Back pain management programme

Thoughts, feelings and behaviour

This handout is aimed at helping you to understand the way that your thoughts and feelings can influence your pain and the process of how you may manage current difficulties.

Long term health problems can produce a range of feelings. It can be very difficult to retain a positive outlook when you have to adjust to restrictions of everyday life.

Feelings

Experiencing constant pain can cause you to feel low and feeling low can make your pain worse. People who have never experienced any emotional problems prior to pain may find themselves becoming depressed.

Thoughts

Feelings and emotions can, in turn, produce certain ways of thinking. Difficult emotions such as anger and frustration can produce difficult thoughts, such as:

“Everybody must think I am making this up”
“I know they think I am useless”
“There is nothing that can help me”

These thoughts can be very destructive. They can make you unhappy, put you under a lot of pressure and make you tense, which can affect your pain.

Behaviour/activities

Pain often changes what people can do. This in turn can lead to unhelpful feelings and thoughts and again influences what we do. A vicious circle is set up between thoughts, feelings, activities (what you do) and your pain.

Linking thoughts, feelings and behaviour:

[Diagram showing the cycle: Difficulty doing things → I’m such a failure → Drop in performance → Feel depressed → Stay in bed/don’t try and seek help → Difficulty doing things]
What can help?

Relaxation
Learn to relax. Focusing on relaxed abdominal breathing, distraction and relaxation exercises can bring down stress levels. There is information explaining these in more detail in the remainder of the booklet.

Challenge unhelpful thoughts
Try and recognise these thoughts and challenge them. To start with it might be helpful to write some of the thoughts down.

Think of an alternative helpful thought
"I know I can cope if I plan properly”. “Some things I cannot do, but others I can. If I pace myself, I can do quite a lot. I can cope better, if I do not get too tense.”

Unhelpful thoughts and feelings
People with chronic pain could name many feelings linked to their pain, such as depression, irritability, despair, frustration, isolation. There will also be times when you feel OK, calm and confident when you’re with people you like and doing things you enjoy. Often, however, these ‘good times’ are too short.

Difficult feelings tend to produce unhelpful thoughts, which influence how you feel. Unhelpful thoughts can also stop us from doing what we want to do. It is easy to react to doing things in a gloomy way. Instead of looking forward to going out, you might dread the journey or the sitting or standing which can make it seem too much effort when you have pain to deal with as well.

They may even make you:
- Decide not to do what you were looking forward to doing.
- Decide to carry on without planning despite the results.
- Go and be so worried about how you might feel at the end that you can’t enjoy yourself.

Ways of thinking can become habits as much as ways of doing things. Like all habits, unhelpful thinking takes an effort to change. First you need to **recognise** your unhelpful thoughts.
Features of unhelpful thoughts
1. They can be destructive and cause extra stress or pressure.
2. They make things worse than they are: “I’ve never felt so awful in my entire life”.
3. They predict the future: “I’ll always feel terrible”.
4. They can stop you doing things: “I can’t do that”.
5. They are often untrue: “everyone must think I’m making this up”.
6. They pretend they can read minds: “I know they think I’m useless even though they don’t say”.
7. They seem believable – you don’t think to question them.

Next you need to challenge these thoughts.

Challenging unhelpful thoughts
It is important to recognise these thoughts and challenge them. Are these thoughts a true reflection or are they emotion talking?

To start with it may be helpful to write some of the thoughts down and answer the following questions:

Example
Negative thought – “I get up in the morning and I think it is going to be another bad day.”

Am I predicting the future negatively?
Yes – how do I know it is going to be a bad day?

What is the evidence for and against this idea?
There is no evidence that it is going to be a bad day. There may be low points, which I will deal with at the time, but there are also likely to be high points.

How might others react to this situation?
Others do not go round thinking like this.

Am I making things worse than they really are?
Yes, everyone has low and high points in their day.

Does this thought help me to succeed?
Definitely not!

Does it matter if things don’t turn out exactly right?
Nothing is perfect. I will deal with low points and decide what to do at the time.

Am I reading other people’s minds?
No.

Now the unhelpful thought has been recognised and challenged, rephrase it to be an alternative and helpful thought:
‘Today will be how I will make it. There will be highs and lows. I will enjoy the highs and deal with the lows if and when they arise, so I can cope’.
Remember

- Recognise – challenge – find alternative
- If you think positive, outcomes are more positive
- It will take practice and effort to be able to challenge them effectively
- You may find it helpful to ask others to help point out when you say something negative

We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

Other formats:

If you would like this information in another language, large print or audio, please ask the department where you are being treated, to contact the patient information team: 
patient.information@addenbrookes.nhs.uk.

Please note: We do not currently hold many leaflets in other languages; written translation requests are funded and agreed by the department who has authored the leaflet.

Document history

Authors
Back pain management programme

Department
Pain service, Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk

Contact number
01223 245151

Publish/Review date
August 2017 / August 2020

File name
PIN1332_Thoughts_feelings_and_behaviour_V4.doc

Version number/Ref
V4/PIN1332 / Document ID 12074