

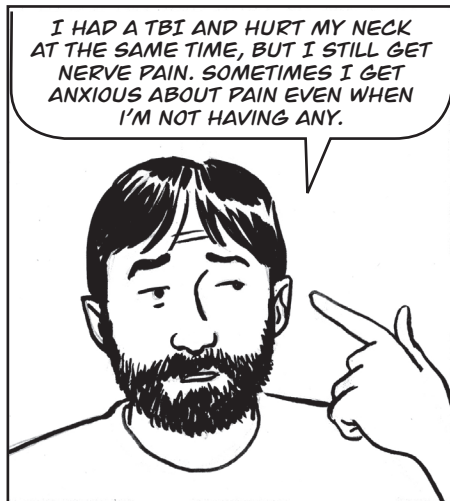
# TRAUMATIC BRAIN INJURY AND CHRONIC PAIN

## Part IV: Pain and Anxiety

### Pain and Anxiety

Anxiety is closely related to pain, and each can make the other worse. Anxiety can add to memory or sleep problems. Anxiety may lead a person to believe that a bad outcome is likely or certain. This type of thinking is called “catastrophizing”.

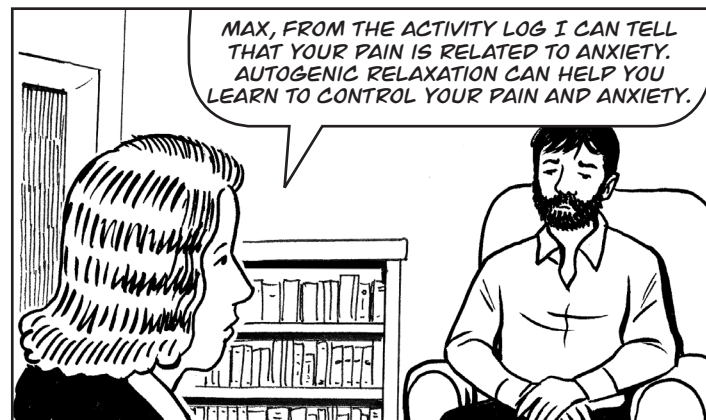
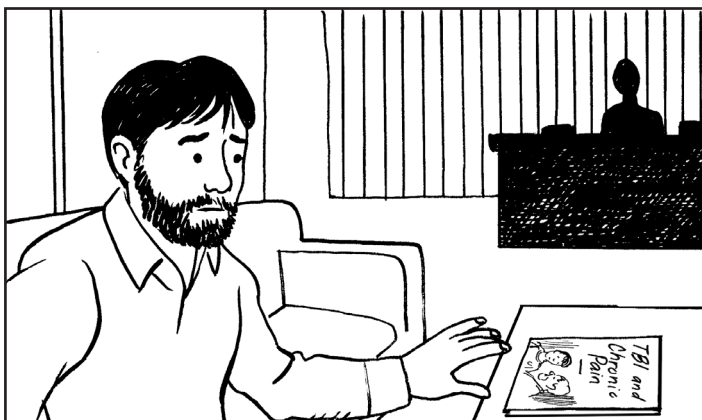
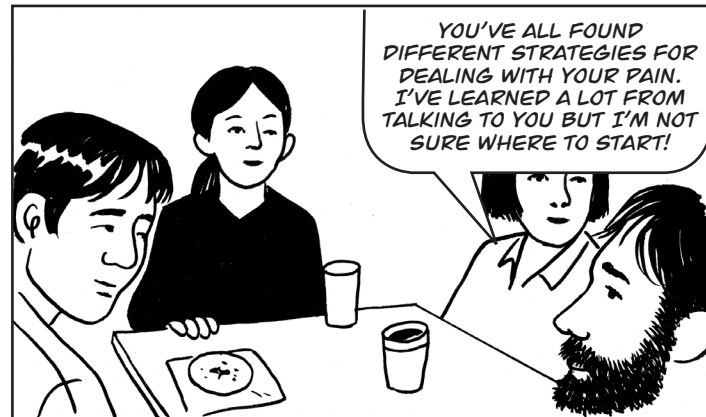
Pain can change your thinking. Often, we have thoughts that we’re not fully aware of called “automatic thoughts”. They can influence our emotions and the things we do, even if we don’t realize it. Pain by itself or with depression, anxiety or PTSD can make people have more negative automatic thoughts. These thoughts can make people do things that may make their pain worse. A therapist who practices cognitive behavioral therapy can help change these thinking patterns.

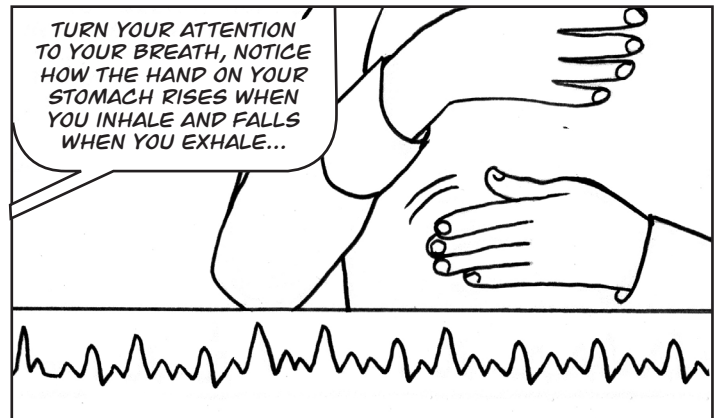
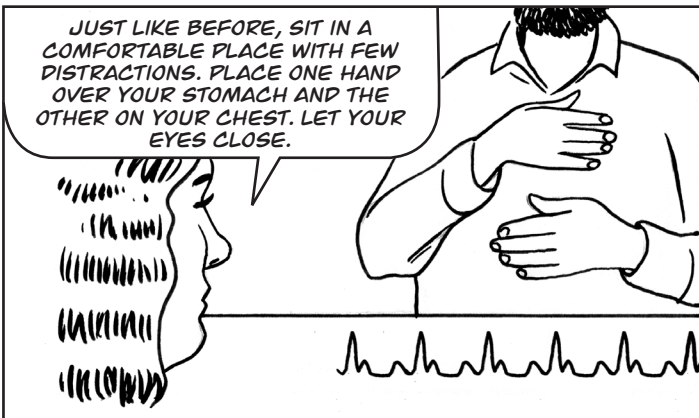
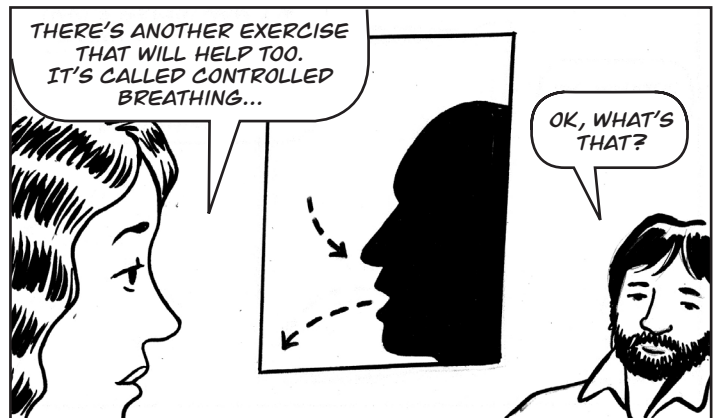
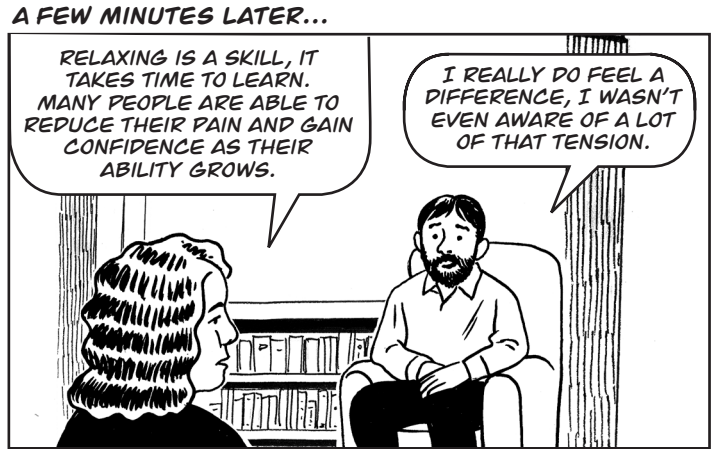
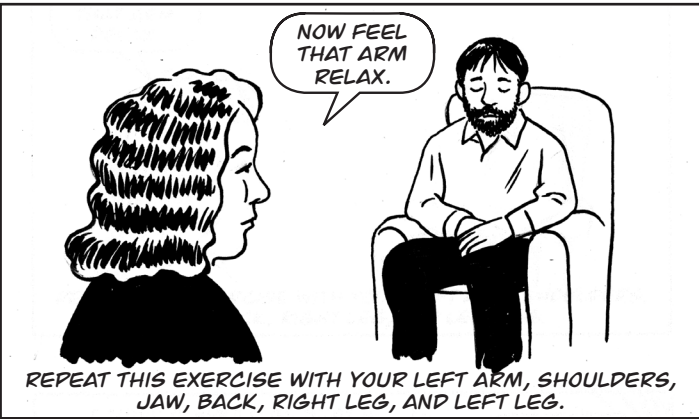
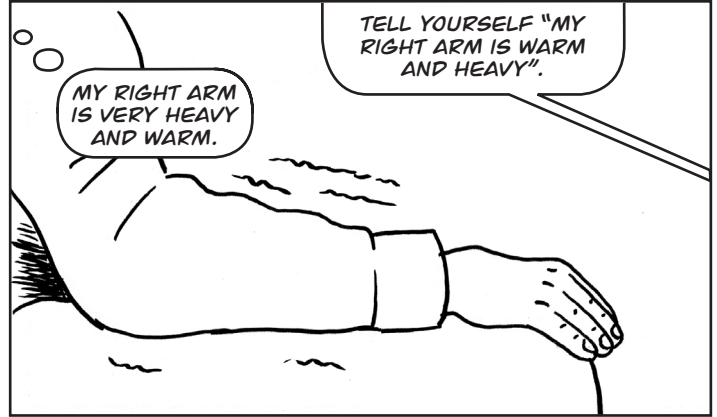
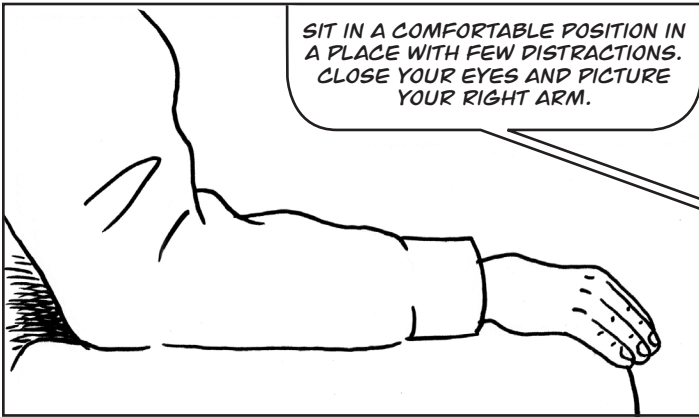




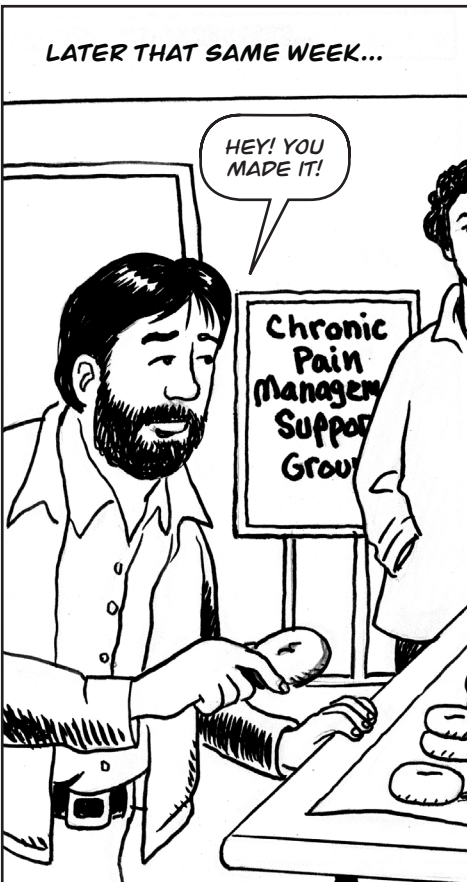
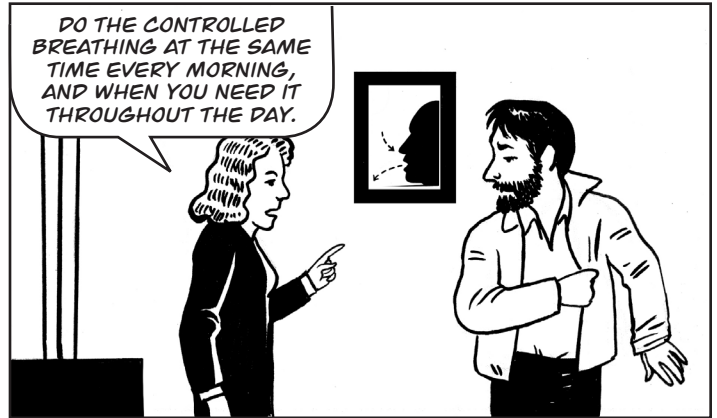
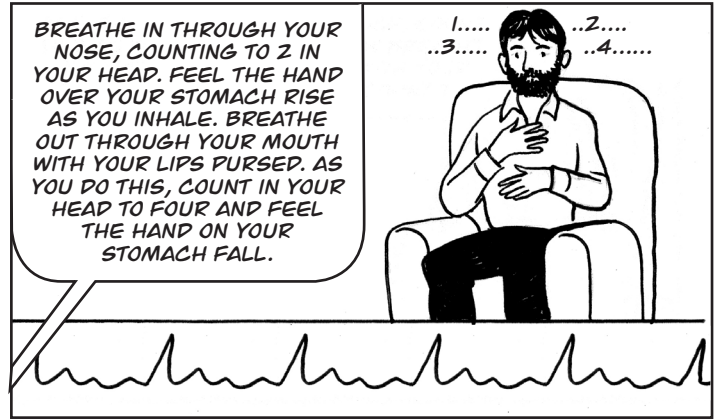
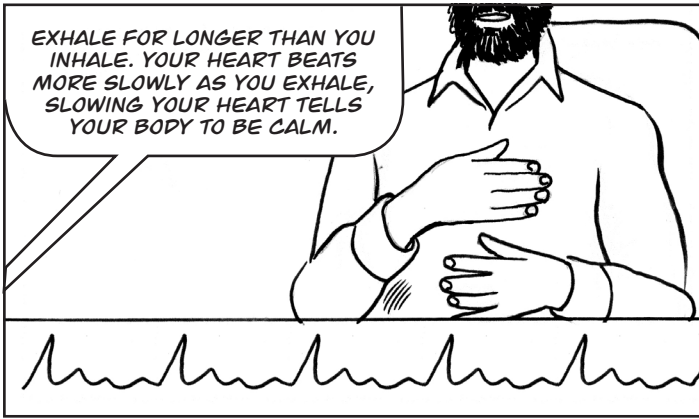
### Finding What Works

Remember both pain and how to manage it are personal. Something that works for you may not work for someone else. Don't be discouraged if you don't find the right method to manage your pain right away. At the end of this factsheet there is a log that you can use to record your pain. Tracking your pain for two weeks and showing the log to your doctor is a great way to begin.









**On Demand Pain Management Strategy #3**

**COPING THOUGHTS-** When you're in pain it can be helpful to think encouraging things to yourself. Grounding yourself with coping thoughts can help get through a stressful or painful time. It may be a good idea to make a list. Some examples are:

- "I know I can handle this."
- "It could be worse."
- "This is tough but I will survive."
- "I am strong enough to do this."
- "I have gotten through more difficult things."



# Activity Log

You can use this log to track activities or events that may be related to pain.  
This log can also be used to record your pain management practice.

Date/Time	What was happening? (Event or activity)	For how long/ When?	Did you have pain? (0-10) (Where?)	Other emotions?	What thoughts did you have?	What did you do in response?

## Authorship and Illustration

This infocomic was written by Silas James and Ayla Jacob and illustrated by David Lasky and Tom Dougherty, in collaboration with the Model Systems Knowledge Translation Center.

This infocomic is adapted from the factsheet series Chronic Pain After Traumatic Brain Injury (<https://msktc.org/tbi/factsheets/traumatic-brain-injury-and-chronic-pain>) developed by Silas James, MPA; Jeanne Hoffman, PhD; Sylvia Lucas, MD, PhD; Anne Moessner, APRN; Kathleen Bell, MD; William Walker, MD; CJ Plummer, MD; Max Hurwitz, DO, in collaboration with the Model Systems Knowledge Translation Center.

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**Disclaimer:** This information is not meant to replace the advice of a medical professional. You should consult your health care provider regarding specific medical concerns or treatment. The contents of this infocomic were developed under grants from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR grant numbers 90DP0031 and 90DP0082). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this infocomic do not necessarily represent the policy of NIDILRR, ACL, or HHS, and you should not assume endorsement by the federal government.

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