



CHRONICLE



Pain in the Workplace

by Penney Cowan, Executive Director, ACPA

INSIDE

- 2 [The Challenge of Working While Living with Pain](#)
- 5 [The Value of Work in a Balanced Life](#)
- 8 [Dealing with Pain and a New Job](#)
- 9 [Considering Disabilities and Job Performance](#)
- 10 [Coping with Pain on the Job](#)
- 12 [Members' Forum](#)
- 13 [ACPA Updates](#)
- 14 [New Groups and Tributes](#)



Join Us on Facebook

As I began writing this article I decided to research the statistics for pain in the workplace to gain a better understanding of the scope of the problem. I started with the Bureau of Labor Statistics.

As you might imagine, I found myself engulfed in numbers—how many people are hurt in the work place, how many receive workers compensation, and a list of some of the most dangerous jobs.

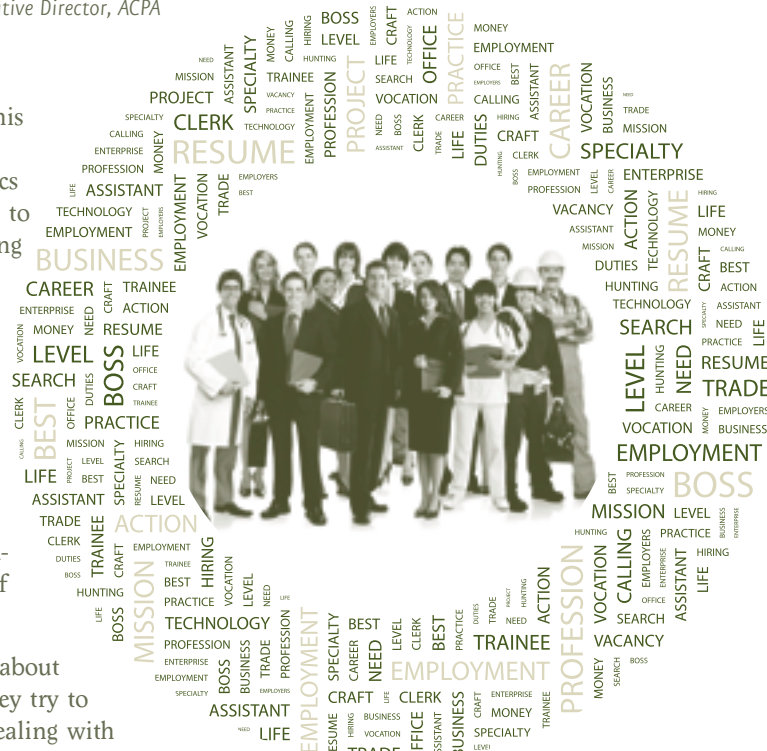
But I didn't see anything about people who struggle as they try to hold down a job while dealing with the pain from an injury or illness.

Here are some statistics that I do know about, numbers that may surprise many of you.

- * Pain is the number one cause of adult disability in the U.S.
- * Pain costs \$294 billion annually in lost workdays, medical expenses, and other benefit costs.¹
- * Lost productive time from common pain conditions among active U.S. workers cost an estimated \$61.2 billion annually, largely due to reduced performance while at work.²

* Thirteen percent of the total workforce experienced a loss in productive time during a two-week period due to a common pain condition, including headache, back pain, arthritis, and musculoskeletal pain.²

The real question is how do people with pain manage to keep their jobs when pain seems to be their constant companion? For them, the responsibility of holding down a full-time job and keeping up with all the basic activities of daily life can feel insurmountable and eliminate any chance of having time to enjoy life.



CONTINUED ON PAGE 9...

The Challenge of Working While Living with Pain

by Erin Kelly

Tom Norris hid his pain for the last four years of his career in the U.S. Air Force. Despite hospitalizations for nerve pain, and sometimes having to walk with a cane—or crawl, when nobody was looking—Norris tried to keep working and not show any weakness. “Even if I had excruciating abdominal pain I’d tell people I was okay,” he says.

Work is a big challenge for people with chronic pain. Some keep working at all costs—even at the expense of their health and relationships. Trying to find a balance between a job and taking care of yourself can be challenging. But the financial and emotional impact of losing a job because of chronic pain can be devastating.

Many people with chronic pain have trouble staying employed. “Managing my pain is a full-time job,” says Catherine Cartwright, an ACPA regional director based in Vallejo, California. She notes that her physical abilities can change unpredictably. “One day you might be able to turn a certain way, or move your arm [without pain] and the next day you just can’t,” she says.

Working Through Pain

Some people manage to stay with their jobs despite chronic pain. Norris, now an ACPA facilitator in Los Angeles, California, made adaptations and changed jobs within the Air Force to try to continue working full-time after he developed pain. Although he stayed employed, he doesn’t recommend trying to deny chronic pain like he did. “Most of us try to do too much, to prove that we’re as good as everyone else. We are, but we have to recognize our limits,” he says.

When Norris started having difficulty walking, he was supervising maintenance for a fleet of more than 1,000 airplanes. “It was mostly desk work, but I did a lot



Most of us try to do too much, to prove that we’re as good as everyone else. We are, but we have to recognize our limits.

of walking, putting people together to solve problems. As my pain progressed and I had to stay at my desk, it didn’t hurt my effectiveness, but it frustrated me. I liked getting out to see the work where it was happening,” he says. Norris rotated into a job that involved extensive travel, but later had to change to a different administrative job that was equally rewarding. Eventually, with his pain still worsening, he moved his desk from a busy location with lots of face-to-face interactions to an inner office that gave him more privacy and let him do more of his work by phone.

Cartwright also made changes in her work routine to stay at her job as long as possible after she developed chronic pain from an injury at work. She cut her work day back to four to six hours. Her employer changed desk furniture to make her workspace ergonomically correct. “They adjusted my schedule so that I could go to water therapy in the morning before work,” Cartwright says,

“and I also had space I could use to lie down for a few minutes during the day.”

Despite these accommodations, Cartwright eventually realized that the basic requirements of her work as a drug and alcohol rehabilitation counselor were too much for her. “I can’t sit for very long,” she says, “but you can’t just walk out in the middle of a 50-minute group session.” Pain affected her patience too. “I was irritable and started being mean, and that’s just not appropriate,” she says. Her career choice even limited the types of pain therapies she could try. “You can’t take pain medication and do the kind of job I was doing,” she says. “I realized I couldn’t go back to that field.”

Kelly Davidian, of Carmel, California, also had to leave her chosen career because there was no way to accommodate her disability after a series of back injuries. “I was a firefighter,” Davidian explains. “There’s really no way to do

CONTINUED FROM PAGE 2...

that job if you can't lift your gear and work in awkward positions," she says. "You're either in or you're out." Even the supervisory aspects of her job as a fire captain became difficult because pain made it hard to focus during stressful situations. "I realized that I didn't belong there," Davidian says.

Finding Balance at Home

If you are struggling to get through a work day, what happens when you come home?

Before learning to adjust their activities, both Cartwright and Norris had difficulty maintaining a good home life while trying to stay at their jobs. "No matter what the pain was like, I did my job," says Norris. "Then I would come home and collapse." Cartwright also put all her energies into work at the expense of her home life. "I gave the best I had to my job," she says, "but when I came home I just got into bed. I had nothing

left to give because of the fatigue produced by my pain."

Cartwright's life changed drastically during that period. "I got a divorce during that time," she says, noting that failed marriages are a common side effect of chronic pain. Her relationship with her son changed as she came to rely on him more. "He adapted, and became very helpful," she says. "I'd been involved with community organizations all of my life, but I couldn't be involved any more. My relationships with my friends changed because I had to say no to a lot of activities. In fact, my whole life changed."

Norris was lucky to have a spouse who could adapt to his restrictions, but they also changed their lifestyle significantly. "I did what I could do at home," he says, "And Marianne learned to adjust what she expected me to do." He didn't get exactly what he expected either.

"When I had to stay in bed, at first I expected Marianne to be around all the time," says Norris. "But she needed to continue her life outside of our relationship. I realized what it's like to be around someone who hurts all the time and depends on you—and who can be cranky!" Over the years they've balanced their needs and activities so that they enjoy their time together and apart. "For household tasks, I do what I can, she does what she can, and we have to find people to help with the rest," Norris says. "We go out together maybe once a month now, though we used to go out once or twice a week. I think we appreciate our time together more."

Leaving Work

Giving up full-time employment is one of the most significant issues people with pain face. Many people tie their self-worth to their usefulness in a career and people who haven't yet learned to pace themselves and accept their limitations may feel that they've failed a basic test of adulthood if they can't work. Finances can be a big issue too, if you no longer have the income you're accustomed to.

Cartwright had difficulty picturing her life without a full-time job. "I didn't know anything else to do but work; I'd worked all my life," she says. She stuck with her job even after a doctor advised her to stop. "I kept telling myself that it would be okay. I tried to make it okay, but after two years of not getting any better I started thinking differently." She took pride in doing a good job, but it was hard to work with pain. "I felt that I was probably injuring myself more by staying on the job. My aunt even asked me once, 'Are you trying to kill yourself?'"

CONTINUED ON PAGE 4...



The Challenge of Working While Living with Pain

CONTINUED FROM PAGE 3...



For Davidian, leaving her job as a firefighter was part of a big change in her identity. “I went from being a super-physical, type-A person to not being able to carry my own grocery bags,” she says. Although she had returned to work after earlier injuries with the help of epidural pain treatments, a third injury led to chronic pain and she was forced to retire. “It was hard when I was retired,” she says. “I really wasn’t ready. I had been promoted to captain, and I was working toward my next promotion. I felt like I was a quitter, or a loser. It was a while before I could even go and visit a fire station.”

Norris also had to remodel his life after a forced retirement. “I didn’t like it at all. I had been on the list to make general,” he says. “But the medical board basically said I would never be able to do any job in the Air Force.” Norris eventually found other ways to do meaningful work. He became a volunteer by starting an after-school program for at-risk kids in his neighborhood, and working with the ACPA.

Considerations for a New Career

Davidian hopes to be able to manage her pain well enough in the future to consider a full- or part-time job in a less physically demanding field.

“After I had to retire, I thought ‘I’m 47 years old, this can’t be the way my life is going to be for the rest of my life. This isn’t enough,’” she says. Ten months after leaving the fire department, she has recently completed a functional rehabilitation program that helped her realize that she could have a life after being injured. She plans to return to college but wonders how much time she will have to devote to a career when she also has to spend so much energy on staying well.

“The program taught me that chronic pain is like having diabetes—you have to manage it the rest of your life.” She is vigilant about her sleep hygiene and diet, and works every day to improve her strength, flexibility, and mindfulness. “It takes a lot of time; sometimes half the day is gone before I’m done,” she explains. “I’m not sure how I would be able to work full time. If I could

eventually manage to balance both health and work, it would be nice.”

Other issues can come up when thinking about starting a new career as a person with pain. “What if I start down a career path and then I find out it’s not sustainable, physically?” Davidian wonders.

Finding a job that is as rewarding as the career you left also can be daunting. “I loved being a firefighter,” Davidian says. “I want to do something that really matters. Also, as a fire captain I had a position of authority,” she points out. “Starting over will be a huge adjustment. I have to learn how to be okay with being a beginner again.”

There are financial and personal considerations too: a person with pain might have to balance a new salary against receiving disability benefits, decide how much to reveal to an employer about his or her medical condition, or struggle with access to employer-sponsored insurance coverage.

Norris says that being open about limitations can help people with pain find jobs they can stick with. “You have to be honest about what you can do and what you can’t—and that’s true if you’re working for pay or doing volunteer work.” It’s also important to learn to take breaks so that you can maximize the time you can work. “Some jobs you can do at home, and at your own pace,” Norris says, “especially if you learn computer skills.”

Whether you are trying to stay at work, preparing to change careers, or thinking about volunteer work, taking care of yourself is always your first job when you have chronic pain. Working can make you feel useful, and like part of a larger community, but it also presents challenges to your well-being. By learning what is reasonable for your body, and negotiating realistic expectations both at work and at home, it is possible to make a difference in the world even with chronic pain.

| TOP |

The Value of Work in a Balanced Life

by Alison J. Conte

For many of us, our job is an essential part of our identity. Along with volunteering, hobbies, friends, faith, and family, work gives purpose to our lives.

When chronic pain inhibits your ability to perform your job, it can be a crushing blow.

ACPA encourages people to build a fulfilling life while living with chronic pain, but what if you are cut off from the work you enjoy because of your pain?

When illness or injury leaves workers with ongoing pain, they may no longer have the energy, strength, or focus to do their current job. While a short-term disability leave is usually recommended during recovery, there are many negatives to long-term unemployment.

“Staying at work is healthy. The longer you stay off, the less likely you are to ever go back,” said Dr. Steven Feinberg.

Dr. Feinberg is a physiatrist and pain specialist in Palo Alto, California, who directs a functional restoration program to help people with pain, illness, or injury return to work.

“Worklessness is bad for people,” agreed Dr. Jennifer Christian, a nationally-known physician with a special interest in work disability prevention and reduction. “People who don’t work have a higher mortality rate than those who do.”

“Work is a great distraction and distraction is a great treatment for pain,” said Dr. Christian. “Our brain is arranged in a way that we can’t think about two things at once. The less you think about your pain, the better you feel. So you might as well be at work and not at home feeling sorry for yourself.”

How Attitude Influences Disability

The disabilities that come with chronic pain affect us in different ways.

- * Some people are learning to manage their pain and wish to return to work.
- * Others know that life is different when living with pain and need to find a different job that is compatible with their more limited abilities.
- * Still others feel their pain totally disables them and will not consider any job, unable to even work from home.

“Attitude is key to believing that fulfilling employment can be part of a life that includes chronic pain,” said Dr. Feinberg.

Dr. Christian led the American College of Occupational & Environmental Medicine’s (ACOEM) development of [guidelines](#) to prevent needless work disability. The main message of these guidelines is that work avoidance and job loss following injury, illness, or aging is largely preventable and not medically required.

The guidelines point out that a team approach by employers, doctors, therapists, insurers, and others is required to promptly help these people keep life as normal as possible and get “right back in the saddle” to safe and medically appropriate work. Otherwise prolonged tenure in a passive “patient” role increases the risk of developing an “I can’t” self-concept, along with needless long-term withdrawal from work, social life, and a productive contribution to society.

“Long-term worklessness is one of the greatest risks to health in our society. It is more dangerous than the most dangerous jobs in the construction industry, or [working on an oil rig in] the North Sea, and too often we not only fail to protect our patients from

CONTINUED ON PAGE 6...



The Value of Work in a Balanced Life

CONTINUED FROM PAGE 5...

long-term worklessness, we sometimes actually push them into it, inadvertently,” said Dr. Gordon Waddell.¹

He noted that work provides people with financial security, a structure to their days, and a chance for physical activity. It offers community, social interaction, and a sense of purpose, contributing to one’s self-esteem. Those without work in their lives are more likely to be sick, engage in risky behaviors such as excessive drinking, or fall into depression, and other emotional distress.

When Work Causes Pain

“It’s different if the physical activity on the job actually causes your pain. But that doesn’t mean you have to quit. You need to consider what you can do to adjust the task, change movements, and do your job differently,” said Dr. Christian.

Seeking accommodations in the workplace requires dialogue between the employer, the worker, and the worker’s physician. “It can be embarrassing to ask for favors and declare yourself disabled. But too often people focus on the part of their jobs that they can’t do, instead of all the aspects they can still do,” she said.

For your employer, this is also a difficult situation; he or she must consider the impact on health and disability insurance, the effect of a reduced workload on the bottom line, and the inconvenience of hiring and training someone new. Enlightened companies want to keep experienced, valuable employees healthy and on the job, but they do not always understand the law, or know what “reasonable accommodations” are all about.

“Put it in personal terms when you have a conversation with your boss,” said Dr. Christian. “Say, ‘this is what I need



to be able to continue working for you and being as productive as possible.”

Reasonable Accommodations

Although the law allows employers to terminate disabled employees if they can’t perform the essential functions of their job, not every part of a job is essential, Dr. Christian explains. Employees can ask for reasonable accommodations to help them do those essential things.

In relation to the American Disabilities Act, “reasonable accommodation is any modification or adjustment to a job or the work environment that will enable a qualified applicant or employee with a disability to participate in the application process or to perform essential job functions.”

Dr. Christian notes that most workplace accommodations cost less than \$200. These include equipment like monitor stands, high stools, or foot rests to relieve a worker’s back pain.

Other accommodations are free, like assigning one worker to help another lift heavy boxes at the end of a shift. Some workers may need to switch to reduced hours or a less stressful assignment to make the best use of available energy and avoid aggravating their pain. (For tips on coping with pain while at work, see page 10.)

Workers’ compensation or disability insurance companies may be willing to cover the cost of adaptive equipment. In addition, employers can investigate tax incentives to cover some costs associated with accommodations.²

Talking with Your Physician

Though disability laws vary from state to state, a physician determines if it is wise or healthy for a person to return to work. But just as people with pain benefit from taking an active role in their health care, they can further benefit from taking an active role in minimizing the disruption their pain causes to their work life. Doctors will usually try to support their patient’s goals—if they know what those goals are.

“Every conversation between a person with pain and their doctor should include, ‘I want to work,’” said Dr. Feinberg. “You need to tell your doctor what kind of physical activity is involved in your job. Describe the hours, the stress levels, the working conditions, and your commute. Then ask the doctor this: ‘Will working actually harm me in any way? If not, tell me what I need to do to get back to work.’”

Remember that it may take a while to build up your own physical fitness so you have the strength to work all day and do your job. “Take care of yourself at work. Start slow, use good posture, lift properly, pace your activities, take breaks to change position, exercise, and stretch,” he advised.

CONTINUED ON PAGE 7... | TOP |

Don't Wait Till It's Too Late

“Work is often our social life, our identity, our purpose—and having a regular paycheck is better for almost everyone financially,” said Dr. Feinberg. “Becoming unemployed is very hard on people and their families and can compound the impact of the illness and pain.”

If you have a health condition that is making it hard for you to do your job, talk to your employer about it before you have to take time off, advised Dr. Feinberg. “Otherwise your slowdown might be viewed as unproductive and cause you to be dismissed.”

“If you are forced to take a long disability leave, your employer may begin thinking about you negatively, as an idle resource that is costing the company money. If you approach them with constructive ideas to make you more comfortable—and more productive for them—an enlightened employer will try to accommodate you,” he said.

A Positive Mind-Set and Self-Image

Sometimes there are hidden reasons why someone is avoiding a return to work. “Some people use pain as an excuse to get out of participating in life. Other people can accomplish an awful lot despite their pain,” said Dr. Christian. “Don't use feeling bad as an excuse. Pain comes with life. So make a commitment—even if it is inconvenient or uncomfortable at times—to a rich life of interesting activity.”

Develop a goal and a positive attitude, she recommended, accepting that you may need to shift to a new line of work where you can manage your pain better and function within your limitations. This may require returning to school or other training. Even if this takes years, you will be making progress toward a goal.

Resources

The United States Workplace Wellness Alliance's mission is to improve the health status of the U.S. workforce by increasing the number of U.S. businesses that adopt worksite health promotion or wellness programs. Learn more at <http://www.uswwa.org/>

The U.S. Chamber of Commerce, (www.uschamber.com/issues/health/health-care) supports workplace wellness, giving tax-favored status to programs aimed at keeping employees healthy, other reforms, and legislation to encourage employer-sponsored workplace wellness programs.

Disability Works has information on increasing opportunities for people with disabilities at <http://www.disabilityworks.org/>

U.S. Department of Labor on job accommodations <http://www.dol.gov/dol/topic/disability/jobaccommodations.htm>

Dr. Christian said people must be assertive about their desire to work and communicate this to their employer and physician. “Find a way to work. Don't give up,” she said. “Tell yourself, ‘If I can't keep the job I've had, I'll learn to live with it. But I'm still me and I can have a good life. I will figure out a new way to hold up my end and make a contribution.’”

1 Dr. Gordon Waddell in a May 26, 2010 position statement of the Australasian physicians on “The Health Benefits of Work.”

2 See <http://askjan.org/media/tax.html> and more information from the Job Accommodation Network, <http://askjan.org/>

Dr. Jennifer Christian, an ACPA board member, is President of Webility Corporation, a consulting firm that is a catalyst for positive change in disability benefits and workers' compensation systems. She is a leader in the American College of Occupational & Environmental Medicine (ACOEM). She also founded the 60 Summits Project, a non-profit organization to mitigate the impact of illness on people's lives and to prevent needless work disability by helping people stay employed.

Dr. Steven Feinberg, an ACPA board member, is an Adjunct Clinical Professor and teaches at the Stanford University Pain Service. He is in private practice in Palo Alto, California. Dr. Feinberg served on the ACOEM Chronic Pain Guidelines Panel Chapter Update and also as Associate Editor and he also serves as a consultant to the Official Disability Guidelines (ODG). He has special interest in the areas of delayed recovery and early intervention and in functional restoration chronic pain management.

*Without work,
all life goes rotten.*

— Camus

Dealing with Pain—and a New Job

People with pain who are valued and appreciated by their employers will often be able to find ways to continue to do their jobs, despite fluctuations in their pain levels. But facing a new or potential employer is a different situation.

When interviewing or even networking with people who don't know your history, carefully consider your motives for telling them all about your chronic pain, suggested Rosalind Joffe. She is a chronic illness coach, helping people with chronic illness and pain find ways to succeed in their careers.

“What makes you think they should know about it?” she asked. “Think about if the pain will have an impact on your performance. Does it change the way you can do the job?”

If you can do a job as currently described, your pain doesn't need to enter into the conversation. But if your pain or illness will require that you develop a work-around to do the job successfully—if you need a non-traditional way to complete the required tasks—you should consider how and when it should be discussed.

“Take it slowly. First get them to know you and like you. Make sure they understand the skills and value that you have,” she said. “Then be sure that the job, working conditions, and related stress will not aggravate your pain further.”

Joffe suggested that if you must reveal your condition, wait until the negotiating phase, when they are hoping you will accept an offer. “Explain that you are confident that you can do the job, and be prepared to discuss how you will compensate for your condition. Perhaps you can't type for long periods of time and have bought your own voice recognition software,” she said.

But if your back pain or migraines flare up or get worse during your time on the job, talk about it to your boss and co-workers. “If no one knows, they will just see your mood change and your attitude deteriorate. You'll lose credibility and their support.”

If they know about your condition, “coworkers are more likely to give you the support you need rather than reject you,” Joffe said. “Otherwise, when you are dealing with chronic pain, they will have a hard time dealing with you and your ‘moods.’ They may think you dislike them or the work.”

“But you need to be realistic about how the pain is affecting you. Can you be there 100 percent?” she said. Joffe pointed out that while it is good to work, not all jobs are the same in terms of emotional or physical stress. The supervisor's tolerance for having an occasional bad day may be stronger in one department than another, even if sick days are company policy.



If they know about your condition, coworkers are more likely to give you the support you need rather than reject you.

“It's very hard to be in the workplace these days,” she added. “Employers want the most out of all their workers. Be sure you are not pushing yourself beyond your capacity. Most jobs have stress, but some kinds of stress are more debilitating than others.”

She continued, “If you are respected as a hard worker, you will get support from your co-workers on those tough days. Find ways to deal with the pain so it doesn't dampen your mind and your spirit.”

Building on her own experience living with chronic illnesses, including multiple sclerosis and ulcerative colitis, Rosalind Joffe founded the chronic illness career coaching practice, cicoach.com. Dedicated to helping others with chronic illness develop the skills they need to succeed in their careers, Rosalind firmly believes that living with chronic illness does not preclude living a full and successful life. (The ACPA does not endorse or advocate for any for-profit organization or products.)

| TOP |

Considering Disabilities and Job Performance

Adapted with permission from *Ask Dr. J Newsletter Columns*, Webility Corporation

Can people with non-work-related medical conditions and disabilities be good, reliable, high-performing employees?

When people have lived without a job for a while, they tend to be grateful when they do find one, and will move heaven and earth to keep it. However, employers often have it backwards. They are not sure that people with disabilities can be good employees.

It is understandable that employers are concerned with protecting their business. That's their job. They need employees to be loyal, productive, perform on par with others, have good attendance, and remain with the company a long time. They would prefer not to hire employees who are more likely to injure themselves at work or drive up the company's healthcare benefit costs by having a lot of medical expenses and so on.

Happily, their fears are not borne out by the facts. Many large employers have publicly commented that employees with disabilities are actually "better" employees or at least "as good" as those without (DuPont, Sears).

There is some new research data to support these assertions, though the sample size was small and self-defined. A team of researchers at DePaul University interviewed administrators and analyzed data comparing about 95 disabled employees to 219 non-disabled employees. They found

that the employees with disabilities were just as dependable and productive as employees without disabilities and that the costs of the accommodations they made were often minimal.

For more on this story, visit <http://www.webility.md/pdfs/DrJ-column-2008-02.pdf>

Pain in the Workplace

CONTINUED FROM PAGE 1...

Most people with pain who are still working at jobs outside the home do little else. It takes every ounce of energy and strength to maintain the status quo. Many find their endurance is consumed by day-to-day housekeeping chores alone.

Yet, there is something about a job that completes us. We seem to base our self-worth on what we can accomplish or contribute at work each day. When pain takes away our ability to work, we lose a part of our self-worth, even our identity. Not only do we lose our personal value when we lose a job, far too often we lose our only income, our health care benefits, our social life, intellectual stimulation, and emotional stability. For some, joblessness costs us our homes, friends, and family.

The family members of people with pain have to take on more responsibility. This can translate into working longer hours to make up for less income, being both mother and father to children, and taking care of the house. That is a lot to ask of a person, a person who is often forgotten within the greater tragedy of chronic pain in the family.

Workers with pain can face many problems and obstacles. For some, disability is the only option they have. Others might lose status and career growth because they need reduced hours to accommodate the limitations caused by chronic pain.

But you should know that there *are* ways to manage pain and manage a job. You can pace yourself to avoid pain flare-ups, use better ergonomics to fight back spasms, stretch and exercise to build your strength, and reduce stress to prevent headaches.

All this requires open interaction with your employer, including frank conversations about your desire to be productive as possible, while managing your pain.

In this issue of the *Chronicle*, we will review some ways to cope with pain while at work, the advantages of working over not working, and the importance of attitude. In the end, it may be your image of yourself as a total person that helps you survive: an employee, yes, and a person with pain, but much more than either one.

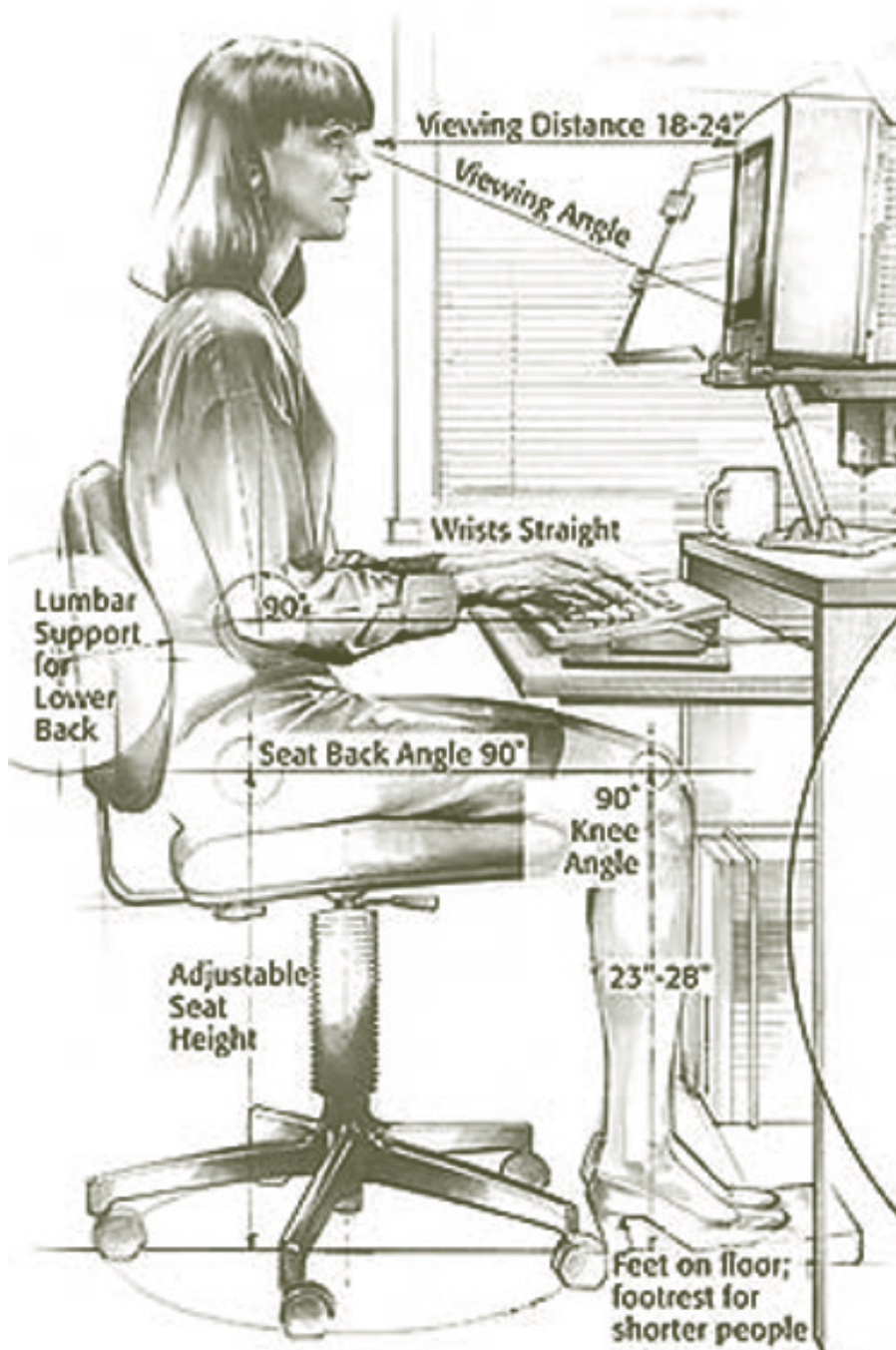
1 National Academies of Sciences and Institute of Medicine. 2001

2 JAMA, 2003; 290 (18) 2443-2454, Stewart et al. "Lost Productive Time and Cost Due to Common Pain Conditions in the U.S. Workforce" <http://jama.ama-assn.org/content/290/18/2443.abstract>



Coping with Pain on the Job

Use Computers Properly to Avoid Back Pain and Repetitive Strain Injuries



Managing pain at work is a job in itself. While work is a great distraction, the added stress and physical demands can cause or aggravate chronic pain.

As we spend more of our work and leisure time on computers, repetitive strain (or stress) injuries (RSI) are on the rise.

RSI is caused by the motions that are repeated again and again while typing or browsing the Internet for long periods of time, particularly if the user has poor posture and doesn't change position for several hours.

Proper ergonomics—the science of designing the workplace environment to fit the user—can prevent repetitive strain injuries.

Revealed in pain in the shoulders, hands, neck, or arms, RSI can also be caused by repetitive movements similar to assembly line work. These types of soft tissue injuries are diagnosed as nerve spasms, trigger finger, tennis elbow, carpal tunnel syndrome, tendonitis, and bursitis.

Those with RSI experience constant pain in the hands, elbows, shoulders, neck, and the back, and sometimes cramps, tingling, and numbness in the hands. Hand movements may become clumsy and fine motor tasks increasingly difficult.

In 2002, employers reported a total of 487,900 lost workdays due to work-related RSIs, nearly 50 percent of all lost work days. And of course, people who work in pain may not be as productive as those who are pain free.

Computer-related RSIs are caused by several factors:

- * **Stress**—creating tension in the neck and shoulders
- * **Repetitive movements**—improper keyboarding and mouse use

CONTINUED ON PAGE 11... | TOP |

CONTINUED FROM PAGE 10...

- * **Force**—typing too hard or holding the mouse too tight
- * **Poor posture**—leaning forward or reaching for the mouse
- * **Unchanging positions**—sitting too long without a break

If you spend a lot of time at a computer, at home or work, consider these changes to improve your ergonomic design.

- * Adjust your chair so you sit with feet flat on floor or on a foot rest. Knees should be bent at 90 degrees and legs uncrossed.
- * Your desk should be at a height so that your elbows form an 'L' and you don't have to reach for the mouse or keyboard. Consider a keyboard tray support if needed.
- * Shoulders should be relaxed.
- * Place the monitor at eye level, so your neck and head are in a neutral position. Arrange it so there is no glare on the screen.
- * With your back against the back of your chair, place the monitor an arm's length away from you, so that you don't have to lean forward to read.
- * Move your legs often. Sitting with the legs immobile for long periods of time can lead to swelling and potentially, blood clots.
- * Be sure that your mouse isn't forcing you to bend or stretch your wrist, hand or fingers.

If you use a laptop, make sure that you are not leaning forward, with your shoulders hunched, putting stress on your forearms and wrists. This can lead to neck strain. Lower your risk by using a separate monitor, docking station, and keyboard with your laptop.

Change posture and activities often. Take a break, stretch, walk around the office, or do something else for a while. If you have a coffee break or lunch hour, get out and walk, or do some stretching exercises.

Here are some general tips for alleviating back pain while at work.

- * Make sure your seat is the proper height from the floor and try to maintain a good posture while sitting. Do not sit hunched over your desk. It is important to keep your neck in alignment with your back.
- * It may be helpful to place a small stool at the foot of your chair. When you are feeling back strain, place your feet on the stool to ease the strain.
- * Place your hands on the sides of your chair with your weight resting on your arms for a few minutes. This will take the pressure off your back.
- * When you lift, make sure you bend from the knees and not your back. Bending at the knees puts most of the strain on your legs rather than your back.

If you stand at a work table all day, try sitting on a stool that will permit you to work at the same level as standing. Standing with one leg raised slightly off the ground, resting on a ledge with help take some strain off your back. Alternate legs when you tire of one position. Make sure that your work table is at a level that will permit your arms to fall naturally on the top.

Resources

[Bob Anderson's books on Stretching and Stretching in the Office](#)

[Lifting Safety: Tips to Help Prevent Back Injuries](#)

[First Steps: From Patient to Person; Chapter 18, Helpful Hints for Everyday Living](#)

[Staying Well, Advanced Pain Management for ACPA Members: Chapter Seven, Reassessing Your Skills \(also summarized in the *Chronicle*, December 2009\)](#)

[Safe Computing Tips](#)

| TOP |

Members' Forum

Regular People

by Melissa Majkut

When you see me in the check-out lane at the store,
and I am moving slowly

Please be patient, I've been in pain for five days now.

When you see her, and she looks beautiful in her wheelchair,
smile at her.

She spent 1½ hours putting on her lipstick so she could
"still look good."

When you see him, and he's sporting his baseball cap,
with "Veteran" written on it

Spend a moment talking to him.

He spends every day a bit compromised, so you can live
a life of freedom.

When you want to reach for the cell phone on the floor of
your car, and you're driving

Please don't.

The chronic pain you may not have by avoiding a
car accident, may be your own,
Or it may be a child's safety you protect.

Every day, you talk to one of us, see us on the street,
or in your family:

The "Quiet Group"—the ones who have chronic pain.

We don't talk about it often; the pain and the
disappointment of living a "compromised" life.

Who really wants to listen? It's depressing (for us too!)

When we look really bad, we don't want to hear that
(even if it's true)

When we look really good, it hard to hear,
"Huh, you don't look sick."

We have guilt about not being who we want to be,
who we thought we would be.

We have joy about the few moments in an hour,
or a day, or a week that we are pain-free.

We've become mindful of the important things:
our family, loved ones, and beauty in nature.

We've become determined to continue on,
while at the same time surrendering to how things are.

We're tired of specialists, of traveling for medical care,
of surgeries that never seem to work.

We're hoping tomorrow will be better, and are
grateful for the sunshine today.

We are just regular people, with regular families,
with irregular pain levels.

That's all. Pretty simple.

We are just regular people, just trying to live a regular life,
while managing pain.

I wrote this poem in July 2010. In chronic pain since being struck by lightning a few years ago, I find painting and writing helps me cope. The help and support I get from the Southern Maine Chronic Pain group has been a godsend and I don't really know how I would have managed to get through the last two years without them. Ernie Merritt, our facilitator, is an individual very dedicated to serving the needs of others. Two years ago I had no idea what ACPA was. Now, I frequently find myself being a resource for folks in our community, and have some hope to share with them, knowing an entire non-profit organization is dedicated to education, communication, and collective research of chronic pain.

—Melissa Majkut of the Southern Maine Chronic Pain Support Group

Poem for a Special Lady

Peer support is vital and support groups provide that. But to have a family member, one who doesn't actually experience chronic pain but understands anyway, is rare and to be treasured. My wife is one of those treasured few; this is for her.

—Jerry Becker, facilitator, NYC Westchester County

*In the beginning, not trusting anyone,
Reaching out for the yin to match my yang,
Always too much hurt for another to bear,
This burden of pain—too heavy for any woman to share.*

*My red light going off.
Always dissuading, never persuading,
The inevitable look of disbelief, (the sickening folly of
first encounters)
Inexorable rejection upon clumsy attempts at affection,
Till there was you.*

*Till you opened me to myself,
Looked inside and saw the beautiful butterfly,
Not the self-deluding lie,
Not the desolate cry.*

*My red light blinking.
Barbed wire electrifying about my soul's perimeter
Gun turrets firing bullets of anger*

*Moods like toxic torrents of mercury.
Yet, unshielded, you entered my strange universe
Filling it with harmonies of compassion,
Challenging my reticence to rejoin humanity.*

*The power of unconditional love,
What an implausible being you are.
Guiding me out of my darkness,
Fueling the fire of my nascent star,
Blasting the watch towers,
Short circuiting the wires.
How brazen your entrance into my fortress!*

*Whatever inscrutable powers in the Heavens there be,
I thank them for sending you to me!
I who once believed in nothing,
At least, believe in thee!*

| TOP |

ACPA Updates

Member Advisory Committee Publishes Newsletter

The ACPA Member Advisory Committee (MAC) exists to give members' needs and ideas a voice—a strong voice—to communicate with each other and the ACPA Board of Directors. MAC members are Catherine Cartwright, Judy Gober, Jani Larsen, Ernie Merritt, Cheryl Neunenschwander, and Max Sokolnicki, who is the chairperson of the committee.

The MAC was first established in 1993. At that time, it was much easier for ACPA facilitators to hold large meetings, travel, and learn what everyone was doing or needed. Now, it is not as easy to meet face-to-face, but we don't have to feel as if each chapter is a little island unto itself.

The MAC is publishing a newsletter, *The Members' Voice*, several times a year for ACPA facilitators. It will be a forum for communications, to raise issues, acknowledge contributions, and just stay in touch. The MAC can be a lifeline between chapters, to connect with others that are in need, to teach, and learn from each other.

The Members' Voice also contains tips for exercise and pacing, book reviews, inspirational essays, and affirmations for health and daily living. Future newsletters will reference many resources for people with pain, and highlight volunteer and advocacy opportunities. Reports from chapter meetings that generate useful ideas, chapter events, speakers, and seminars are also welcome.

The Members' Voice will recognize these efforts to encourage others, to show what can be accomplished, to help others avoid mistakes, and to point out shortcuts to success. Members can contribute ideas, articles, stories, recipes, and helpful hints by sending them by email to acpa_mi@yahoo.com or by mail to the [national office](#).

MAC Mission Statement

- 🕒 To create understanding and communication between the ACPA membership and the Executive Director and Board of Directors.
- 🕒 To be available to the Executive Director/Board of Directors to assist with ACPA responsibilities.
- 🕒 To facilitate free education and guidance to people living with chronic pain.

Opioid Understanding Lags as Abuse Climbs

For some people with ongoing or chronic pain, opioids (medications such as oxycodone or hydrocodone) can make the difference between disability and the ability to function at more normal levels.

But a recent survey conducted by the ACPA indicates that relatively few of those receiving opioid prescriptions are given sufficient education about the drugs to ensure safe use. The study, underwritten by an unrestricted educational grant from Purdue Pharma, surveyed people via random dial who use opioids for pain management.

Opioids are powerful medications and carry risks when they are not used properly. Opioid poisoning now causes more deaths than either heroin or cocaine. Those who use opioids properly, under a prescriber's care, need to understand how to take, store, and dispose of their medications to keep themselves safe and keep their medications out of the hands of potential abusers.

Use of Opioid Agreements

Only 28% of patients were asked to sign an opioid agreement that explains the risks and responsibilities involved in using opioids. Of those asked to sign one, 10% received no counseling and 45% had less than 15 minutes to discuss it with the health care professional.

Using a Single Pharmacy

Using a single pharmacy for all prescriptions is a good way to ensure that a new medication will not interact with those already being taken. Only 21% were told to do this by their clinician, but 86% reported that they did use only one pharmacy.

Fear of Addiction

Worries about the possibility of addiction are common among those using opioids legitimately. Nineteen percent report that they are very concerned about addiction and another 34% say they are somewhat concerned.

"The risk of addiction when opioids are used legitimately under a professional's care is modest," noted Penney Cowan, founder and executive director of the ACPA. "Yet many fear taking medications that may help them reach a higher level of function. It's important that individuals discuss their concerns with their provider openly. A candid discussion can help your provider determine if you have clinical factors that put you at a higher risk for possible addiction to opioid medications."

Learn more about diversion, storage and disposal of opioids. The American Chronic Pain Association has produced a public service announcement to alert people to the danger and remind them of safe use practices. See it on our [website](#) or on [You Tube](#).

Thank You!

Welcome to our new groups and facilitators.

Jamie Williams
Melbourne, FL

Julie DeBacker
Peoria, IL

Denise Oliver
Ann Arbor, MI

Drew Bulalini
Rochester Hills, MI

Andria Cassidy
White Plains (Bronx) NY



Since 1980, the American Chronic Pain Association has provided people who must live with daily pain a means to help themselves to a richer, fuller life. We are grateful to have the support of these corporate sponsors for our mission.

AMBASSADOR

Millennium Laboratories
Endo Pharmaceuticals
Pfizer

EDUCATOR

Cephalon
Forest Laboratories Inc.
Genentech
King Pharmaceuticals
Lilly
Medtronic, Inc.
Purdue

BUILDER

Abbott
Archimedes Pharma
PriCara

Thank you to these corporations for grants that enabled ACPA to fund special projects.

Pfizer for the fibromyalgia education campaign

Medtronic and Purdue Pharma for an unrestricted educational grant to develop the new ACPA website

Forest Laboratories for the fibromyalgia Web-based interactive person

King for support of the Consumer Guide

Medtronic for the Understanding Medical Devices Video

The ACPA is a peer support organization: we help each other learn to live fully in spite of chronic pain. Your membership, donations, and purchase of materials keep the ACPA alive and reaching out to even more people with pain.

The Chronicle is published quarterly by the American Chronic Pain Association.

We welcome essays, poetry, articles, and book reviews written by people with chronic pain or their families.

Please send inquiries to:

The ACPA
P.O. Box 850
Rocklin, CA 95677

EXECUTIVE DIRECTOR:
Penney Cowan

**PRESIDENT,
BOARD OF DIRECTORS:**
David Provenzano, M.D.

**PAST PRESIDENT,
EDITORIAL DIRECTOR:**
Nicole Kelly

MEDICAL EDITOR:
Steven Feinberg, M.D.

COPY EDITOR:
Alison Conte

SPECIAL FEATURES:
Erin Kelly