52 Years Coping with Chronic...

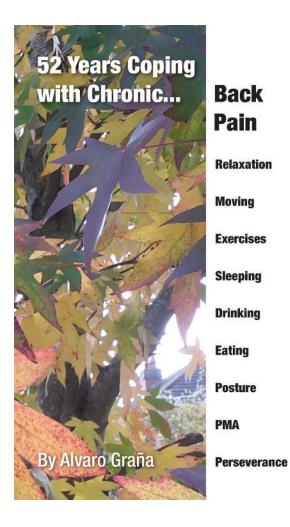
By Alvaro Graña

Back Pain

Relaxation Moving **Exercises** Sleeping Drinking **Eating Posture**

PMA

Perseverance



52 Years Coping with Chronic...



Alvaro Graña

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I would also like to thank the many doctors, nurses, physiotherapists, and other health professionals, who have helped me over the last 52 years since my sports injury. I would particularly like to show my appreciation and gratitude to Mr. Robert Hatfield, my chiropractor, without whom my life for the last 30 years would have been very different and much more difficult.

I wish to express my love and gratitude to Ingrid, who has spent a lot of time proof-reading my book, and for her patience and understanding, while I have been engaged in writing this book.

I hope many people will find this book helpful, but if it helps just one person in similar circumstances, that would be my greatest wish fulfilled.

THIS BOOK IS DEDICATED TO MY FAMILY.

I dedicate this book to my wife Ingrid, who is my rock, who always supports me in whatever I do, and to the rest of my family, my chidren Natalia and Orlando as well as my grandchildren Maya, Alfie, Javie and River. I hope that one day they will read my book and learn that though there may be problems and suffering in life we each need to face them not as problems but as challenges. I love you all with all my heart and with all my strength.

Foreword

This is the story of one man's experience and his way of coping with pain over a 52 year journey.

The book reads as if Alvaro Graña is talking to the individual reader, relating his ups and downs, revealing his strengths and weaknesses alike; admitting not taking specialist advice too seriously at times, not persevering or giving up, demonstrating he and the reader are likely to have much in common. It is only when things become really difficult that he realises that he needs to follow medical advice more rigidly, and in addition take charge of his situation by doing his own investigations to find ways of helping alleviate his situation.

The author could be described as 'the man next door', he has no medical qualifications, and no prior knowledge of alternative/complementary healing methods or medication.

Therefore, this book is an invitation to fellow chronic pain sufferers to accompany him on his journey, a voyage of discovery, as he finds ways of confronting what would otherwise limit his horizons.

Alvaro talks about failures as well as successes, however it is important to remember that some process or method that was not helpful to the author, has indeed helped others, and viceversa. The aim of this book is to encourage the readers to take charge of their own individual situation, and to find what works best for them, by pointing out shortcuts, describing what is available and what he has found helpful.

You will note that the reader is repeatedly encouraged to seek medical guidance before trying anything new, rather than 'going it alone'.

On a personal note, I find this book very readable while crammed full of helpful tips and information, as well as some interesting anecdotes.

Ingrid Graña Editor

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INTRODUCTION -ME AND MY BACK PAIN

I am writing this book in the hope that I will be helping people out there in the wide world, with similar problems to mine. I have been suffering with chronic back pain since my sports injury in 1961, later aggravated by arthritis in my joints in 2002.

There are many things I have learnt over the years, which I would like to share with you. Things I wish I had known earlier. But this happens in any scenario. In any case it is important to be positive and look forward.

There are many joint pain and back pain sufferers all over the world. I am one of them. It has been a long journey for me with my Chronic Back Pain caused by an injury to my lower back whilst playing basketball at the age of 16 (year 1961). This sport's injury happened in Lima, Peru, where I was born. After my injury and for quite a while - I will call this period my *first phase* - I was seen by 2 orthopaedic surgeons from the Mayo Clinic, USA who were visiting Lima at the time. Their diagnosis was that I had broken two vertebrae in my lower back. Their prognosis was not good, medical science was not yet advanced enough for them to offer any treatment beyond a referral to a physiotherapist. They said that in the future surgery might be possible. They also warned me that my condition would deteriorate slowly and that in the worse case scenario I might end up in a wheelchair.

My sport's injury happened whilst playing basketball. I was jumping to get the ball at the same time as a player from the opposing team also jumped causing a mid-air collision. I landed awkwardly on my hands and knees, and my opponent landed on my back. A number of people, including my coach, said they heard the sound of my bones cracking, which resulted in a long-lasting injury. During this phase just after the injury and right through the 1960s I was in constant pain. I was prescribed valium, antiinflammatories and pain killers. The side effects were horrendous. I even became addicted to valium and it took me a long time and great determination to beat the addiction. I was on strong prescribed medication for forty years until I decided to try alternative solutions, which I will cover later.

In 1973 I came to England (London) to pursue postgraduate studies, I was living with chronic pain all down my spine and my right leg in spite of the strong medication. I will expand on this later.

The start of my *second phase* was when I decided to look into my condition in greater detail, though I still did not grasp the seriousness of my injury.

My advice would be not to leave it all to your doctor, take action, be pro-active and find out as much about your condition as possible. Speak to other health professionals, search books and the internet, and listen to other people who have experienced pain themselves and have discovered coping mechanisms.

From now on my personal experiences will be in bold and in a different font.

JOINT AND BACK PAIN

Joint and back pain account for a very high percentage of the pain experienced in the world. Joint and back pain can be under the umbrella heading of Musculoskeletal Pain. Symptoms can range from muscular spasms to inflammed joints. Nerve pain can also be experienced and it is characterised by aching – felt sometimes like an electric sensation (an electric current) running up your nerve, and a tingling sensation (a feeling of edginess). You may feel a stabbing or burning pain as well.

We are talking about pain, so let us address these questions:

- Can we accurately measure the various levels of pain people experience?
- Do we know how the brain works and responds to pain?
- Why is pain tolerated at different intensities by each individual?
- Does gender or age make any difference to how we feel and react to pain?
- What is a pain threshold?
- Can endorphins produced by our bodies be as efficient as a painkiller?

Let's start with what pain is.

How can we define PAIN?

The International Association for Study of Pain (IASP) define pain as:

'An unpleasant sensory and emotional experience which is due to actual or potential tissue damage or which is expressed in terms of such damage'.

Pain works as the natural warning system. It is a message sent from any part of the body to the brain (the mind) through our nervous system, to tell us that something is wrong.

Pain can be broken down into the following categories.

Types of pain

Acute Pain: The term 'acute' indicates a relatively abrupt onset with evident symptoms and limited duration. This can be caused by a physical event such as a fall, a sprain or break, as well as an inflammation or infection. Acute pain normally resolves itself as healing occurs.

Chronic Pain: This is long-term pain, unlike acute pain, which is normally temporary and disappears with time and treatment. Chronic pain persists after healing has occurred. Chronic pain is constant and nagging. There are many conditions which produce chronic pain including arthritis, gout, joint pain, and back ache, among others. This type of pain may be either constant or sporadic. It may be difficult to identify its cause.

Referred Pain: Referred pain is felt some distance away from its origin. Osteoarthritis of the hip, for instance, causes pain in the knee.

It is extremely important to seek professional medical advice if your pain persists or has no obvious cause.

Emotional pain: Pain is usually thought as physical, though emotional pain or mental distress can manifest itself in the body. This type of pain can be caused by being rejected, from bereavement, from problems with relationships, etc. One acute form of emotional or psychological distress is depression, a term that covers anything from feeling down and sad to extreme mental and emotional agony. Emotional manifest or mental pain can physically as а headache/migraine, stomach upset, ulcers or even muscle pain (through tension and stress) for example. The causes of pains can include nightmares, fears, phobias, these obsessions, and addictions to food, drink, drugs, etc.

It is important to recognise that long-term emotional pain can lead to physical symptoms as well as the other way around.

Words to do with pain

Describing pain can be very difficult. Here is a list of words that might be associated with pain:

Ache – Anguish – Misery – Suffering – Torture – Affliction – Agony – Discomfort – Pangs – Twinge – Distress – Torment – Wretchedness How would you describe your pain? These are some symptoms:

You might feel:

- a sharp pain
- a nagging pain
- a persistent/constant pain

- edgy (ie.: nerve pain)
- a stabbing pain
- a niggling pain
- a tight (stiffnes) pain

Pain can result in the following side effects:

- stomach ache
- constipation
- insomnia (difficulties in sleep)
- nausea
- dizziness
- lethargic/spaced out
- very low in energy/tired/exhausted

Describing your mood while carrying pain can also be difficult. These are some descriptions:

- Fed up
- Worried
- Anxious
- Confused
- Depressed
- Angry
- Embarrassed
- Very sad from feeling sorry for yourself
- Frustrated
- Introverted
- Aggressive