

Complexities of relationships and communication in treatment of chronic pain

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A foundation of trust is crucial to help patients with chronic pain have productive conversations about pain management with their clinicians as well as better overall health outcomes, especially when it comes to opioids, according to a viewpoint article in the *Journal of General Internal Medicine* written by authors from Regenstrief Institute, the U.S. Department of Veterans Affairs and the University of California, Davis.

Shared decision-making is a process in which clinicians and patients work together to make decisions on treatments and care plans based on risks and benefits and patients' preferences and values.

The authors argue that while shared decision-making is a well-recognized strategy for approaching treatment discussions between providers and patients, it is not always enough. They acknowledge that these models are a good framework for chronic [pain management](#) in [primary care](#); however, they urge more emphasis be placed on building and nurturing relationships, which serve as the foundation of productive treatment discussions and decisions.

"Treating pain is complex, and typically requires a combination of different treatments, along with trial and error," said co-author Marianne Matthias, Ph.D., a Regenstrief research scientist and an investigator with the VA Health Services Research and Development Center for Health Information and Communication, Richard L. Roudebush VA Medical Center in Indianapolis. "Just being a part of the treatment discussion is not sufficient. The patient must be comfortable telling the clinician the types of treatment the patient is willing to do and communicating when

something is not working. They need to feel believed, and trust that their provider is committed to their best interests. This is especially helpful in discussions about the use of opioids."

The authors point out that shared decision-making does not offer strategies for navigating disagreements, which happen especially often when opioids are discussed.

Dr. Matthias continued, "These disagreements are often emotional and can lead to a breakdown in communication, and sometimes even an end to the clinician-patient relationship, which can negatively affect a patient's health. A trusting relationship can make a patient more open to their clinician's recommendations, especially if [patients](#) are skeptical about a proposed recommendation."

"Reducing frustration and improving management of [chronic pain](#) in primary care: Is shared decision-making sufficient?" is published online ahead of print in the *Journal of General Internal Medicine*.

More information: Marianne S. Matthias et al, Reducing Frustration and Improving Management of Chronic Pain in Primary Care: Is Shared Decision-making Sufficient?, *Journal of General Internal Medicine* (2021). [DOI: 10.1007/s11606-021-06967-3](https://doi.org/10.1007/s11606-021-06967-3)

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