



Managing Chronic Pain with Hypnosis: Possibilities for Patients on Opioid Maintenance Treatment



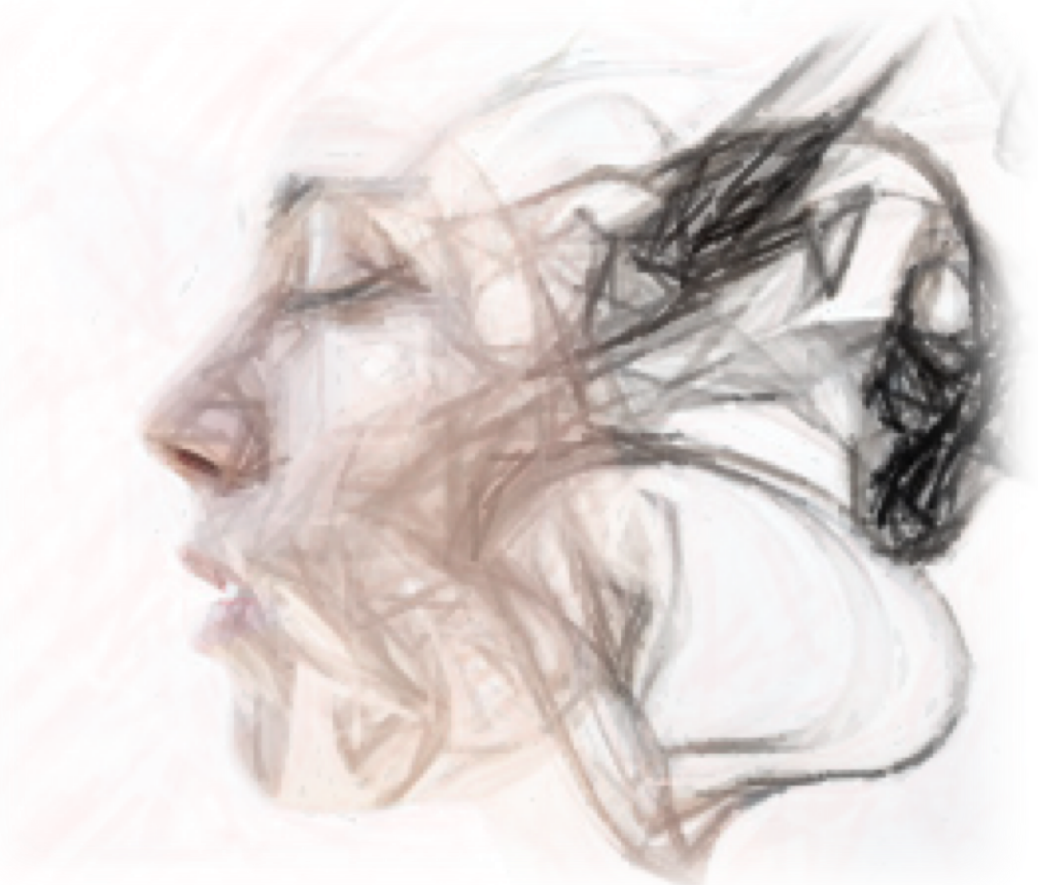
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Abstract

Due to a high percentage of chronic pain reported by individuals on opioid maintenance treatment and high risk of undertreatment of pain, more research is needed for how to best address chronic pain in Medication-Assisted Treatment (MAT) programs. Complementary treatments such as hypnosis could decrease health and mortality risks in this population. This poster explores the research on the use of hypnosis for chronic pain management, highlights dual benefits of hypnosis for pain management and addiction recovery, and offers suggestions for implementation of hypnosis for chronic pain in MAT programs.



Methods

Academic Search Premier, Google Scholar, and EBSCOhost were searched using the terms *pain management, hypnosis, chronic pain, group therapy, opioid maintenance treatment, and medication-assisted treatment.*

Literature Review

Current research has not explored the use of hypnosis in Medication-Assisted Treatment (MAT) programs. Individuals in MAT programs are at high risk of undertreatment for pain (Rosenblum et al., 2003). These individuals need to be assessed for self-medication of undiagnosed, misdiagnosed, or undertreated problems such as chronic pain and provided treatment that meets their needs (Substance Abuse and Mental Health Services Administration [SAMHSA], 2005).

As Jensen and Patterson (2014) described, clinicians can offer realistic hope for pain management utilizing hypnosis. Hypnosis has been demonstrated to be a more effective treatment for chronic pain than standard care and other psychotherapeutic interventions (Adachi, Fujino, Nakae, Mashino, & Sasaki, 2014). Specifically, hypnotic analgesia has been found to decrease measurements of pain in these comparisons (Stoelb, Molton, Jensen, & Patterson, 2009). Hypnosis is a particularly effective treatment because it can result in significant reductions in pain intensity for up to 12 months (Jensen & Patterson, 2014).

Discussion

Dual benefits of hypnosis for pain management and addiction recovery

- Although there is variability in patient responses to hypnotic analgesia, hypnosis offers benefits beyond pain relief that support chronic pain management, such as self-management skills (Jensen & Patterson, 2014). Development of self-management skills is one example of how patients in MAT programs could benefit from hypnosis both for potential pain relief but also to support addiction recovery.

- Individuals in MAT programs may report higher levels of treatment satisfaction if their pain is being addressed as part of the program. These individuals are likely to report high satisfaction due to the use of hypnosis, whether or not they experience a clinically meaningful reduction in pain (Jensen & Patterson, 2014).
- Jensen and Patterson (2014) found that even participants who did not experience clinically meaningful reductions in pain during hypnosis trial continued to use self-hypnosis at home to experience temporary pain relief and enjoyment. Continued use of self-hypnosis to find even temporary relief may reduce self-medication of pain and prevent reoccurrence of unprescribed opioid use.
- Hypnosis used for pain elicits non-pain-related effects, such as relaxation, positive affect, and increased energy (Jensen & Patterson, 2014), which could be beneficial in the recovery process.



Conclusion

Federal law requires MAT patients receive individual and/or group counseling (SAMHSA, 2019). SAMHSA's Treatment Improvement Protocol for MAT programs (SAMHSA, 2005) indicated that group counseling in these programs can enhance treatment outcomes by reducing feelings of isolation, enhancing social skills, and providing important feedback, encouragement, and accountability from peers. Group therapy as a common approach to rehabilitation in MAT could provide an accessible platform for addressing pain management. Hypnosis used in combination with CBT has been shown to enhance treatment outcomes for problems such as chronic pain

(Kirsch, Montgomery, and Sapirstein, 1995), and hypnosis has been effectively used in group settings for fibromyalgia (Castel et al., 2009). Treating chronic pain with hypnosis in MAT programs could be easily adopted within current MAT formats to maximize treatment outcomes and increase overall health and well-being of clients.

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Introduction

More research is needed on pain management in the opioid maintenance treatment population because of a false assumption that maintenance therapy is sufficiently addressing pain (Koller, Schwarzer, Halfter, & Soyka, 2019). A comprehensive review demonstrated that 24-39% of patients on opioid maintenance treatment reported moderate to severe pain and 55-61% report chronic pain (Eyler, 2013). Koller et al. (2019) pointed out that patients on opioid maintenance medication are at risk of morbidity and mortality due to chronic pain, and they proposed medical intervention with changes to the Methadone or buprenorphine prescriptions, the use of non-addictive prescriptions, and adjunctive treatments including hypnosis. Several possibilities exist for utilizing hypnosis to treat chronic pain with this vulnerable population.