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Dissecting the Pain Experience- a Person Centered Approach to Treating Non-traumatic Musculoskeletal Pain

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According to the World health Organization (WHO), musculoskeletal conditions are the second largest contributor to disability worldwide, with low back pain being the single leading cause of disability globally. Musculoskeletal conditions are not just conditions of older age; they are relevant throughout the course of life.

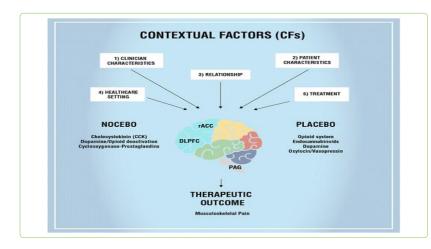
The majority of persistent non-traumatic musculoskeletal pain disorders do not have a patho-anatomical diagnosis that adequately explains the individual's pain experience and disability. The inability to make sense of a threatening pain experience can perpetuate pain and related fear posing a negative impact on the person's lifestyle, health and relationships.

Pain consists of both physical and psychological properties that predominate and alter personality. Yet not all pain is as a result of a nociceptive stimulus received and transmitted by a sensory receptor of a peripheral nerve.

This abstraction cannot convey what pain is and what it feels like as it always has a subjective component that is perceived by the patient, related to their previous experiences and their attitudes towards its resolution.

Being able to make sense of the patient's musculoskeletal pain experience is an essential clinical skill to help foster self-efficacy for a better quality of life

The purpose of this presentation is to offer the clinical audience a brief overview of the 3 dynamic variables that make up the human experience and how pain can affect them. A common-sense Model to defuse fear avoidance will be introduced in addition to the clinical relevance of contextual factors in placebo and nocebo effects in the treatment of musculoskeletal pain.



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