Dear

Recent research has been carried out to understand pain and at [insert surgery name] we are trying to see pain from your point of view. This letter will offer you help with your pain and medication, sign post you to the relevant resources and let you know about the project we are currently running.

[insert surgery name] is proud to promote a national campaign called **Flippin’ Pain**. The campaign focuses on raising awareness of the problem of persistent pain, spreading the word about a modern scientific understanding of pain and giving people knowledge, skills and hope for a better way forward. A good place to start is by visiting the website at [www.flippinpain.co.uk](http://www.flippinpain.co.uk) and clicking on “Understanding Pain” and reading the “Myth Busting”.

**Persistent pain is common and can affect anyone**. Why do you have persistent pain? We think this is because your brain is similar to a sensitive car alarm which goes off a lot, even when people walk by and don’t touch the car! You can find out ways to turn down the sensitivity of your car alarm or brain by visiting the Flipping’ Pain website.

**Hurting does not always mean harm.** Long-term pain is not always a sign that something is wrong or that we should stop what we are doing. Research now shows that not moving or bed rest will actually cause our backs more pain and that ‘motion is the lotion’. Pain is something our bodies learn to feel and the feelings can continue long after diagnosis and treatment. The great news is we can also teach our bodies how to feel less pain. Visit the Flippin’ Pain website and read “Understanding Persistent Pain”.

**We have discovered EVERYTHING matters when it comes to pain**. It’s true! Sadness, tiredness, stress and anger all make our pain worse. The good news is that you can make your pain more tolerable by doing things that make you happy and fulfilled, as well as exercise and meditation. We also need to do things to distract our brains. Take time to care for yourself by listening to the 20 minute podcast in the resources section on the Flippin’ Pain website for positive strategies.

**Medicines and Surgeries are often not the answer**. Did you know 80% of all adults over 50 years old have wear and tear of the spine with NO pain?  Research has shown that people who are aware of their scan results and X-rays tend to be more anxious and report more pain and more disability compared to people who haven’t had investigations.

**Pain Relievers do not ‘cure’ pain**. “Pain reliever” is a more accurate term than pain killer. Pain Relievers do not stop or “kill” the pain completely, in fact they often reduce it by only a third or a half. Although it might not feel like it, pain relievers are optional. Not everybody takes, or wants to take them. Some people can’t take pain relievers because of other health problems, side-effects or they simply haven’t worked.

**Recovery is possible.** What if we told you that changing your understanding of pain can help you regain control and change how you experience it? It sounds incredible but science, and other patients’ personal experience, has shown that it's true.  The “Flippin' Pain Formula” includes easy-to-watch animations, podcasts, infographics, and quizzes developed by researchers, clinicians and people with lived experience that will help change the way you think about pain. Take the time now to watch the Flippin’ Pain Formula video.

**What are we doing at** [insert surgery name]**?** We are running a project which identifies patients who suffer from chronic pain. The aim is to help educate and support patients by sending links to their phones or posting resources out. We are also ensuring these patients have regular access to a Pharmacist, and The Prescribing Support Team, who can help with medication or prescription issues.

**Why have you been sent this letter?** We would like to offer our support to you too. You will receive this letter if you taking a gabapentinoid (pregabalin or gabapentin) regularly. We do understand that thinking about stopping your gabapentinoid may cause you to feel anxious or worried but we want to work with you and help you take back control of your pain. Our patients who are already on this project have reported increased concentration spans, very little increase in pain despite their medication being decreased and patients have been grateful for the support they have received.

**What should I do next?** We would like you visit the Flippin’ Pain website (www.flippinpain.co.uk) and be really nosy! Please have a look around the website. Although the website may mention opiate pain medication, the concept of controlling your pain with more ease also relates to Gabapentinoids too. Challenge your beliefs and take time to educate yourself on pain. If you would like to start a reduction with our team, please call the surgery and ask to speak to [NAME], the Practice Medicines Manager.

**What are we going to do next?**  If we feel your medication should be reduced to a safer level we may contact you with a personalised reduction plan to suit your current medication regime**.** Any reduction plan will be personally tailored to your medication. The reduction plans will be slow and safe and designed to cause you minimal side effects.

**We are really look forward to working with you. Together, we can change your Flippin’ Pain! ☺**