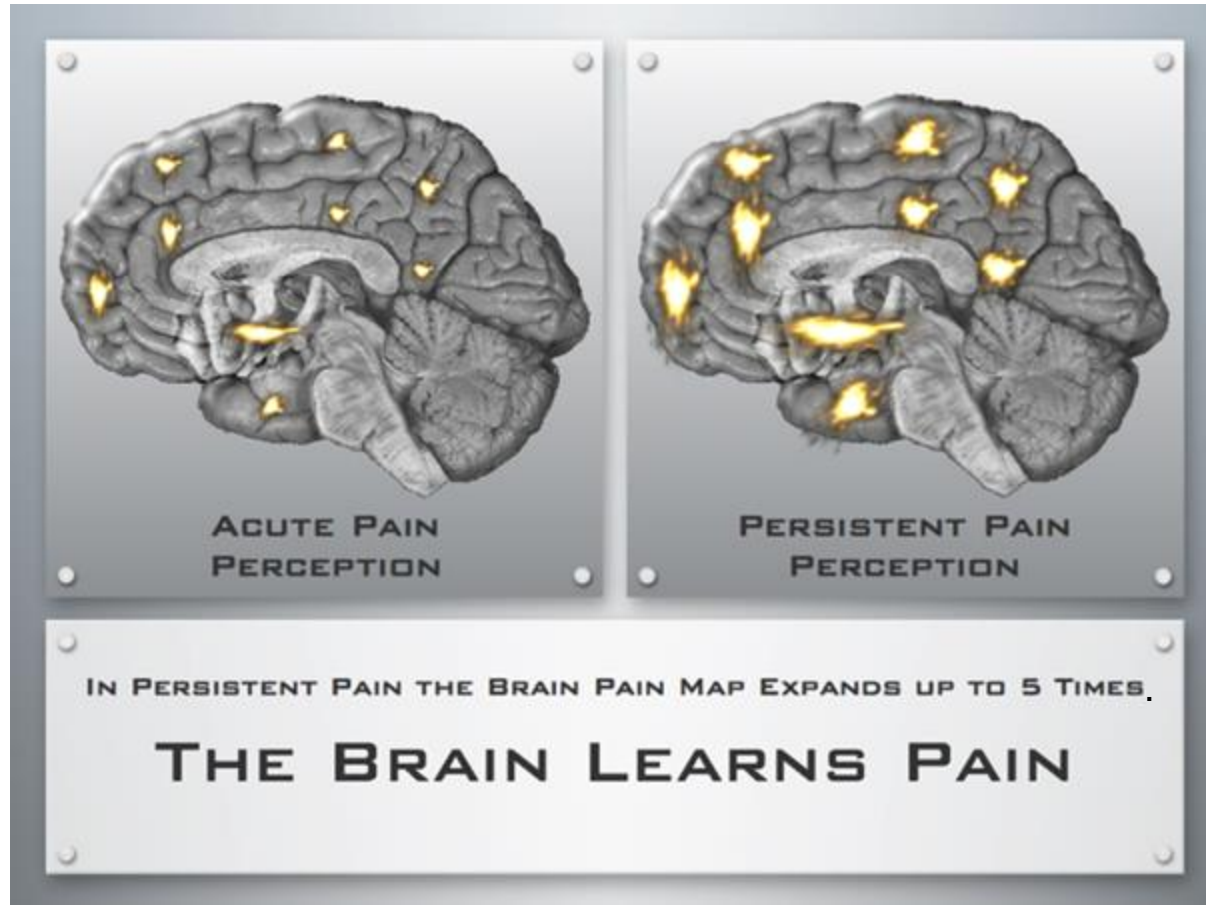
What is Chronic Pain?

We use to think that chronic back pain is all in the back.



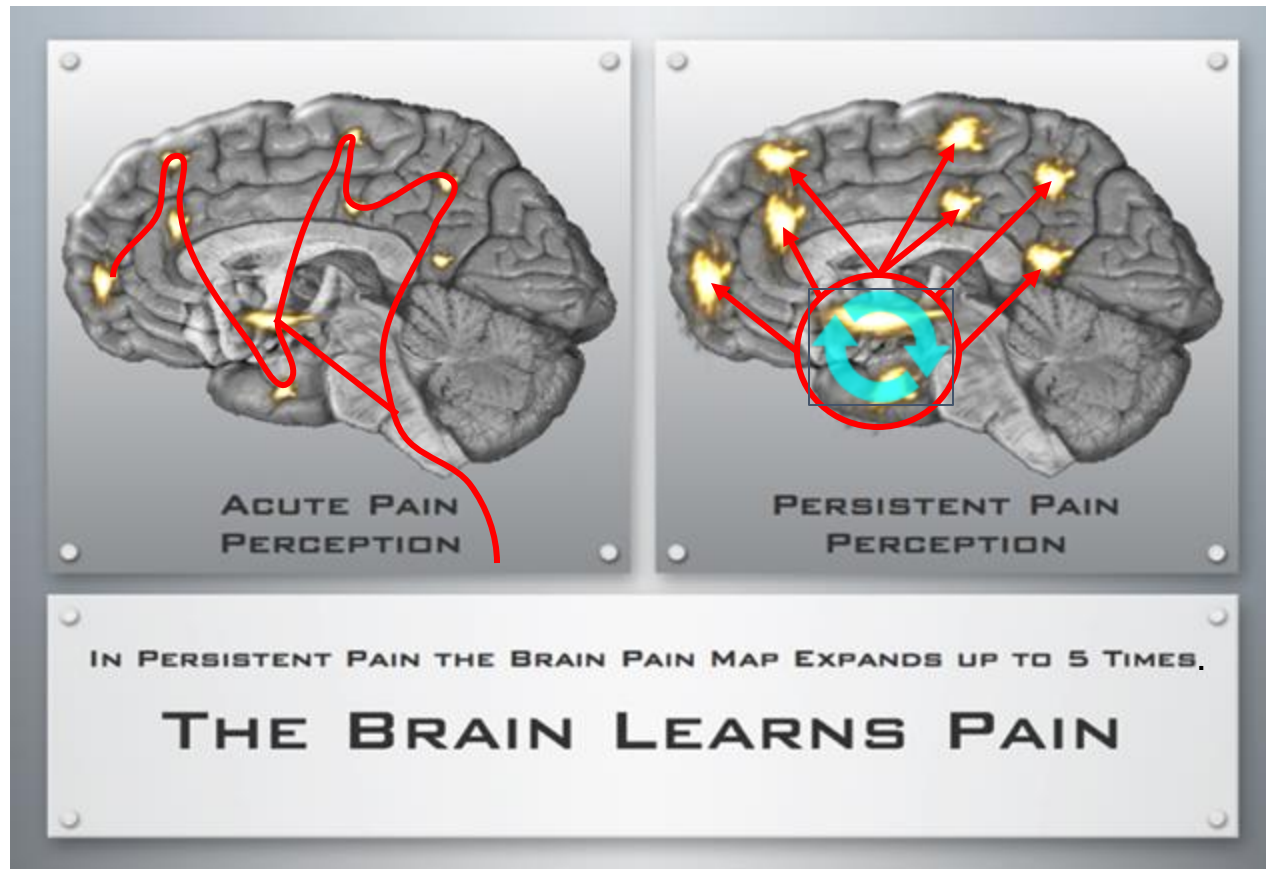
Neuroscience tells a different story

All pain is felt in the brain.



What is Chronic Pain?

After 3 months, activity shifts from the pain regions of the brain to the emotional centers of the brain.



The Pain Matrix Handout

Threats - Pain Triggers

1. Severe acute or long-term stress
2. Adverse childhood events
3. Tissue damage or injury
4. Inadequate sleep and rest
5. Inflammation
6. Chronic disease
7. Nutrient deficiency
8. Long-term high blood sugar
9. Long-term high blood pressure
10. Obesity / excessive organ fat
11. Social isolation and loneliness
12. Not getting enough exercise
13. Too much physical movement
14. Beliefs about pain or injuries
15. Recurring pain



Alarms - Signs and Symptoms

1. Pain (aching, burning, sharp, etc)
2. Muscle tension
3. Nerve sensitivity
4. Inflammation
5. Aversive thoughts and beliefs
6. Heart palpitations
7. Increased heart rate
8. Shallow breathing
9. Constricted blood vessels
10. Sensitivity to heat and cold
11. Agitation / irritability
12. Poor memory and concentration
13. Unexplained anxiousness
14. Unexplained fatigue
15. Insomnia

The Pain (Threat) Matrix

- A vast network of 16 areas spread over the brain and spinal cord
- Monitors the entire body 300 times per second (26 million times per day)
- Looks for any potential threats
- Triggered by a variety of stimuli
- Can become overwhelmed
- Alarms stuck in the ON position - intense threat or prolonged threats



Threats - Pain Triggers

1. Severe acute or long-term stress

- a. Trauma
- b. Work
- c. Financial
- d. Chronic pain

2. Tissue damage or injury

- a. Acute pain - primary factor
- b. Chronic pain - less factor

3. Inflammation

- a. Repair process
- b. Nutrient deficiency
- c. Blood sugar
- d. Over-fat

4. Social isolation and loneliness

- a. Physical isolation
- b. Emotional isolation



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Effective pain reduction is SIMPLE but not EASY



Matrix Method for Pain Reduction

Step 1 - **Understand** your pain.

Step 2 - **Screen** for the “3 Bigs:”

- Cancer
- Tissue damage / severe structural injury / infection
- Unmanaged autoimmune conditions

Step 3 - **Assess** all potential threats.

Step 4 - **Calm** the pain alarm through safety signaling.

Step 5 - **Organize** your threat reduction strategy.

Step 6 - **Take action** to systematically reduce threats.

The Program at Work

Since January 2018, we have seen more than **300** patients and provided 2,600 appointments for those seeking alternative pain care.

1. One-on-one care
2. Average of 9 visits per patient
3. Average of 45- to 60-minute visits
4. Develop lasting relationships
5. Patients educate their family and friends

Case Study



- 54 year old woman
- Chronic low back pain rated 8/10
- Previously homeless
- Victim of several assaults starting in childhood
- Learned about her pain
- Practiced **safety signaling** daily
- After one week, rated pain 3/10
- After five weeks of acupuncture, movement, and education, she was pain free
- Avoided surgery she feared.

Summary of Key Points

1. Medicine is the art of humanity. For it to work it needs to be human-centered.
2. All pain is felt in the brain.
3. After 3 months, activity shifts from pain centers to emotional centers in the brain.
4. Our Pain Matrix is looking for all potential threats which activate the emotional/pain centers.
5. Threats include past traumas, stress, lifestyle, and loneliness in addition to tissue issues.
6. Pain reduction is possible and simple but not easy.
7. You need a good strategy to assess and address the threats that are triggering the matrix and pain cycle.