

Thinking Outside the Medicine Cabinet

Non-Drug Ways to Manage Chronic Pain

CADTH completed a series of evidence reviews to appraise and summarize the research on the effectiveness of non-drug methods for the treatment of chronic, non-cancer pain. These reviews were used to develop a series of printable patient handouts and clinician evidence summaries. Clinician summaries include practical considerations, which are useful tips and strategies for recommending the use of each non-drug method to patients. This prescription pad is intended to be used alongside this set of resources, all of which can be found at cadth.ca/chronicpain.

The evidence highlights from the CADTH reviews are summarized below; however, there is uncertainty in the findings. The strength or quality of the evidence varied depending on the patient population, the duration of each intervention, and the length of follow-up for each intervention. As such, more research is needed.

Physical Methods



Exercise

Exercise may lower pain for people with many types of chronic pain, such as low back pain, knee osteoarthritis, hip osteoarthritis, fibromyalgia, rheumatoid arthritis, and neck pain.



Acupuncture

Acupuncture may lower pain for people with low back pain, hip osteoarthritis, osteoarthritis, headache, shoulder pain, pelvic pain syndrome or prostatitis, sciatica, and myofascial pain.



Manual Therapy

Manual therapy may lower pain for people with chronic low back pain (spine manipulation and massage), neck pain (massage), and tension headaches (spine manipulation).

Psychological Methods



Mindfulness

Mindfulness may lower pain for people with low back pain and fibromyalgia.



Cognitive Behavioural Therapy

Cognitive behavioural therapy may lower pain for people with low back pain, neck pain, knee osteoarthritis, and fibromyalgia.



Yoga

Yoga may lower pain for people with low back pain and primary dysmenorrhea.

Preventive Methods



Splints and Braces

Splinting or bracing may lower pain for people with tennis elbow, carpal tunnel syndrome, osteoarthritis of the thumb or fingers, and osteoarthritis of the wrist.



Healthy Weight

Maintaining a healthy weight through diet and exercise may lower pain for people who are overweight and have low back pain or knee osteoarthritis.



Foot Orthotics

Foot orthotics may lower pain for people with low back pain, rheumatoid arthritis (with foot pain), and painful flexible flatfoot.

This page is to be filled out by a health care provider. Types of information to include are:

- name and contact information for a clinician who specializes in chronic pain
- specific recommendations (e.g., Exercise: walking 30 mins, 5 times per week)

View the clinician evidence summaries (cadth.ca/chronicpain) for useful tips and strategies when prescribing non-drug methods for managing pain.

Patient's name:
Methods for managing chronic pain can be grouped into drug and non-drug categories. Pain medications commonly work by mimicking the body's own pain relief system; many non-drug methods work by naturally producing those chemicals naturally. Non-drug therapies can be divided into three categories: psychological, physical, and preventive. These can be used on their own or in combination with medication. It is recommended that patients start by trying one of the many non-drug options for safely managing chronic pain. Everyone responds differently to these methods, so discuss your pain management goals with your health care provider to find something that works for you.
Research has found the following non-drug methods may lower chronic pain:
Physical methods:
□ Exercise:
□ Acupuncture:
□ Manual therapies such as spinal manipulation and massage:
□ Other:
Psychological methods:
□ Cognitive behavioural therapy:
□ Mindfulness:
□ Yoga:
□ Other:
Preventive methods:
□ Splints and braces:
□ Maintaining a healthy weight (through diet and exercise):
🗆 Orthotics:
□ Other:
Additional information:
□ Accompanying patient handouts provided explaining the previously outlined methods to manage pain, or referral to cadth.ca/chronicpain to view these handouts online
Health care provider's signature:
Date:

CADTH would like to thank the Saskatchewan Health Authority's Opioid Stewardship Program for its clinical expertise in reviewing and informing the development of this document.

■ Disclaimer

CADTH is a not-for-profit organization responsible for providing Canada's health care decision-makers with objective evidence to help make informed decisions about the optimal use of drugs and medical devices in our health care system.

CADTH receives funding from Canada's federal, provincial, and territorial governments, with the exception of Quebec.

This material is made available for informational purposes only and no representations or warranties are made with respect to its fitness for any particular purpose; this document should not be used as a substitute for professional medical advice or for the application of professional judgment in any decision-making process. Users may use this document at their own risk. The Canadian Agency for Drugs and Technologies in Health (CADTH) does not guarantee the accuracy, completeness, or currency of the contents of this document. CADTH is not responsible for any errors or omissions, or injury, loss, or damage arising from or relating to the use of this document and is not responsible for any third-party materials contained or referred to herein. Subject to the aforementioned limitations, the views expressed herein do not necessarily reflect the views of Health Canada, Canada's provincial or territorial governments, other CADTH funders, or any third-party supplier of information. This document is subject to copyright and other intellectual property rights and may only be used for non-commercial, personal use or private research and study.



