

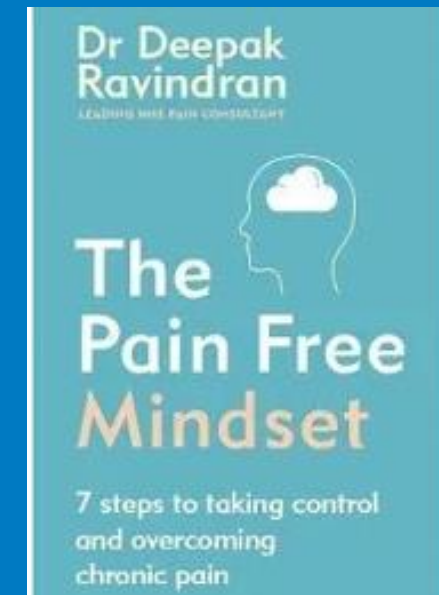
UPSTREAMIST



# WHAT HAPPENED TO YOU?

A TRAUMA INFORMED APPROACH TO LINKING ACES AND PAIN

- CLINICAL LEAD, DEPT OF PAIN MEDICINE ROYAL BERKSHIRE FOUNDATION TRUST, READING UK
- CLINICAL LEAD, BERKSHIRE LONGCOVID SERVICE, BERKSHIRE WEST ICP
- BOARD CERTIFIED LIFESTYLE MEDICINE PHYSICIAN AND MUSCULOSKELETAL MEDICINE AND ANAESTHESIA
- AUTHOR OF “ THE PAIN FREE MINDSET”





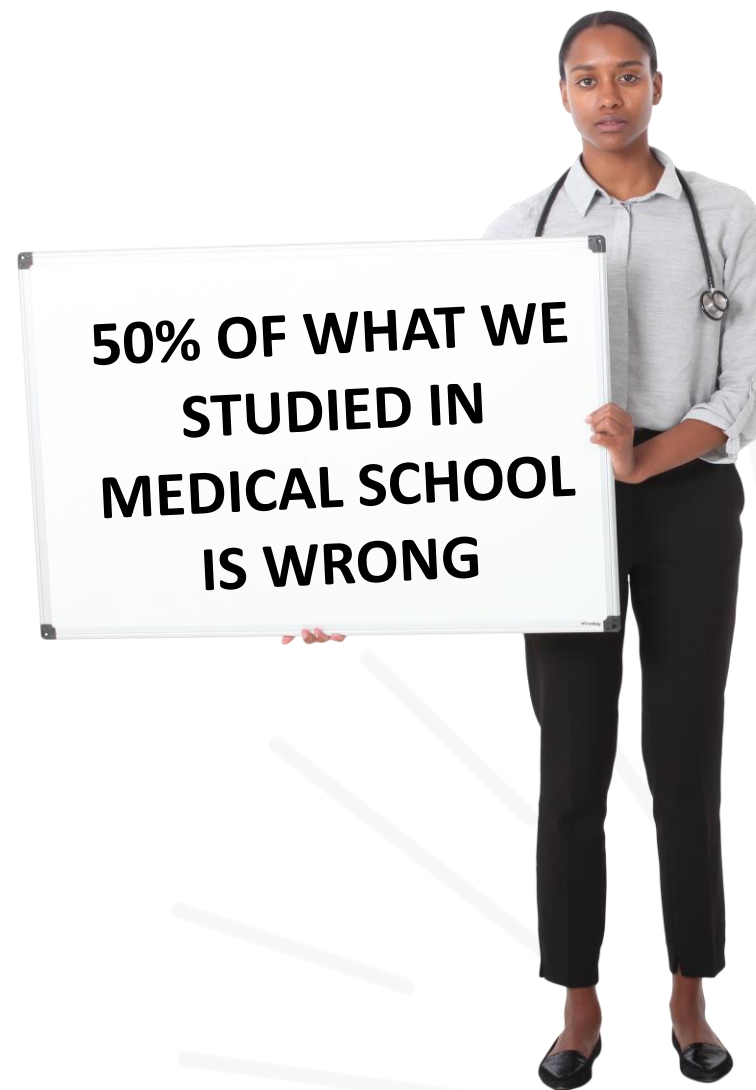


This Photo by Unknown Author is licensed under CC BY-SA

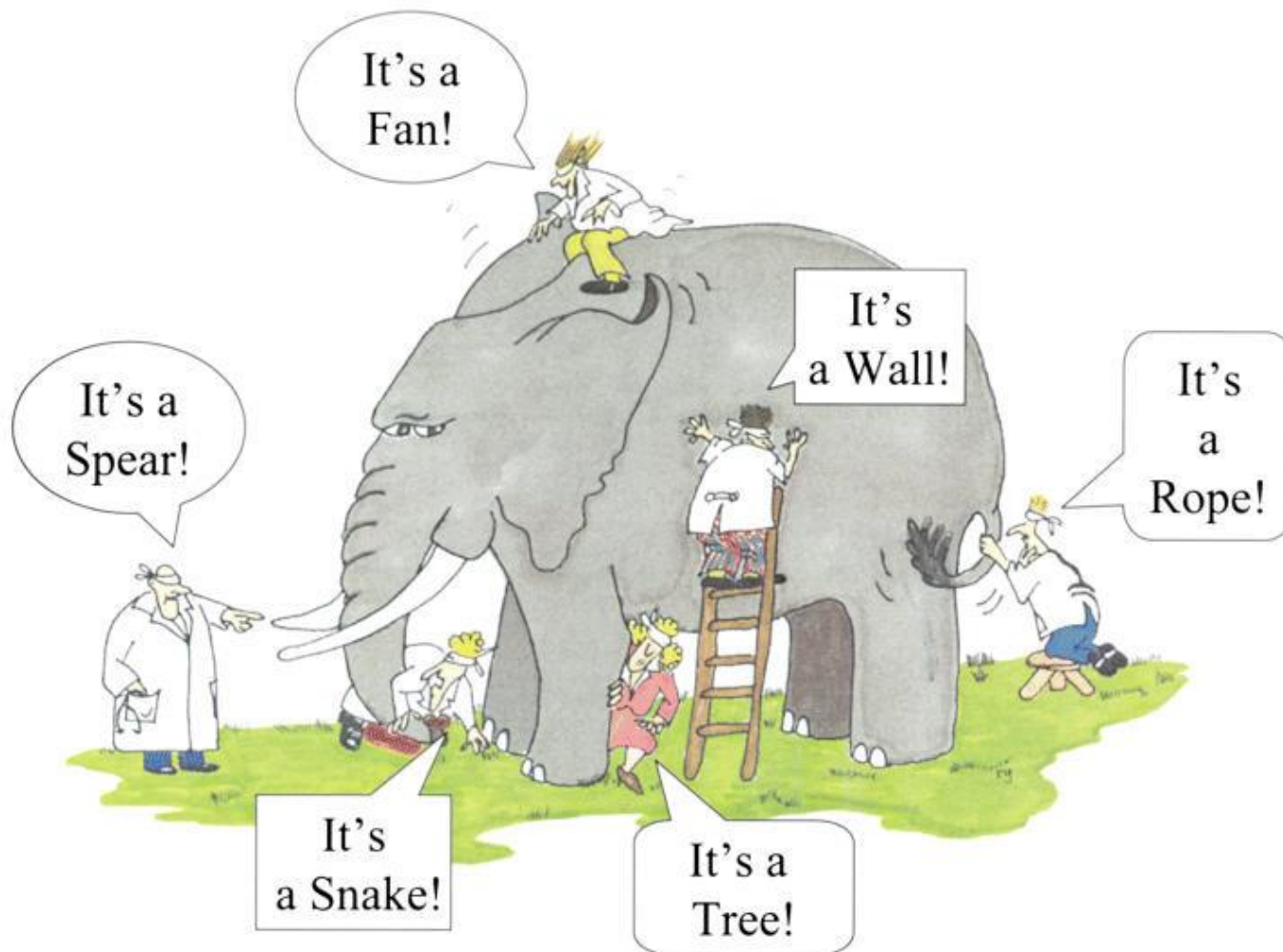


# MY JOURNEY

---



# The first elephant

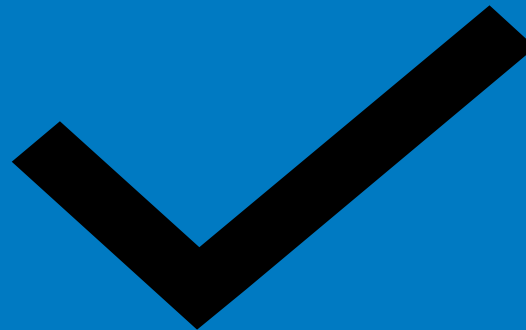


- 45 year old lady
- 4 years H/O widespread pain
- Initial LBP to GP 6yr
- Numerous visits to GP monthly last 5 years
- Physiotherapy over the years – 3-4 courses of 4 sessions each
- Right shoulder pain
- 2 knee arthroscopies
- Hip pain – offered arthroscopy



- Gastro - IBS, constant fatigue,
- All symptoms remain
- On all groups of drugs
- Rheumatology – CFS/Fibromyalgia
- Inc BMI//Type 2 DM

- Are we taking people on a wrong medical/surgical journey when not needed?
- WHAT IS THE MISSING PIECE?
- ASK NOT WHY IS IT LIKE THIS? BUT WHAT HAPPENED TO YOU?



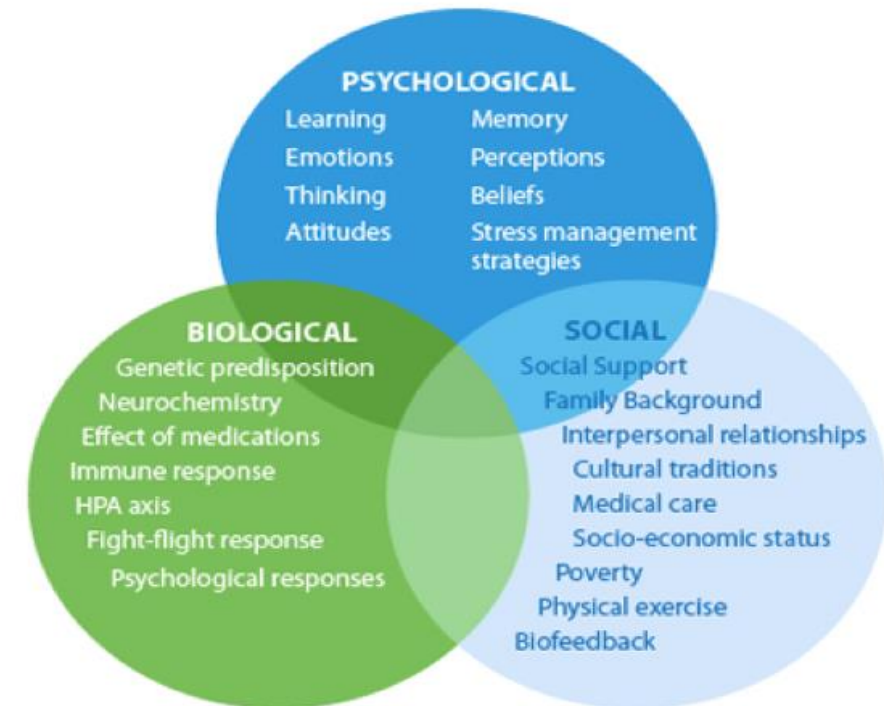
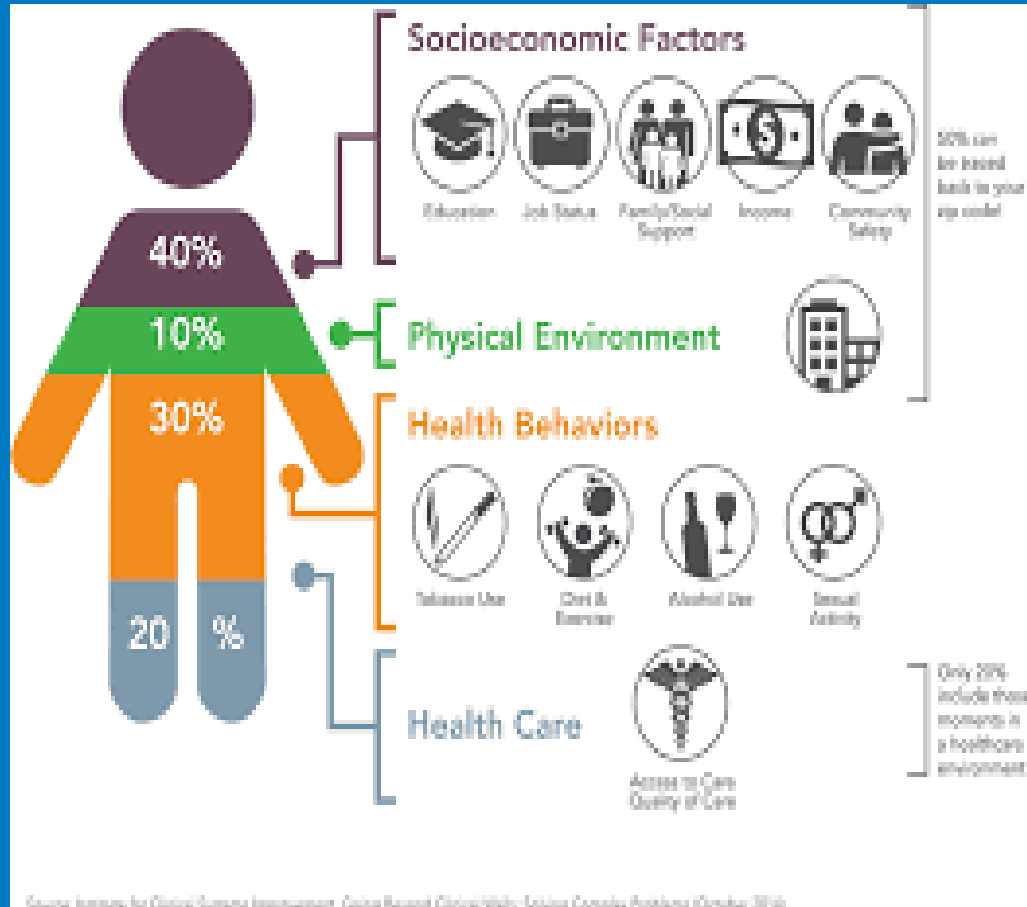


# THE UPSTREAMIST



WHAT HAPPENED TO YOU TVP DR JULY 2021

[deepakravindran.co.uk](http://deepakravindran.co.uk)



## Biopsychosocial model of pain

Championed by Butler and Moseley and others. 2000

## INTAKE QUESTIONNAIRE

HIGH SCORES ON SCALES OF  
ANXIETY AND DEPRESSION AND  
HIGH SCORES ON PCS 42/52  
ACE SCORE 5/10

SINGLE MOTHER WITH 3 CHILDREN AGED 10,6,4  
SEPARATION – 3 YEARS AGO  
IPV AND DOMESTIC ABUSE SINCE MARRIAGE >10 YEARS

Compassionate

Aspirational

Resourceful

Excellent

WHAT HAPPENED TO YOU TVP DR JULY 2021



**Women who have experienced domestic abuse are almost twice as likely to develop fibromyalgia and chronic fatigue syndrome (CFS) than those who have not. (Study from Birmingham Uni and Warwick Uni)**

[J Womens Health \(Larchmt\)](#). 2010 Sep; 19(9): 1665–1674.

doi: [10.1089/jwh.2009.1856](https://doi.org/10.1089/jwh.2009.1856)

PMCID: PMC3120089

PMID: [20718626](https://pubmed.ncbi.nlm.nih.gov/20718626/)

## Pathways of Chronic Pain in Survivors of Intimate Partner Violence

Wuest et al.

Routine assessment for abuse-related injury/PTSD and depressive symptom severity when working with women who report chronic pain

<file:///C:/Users/deepa/Downloads/Domestic-Violence-Project-Fact-Sheet.pdf> MARCH 2021

### Airing Pain 126. Domestic Violence and Chronic Pain



'This is a clear, coherent and informative programme for patients with chronic pain, family members and clinicians'

Domestic Violence and Chronic Pain  
Airing Pain

Dr Barry Mason, Institute of Living Pain

SUBSCRIBE



SUBSCRIBE



Compassionate

Aspirational

Resourceful

Excellent

WHAT HAPPENED TO YOU TVP DR JULY 2021



# Feletti study and CDC



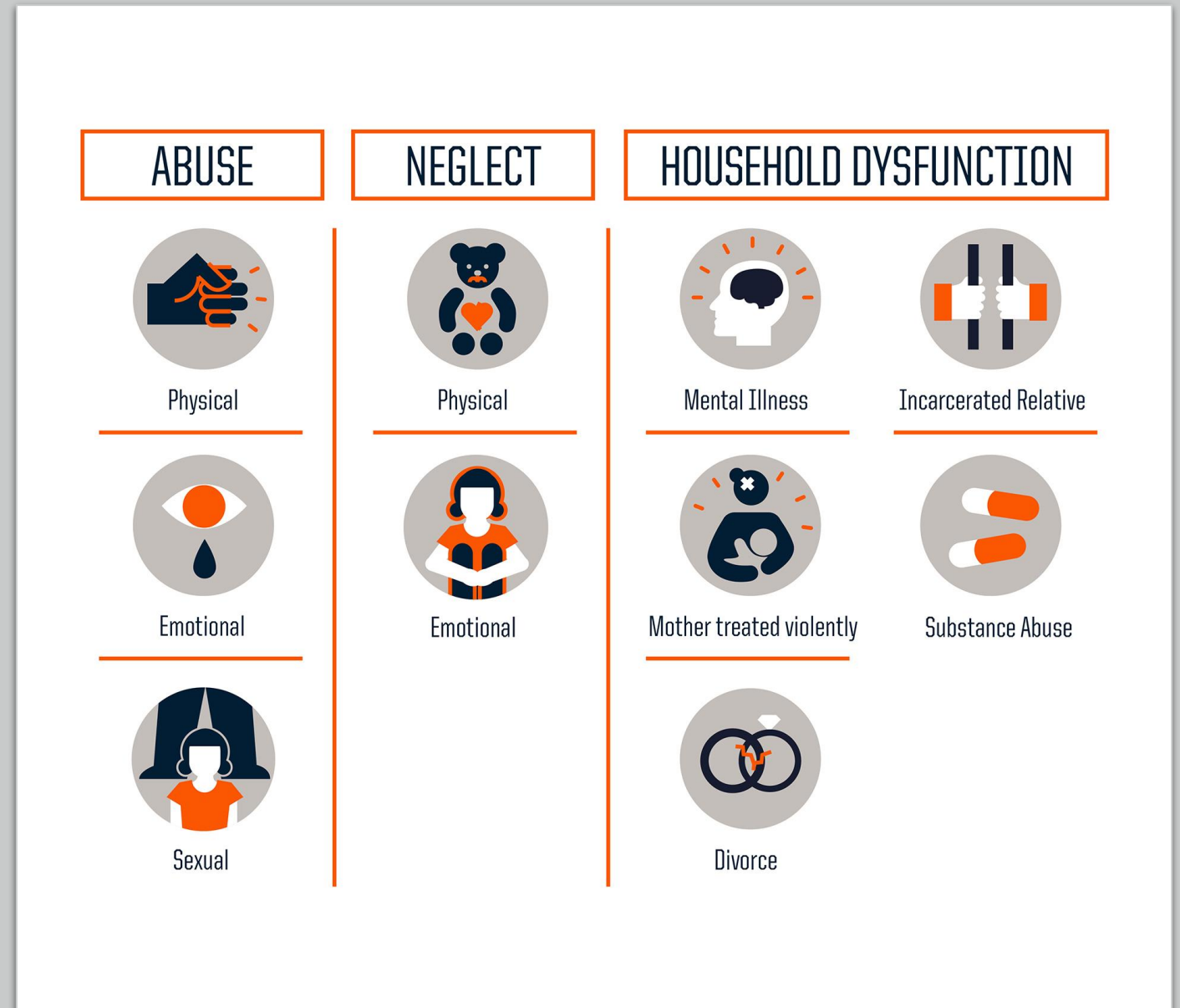
**BACKGROUND**



**THE RELEVANCE**

# ACEs study 1996

- DOMESTIC ABUSE AND IPV
- Bullying, teenage angst,
- traumatic experience early adulthood, bereavement, trauma in adulthood
- COVID19 AND LOCKDOWN/ISOLATION



# WHY DOES IT HAPPEN?

Psychological mechanisms - Increased neuroticism –somatization

Attachment theory – insecure/disorganised attachment

Physiological - Significant developmental trauma affects developing nervous system and HPA axis and amygdala development

Impact on nervous system function and immune and endocrine responses leading to “wear and tear” - early onset physical health and autoimmune issues

NEUROINFLAMMATION DRIVEN BY GLIAL CELLS

# PSYCHONEUROIMMUNOLOGY

- sympathetic arousal - HYPERVIGILANCE
- Altered pain processing
- Impaired stress tolerance and dysregulated HPA axis – IMMUNE DYSFUNCTION
- Epigenetic changes



Dr Jekyll and Mr Hyde



# ACEs and chronic widespread pain/FMS

## Adult victims of childhood maltreatment report

- greater pain and headaches,
- gastrointestinal and respiratory symptoms,
- gynecological problems,
- neurological symptoms and
- overall physical problems and
- visits to health professionals.

In general, individuals who report a history of abuse also report greater symptom severity and medical utilization, including increased use of surgical procedures.

---

# RACER SURVEY

Reading ACE and  
Resilience survey

Assessing the  
prevalence of ACEs in  
patients attending RBH  
complex pain service

10 week period from  
September to  
November end 2018

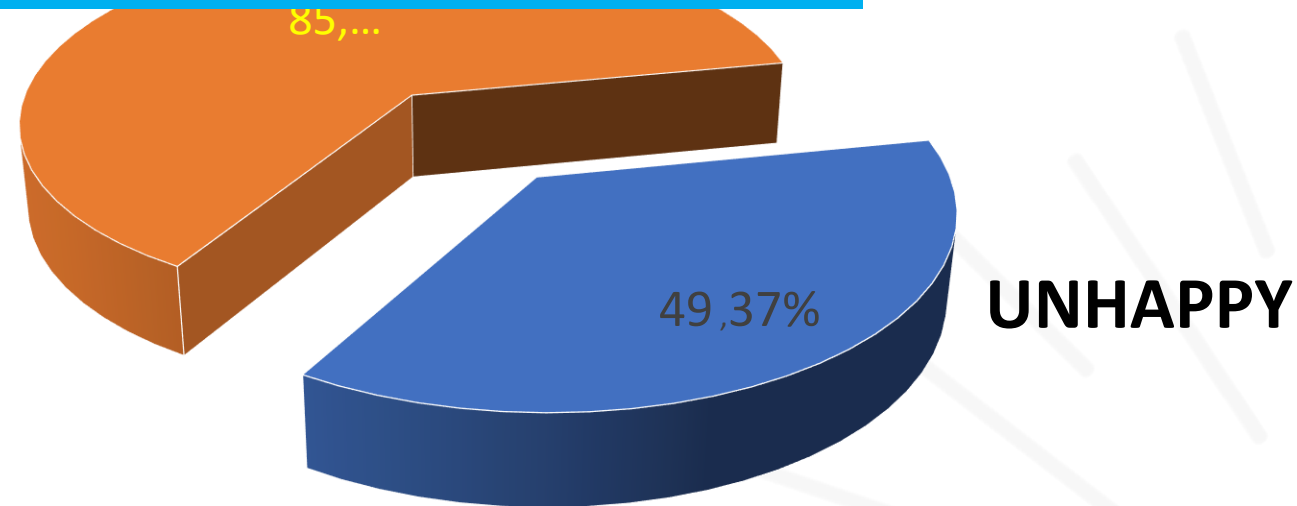
150 questionnaires, 134  
completed

Common comorbidities  
– asthma, HTN, IBS,  
anxiety, depression and  
panic attacks

# DID YOU HAVE A HAPPY CHILDHOOD?

**>4 ACEs – 73.4%**

**MOST COMMON ACEs IS EMOTIONAL ABUSE AND  
NEGLECT - >75%**





# Resilience

RESILIENCE REDEFINED

Is it within themselves? Or

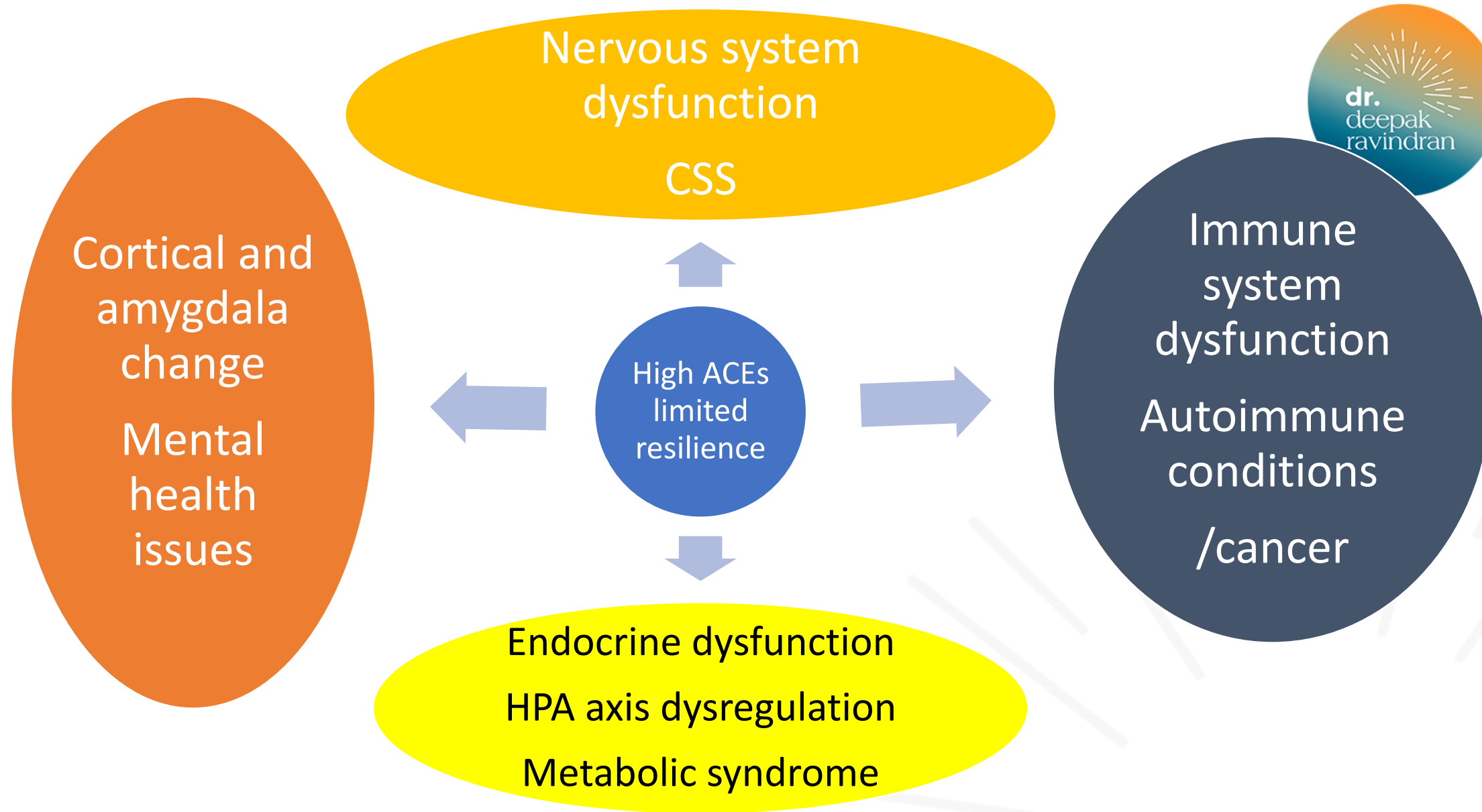
Is it a product of their environment and support?

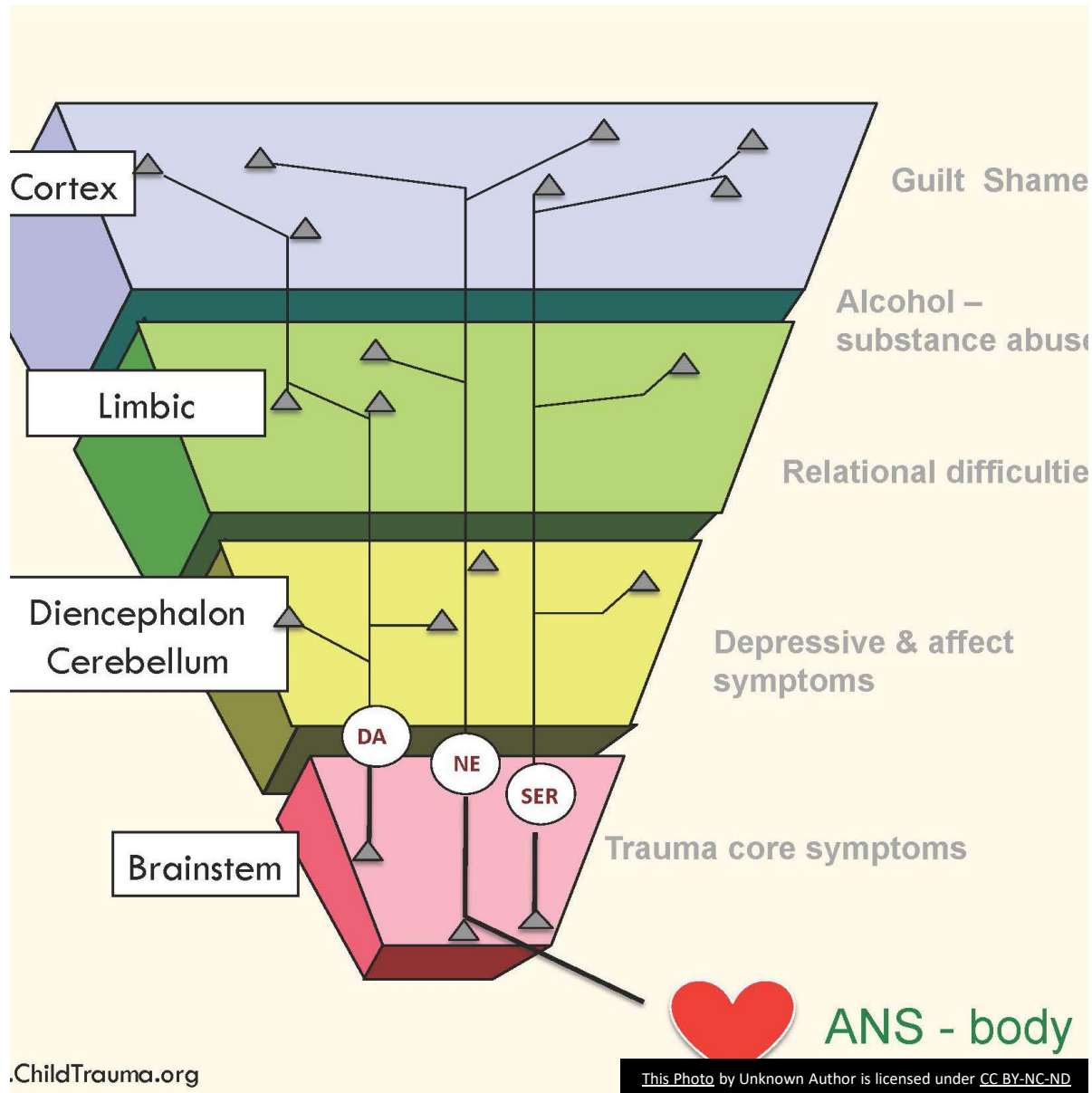


**Table 2** Changes in risk of disease development with increased history of ACE using Cox regression survival analysis.

	0 ACEs (ref.)		1 ACE			2–3 ACEs			4+ ACEs		
	n	P	HR	95% CIs	P	HR	95% CIs	P	HR	95% CIs	P
Cancer	3881	<0.001	0.75	0.49–1.14	0.171	1.02	0.66–1.59	0.925	2.38	1.48–3.83	<0.001
CVD	3882	0.020	1.24	0.73–2.12	0.424	1.68	0.95–2.94	0.073	3.11	1.56–6.24	0.001
Diabetes type 2	3876	<0.001	1.13	0.80–1.87	0.524	1.22	0.80–1.87	0.346	2.99	1.90–4.72	<0.001
Stroke	3882	0.005	1.63	0.74–3.60	0.229	1.91	0.81–4.48	0.139	5.79	2.43–13.80	<0.001
Respiratory disease	3879	<0.001	1.22	0.77–1.94	0.394	1.83	1.15–2.91	0.010	3.50	2.07–5.91	<0.001
Liver/digestive disease	3879	0.004	1.44	0.99–2.10	0.059	1.45	0.94–2.23	0.093	2.50	1.53–4.08	<0.001
Any disease	3866	<0.001	1.17	0.95–1.42	0.134	1.38	1.11–1.73	0.004	2.76	2.13–3.58	<0.001

ACE, adverse childhood experience (see Supplementary data, Box for definitions); CVD, cardiovascular disease; ref, reference category for Cox regression; HR, adjusted hazard ratio; 95% CI, 95% confidence intervals). See text for additional analytical details.





**VEMA**  
**INTAKE QUESTIONNAIRE – GAD/PHQ/ACES/PSEQ/PCS**  
**MOTIVATIONAL INTERVIEWING TECHNIQUE BASED**  
**CONSULTS**  
**MINDSET APPROACH – ONE FOR THEM TO CHOOSE**  
**MEDS - ORT**  
**HABIT INDUCING/BEHAVIOUR CHANGE APPROACH**  
**DIGITAL PLATFORM LINKS –**  
**CURABLE/FOOTSTEPS/INTERNET/FLIPPIN PAIN**



**TRAUMA** : A normal response to abnormal events

3 common themes

- Person was unprepared
- Trauma was unexpected
- Nothing could be done to prevent it

**WHAT IS TRAUMA INFORMED APPROACH?**

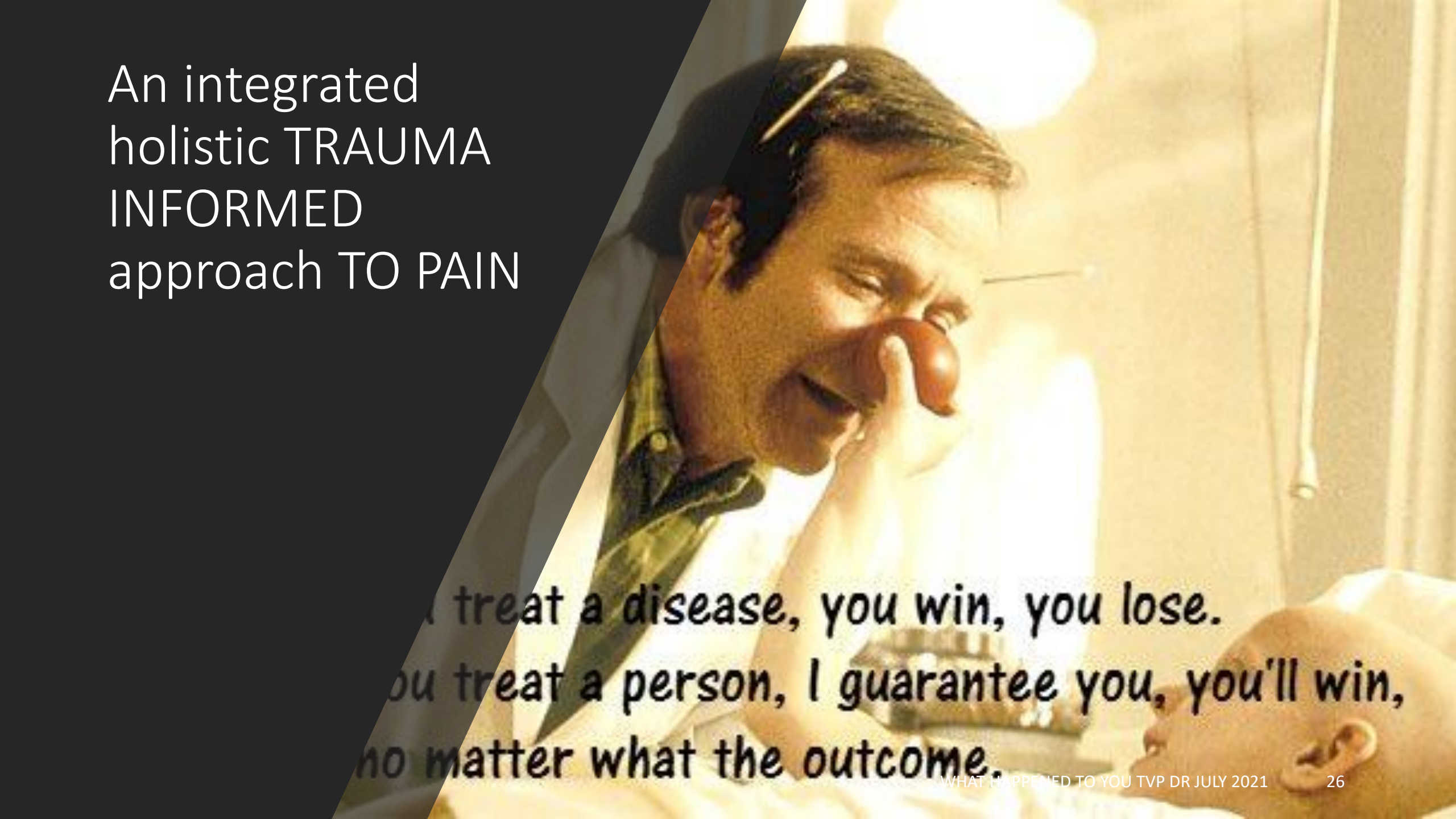
- Realising the prevalence
- Recognising the effects
- Responding in practice
- Resist retraumatisation

### **TRAUMA INFORMED CARE**

A **program, organization, or system** that is trauma-informed realizes the widespread impact of trauma and understands potential paths for healing; recognizes the signs and symptoms of trauma in staff, clients, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, practices, and settings.

SAMHSA 2012 Pg4

An integrated  
holistic TRAUMA  
INFORMED  
approach TO PAIN



...to treat a disease, you win, you lose.  
...you treat a person, I guarantee you, you'll win,  
...no matter what the outcome.

- RESOURCES FOR YOUR PATIENTS
- CURABLE APP
- LIVE WELL WITH PAIN
- FOOTSTEPS FESTIVAL
- LIVINGWELLPAIN.NET
- BOOKS:
  - WHEN THE BODY SAYS NO – GABOR MATE
  - THE BODY KEEPS THE SCORE – BESSEL VAN DER KOLK
  - WHAT HAPPENED TO YOU – BRUCE PERRY AND OPRAH WINFREY
  - PAIN FREE MINDSET – DEEPAK RAVINDRAN
  - HALL OF MIRRORS – KATH TWIGG

