Mayo Adult Pain Rehabilitation Center

Wesley Gilliam, Ph.D., L.P.
Senior Associate Consultant

Conflict of Interest
None

Mayo Adult Pain Rehabilitation Center

- Intensive daily program 3 weeks in duration
- Functional Restoration
  - Strength training
  - Aerobic conditioning
  - Work/ADL simulation
- Cognitive Behavioral Therapy (CBT)
  - Changes in maladaptive pain appraisals and coping
  - Behavioral activation
- Medical Management
- Occupational Therapy

Medication Tapering

- Opioids (Long, then short)
- Benzodiazepines/Ambien
- Stimulants
- Muscle relaxants
- Anti-nausea
- Over the counter/gels/patches
- Alcohol, marijuana, etc
  - Monitor vitals/withdrawal, pill boxes, charting

HOW WE EMPOWER PATIENTS IN A SELF-MANAGEMENT PROGRAM

- Start with patient’s stated goals
- Patients chart daily on symptoms and skills used
- Patients complete research surveys and feedback forms for program development
- “Participants” not patients; “Classes” not group therapy
- Present progress in rounds with team 2X per week
- Former program graduates provide lectures each week

Pain Rehabilitation with Opioid Withdrawal:
Longitudinal Study of Treatment Outcomes

- Mayo Clinic Pain Rehab Center
- 248 of 443 (56%) taking opioids on admission
  - 10.7% of opioid users taking for 10+ years
  - Mean MEQ dose was 99 mg
- Pre-tx higher pain severity and depression compared to non-opioid users.
- 90% completed program
- 97% weaned off of opioids in 3-week program
- No differences between users and non-users at discharge. Significant improvements maintained at 6-month follow up.

Townsend et al., Pain, 2008