



## **Conservative treatment, like physiotherapy should be the preferred first option in pain management**

Ottawa, ON, May 9, 2017 – Today marks the release of the much anticipated Canadian Guidelines for Opioids for Chronic Non-Cancer Pain. In a country that is in the grips of an opioid use and abuse epidemic, these guidelines are a welcome next step in the fight against opioids. But they do not go far enough in highlighting the role of other regulated health care professions in Canada in employing *upstream solutions*.

In the past 20 years, the use of prescription opioids to treat chronic pain has increased more than threefold, with limited evidence showing that opioids provide meaningful difference in pain or function. We are becoming increasingly aware of the potential for harm associated with prescription opioids. Physiotherapy and other conservative treatments are safe and effective alternatives to opioids for the treatment of chronic pain, without the risks of opioid dependence, misuse and abuse.

Physiotherapy is mentioned as part of nearly every clinical guideline on the treatment of pain. In 2016, for example, the Centers for Disease Control and Prevention in the US released their own guidelines on the use of opioid pain medications. These guidelines went further than their Canadian counterparts and recommended conservative treatment, like physiotherapy, as the preferred first option in pain management. While the first recommendation in the Canadian guidelines talks about optimizing non-opioid and non-pharmacological options for pain management, it goes on to discuss the benefits of specific exercise programs like tai-chi and yoga.

The [Canadian Physiotherapy Association \(CPA\)](#) disputes these suggestions. While exercise is an important treatment in chronic pain, not all exercise is created equal and not every patient responds to the same type of exercise. CPA believes that to prevent the first prescription of opioid medications and to truly help those living with chronic pain, exercise, self-management advice and education needs to be based on a comprehensive physical assessment.

Using the results of an in-depth assessment, the physiotherapist can then prescribe the appropriate exercises, necessary education and help the patient to determine the appropriate pain management program. Yoga and tai-chi *may* become part of an individual's treatment plan, but only after a physical assessment has been completed and treatment goals have been set.

Suggesting that Canadians in pain seek out non-regulated, non-specific exercise programs and therapies is at best, misleading, and at worst, harmful to those seeking legitimate treatment for pain. All exercise and advice on self-management must be based on assessment of the individual, their current pain and psychosocial status, and how they became injured.

Limiting prescriptions for those in pain, without making appropriate alternatives available is yet another blow to those in pain, and does nothing to stop the crisis.

Pain is a complex subject. No two individuals experience pain the same way. In a busy primary care practice or emergency room, it is nearly impossible for the practitioner to adequately explain pain and provide individualized treatment and advice. This is where providers, like physiotherapists, bring the most value in the opioid crisis. Physiotherapists have the skills, knowledge and expertise necessary to provide solutions to the opioid crisis, and prevent people from being prescribed their first dose of opioids.

By ignoring the contribution physiotherapists can provide to patients in pain, we are limiting the effectiveness of conservative treatment and ignoring the upstream role that physiotherapists can play in preventing people from becoming dependent on opioid pain killers.

While the guidelines released today are a good next step, as a society, we need to demand more.

We need better access to conservative pain management, especially in rural and remote communities. We need our primary care providers to have better education on pain and pain management. We need better support for those dealing with the devastating side-effects of opioid dependency.

It seems like the authors of the Canadian Guideline for Opioids for Chronic Pain, in an attempt to be inclusive of many different exercise and therapy offerings in our market place, have left out the important contributions of the regulated health professionals, including physiotherapists. In Canada, physiotherapy is a recognized part of the health care team in every province. Physiotherapy has safe and effective solutions to the pain-management, based on sound evidence. CPA feels that Canadians in pain deserve access to the individualized, safe and effective treatments provided by physiotherapists.

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*The Canadian Physiotherapy Association (CPA) represents over 14,000 physiotherapists, physiotherapist assistants and physiotherapist students across Canada. CPA members are rehabilitation professionals dedicated to the health, mobility and fitness of Canadians. In partnership with its provincial and territorial branches and practice divisions, CPA enables members to learn, share knowledge and enhance practice. CPA provides resources, education, ideas and advocacy to enable our professional community to better serve Canadians. Media contact: Melissa Anderson, Senior Policy Advisor, [manderson@physiotherapy.ca](mailto:manderson@physiotherapy.ca), 1-800-387-8679, ext. 236. For more information on CPA's Pain Management & Opioids initiative, please [click here](#).*

