

# **Self-Compassion & Chronic Pain**

Hosts: Rebecca Gillett, MS OTR/L Guest Co-Host: Courtney Wells, PhD MSW, MPH, LGSW

Guest: Dr. Christiane Wolf

Self-compassion is the act of showing kindness to oneself in times of suffering. Combined with mindfulness, it can be a powerful tool to help dial down stress, alleviate depression and even alter the pain experience.

In this episode, trained oncological gynecologist and mindfulness expert, Christiane Wolf, MD, shares how to use self-compassion as a tool to help cope with chronic pain and improve quality of life. Dr. Wolf is an internationally known, certified mindfulness-based stress reduction teacher based in Los Angeles. She is also the director of the department of Veteran Affairs' national mindfulness training program for clinicians. Her new book, **Outsmart Your Pain**, is a transformative guide to finding relief through self-compassion and mindfulness.

### Additional resources:

**Outsmart Your Pain** 

**Make Time for Self-Care** 

**Build a Support System to Fight Arthritis** 

**Don't Let Arthritis Cause You Guilt** 

**Arthritis and Grief** 

**Stopping Worst Case Thinking** 

**Emotional Self-Care During Tough Times** 



# Episode 48 – Self-Compassion & Chronic Pain Full Transcript Released 11/30/2021

#### PODCAST OPEN:

You're listening to the Live Yes! With Arthritis podcast, created by the Arthritis Foundation to help people with arthritis — and the people who love them — live their best lives. If you're dealing with chronic pain, this podcast is for you. You may have arthritis, but it doesn't have you. Here, learn how you can take control. Our host is Rebecca Gillett, an arthritis patient who is joined by others to help you live your Yes.

#### MUSIC BRIDGE

### Rebecca Gillett:

Thanks for joining us on the Live Yes! With Arthritis podcast. The busy season of the holidays are upon us. And sometimes it's hard to take a minute to think about taking care of ourselves because it's the season of giving. But on today's episode, we are going to talk about self-compassion for yourself in chronic pain and why it's so important. For our guest co-host, we have Courtney Wells, who is a friend of the podcast and has been a guest before, and also a patient with arthritis as well as a social worker. Courtney, thanks for joining me.

### Courtney Wells:

Thank you, Rebecca. I'm very honored to be here, or to be back I should say. I really love the podcasts.

#### Rebecca:

So, having a little bit of mindfulness right around the holidays, to me I think, is a perfect fit. So that's why we're excited to have our guest expert today to help us understand a little bit more about self-compassion and the pain connection.

Dr. Christiane Wolf is an internationally known, certified mindfulness-based stress reduction teacher based in Los Angeles. She is also the director of the Department of Veteran Affairs National Mindfulness Training Program for clinicians. Her new book, "Outsmart Your Pain," is a transformative guide to finding relief through self-compassion and mindfulness. Welcome to the show, Dr. Wolf.

#### Dr. Christiane Wolf:

Thank you so much for having me. I'm super excited to be here today.

### Rebecca:

Thank you for joining us. Your book is amazing. And I wanted you to share a little bit about how you got interested in using self-compassion and mindfulness to help treat chronic pain conditions.



# Dr. Wolf:

I'm a trained gynecologist, and actually an oncological gynecologist. And so, back when I worked with cancer patients, I was already a meditator. But I was not teaching meditation. But I noticed a couple of things. One, I noticed that my own meditation practice really helped me to support the patients in a better way. Just with a presence, with kindness, with compassion, with not being so outcome-focused, right? Of course, healing is really important. And that's what we all want. And as we know, with cancer, that's not always possible.

And the other thing was that I really noticed like how wildly different the response of people was to a cancer diagnosis and through their whole cancer journey. And that really got me curious to really question: How much is the mind and our resources, our resilience, how are they responsible for how we are dealing with or coping with what life throws at us?

#### Rebecca:

I really appreciate that. Your approach of realizing that the need for kindness and how you interact with your patient is what we're all looking for. Can you walk us through the different factors that mold the pain experience for people?

### Dr. Wolf:

Our nervous system is actually made for acute pain experience. So, when we step on something, let's say like a soreness, right? There is a direct correlation between the level of tissue damage and the amount of pain that we're experiencing. That is not the case with chronic pain. Acute pain is protective.

Chronic pain is over-protective. So many people say, "Why is your book called 'Outsmart Your Pain?' And I say, "Well, I could also call it 'Outsmart Your Brain.'" Our brain tries to protect us. How do we usually try to protect something that has happened before? We try to catch it sooner. Our brain catches what it interprets as pain sooner and sooner. So, it becomes sensitized, or overly sensitized. Now, anybody with chronic pain knows that, right? Sometimes, anything can really set it up and start something. That is really important to know that: There is not necessarily a correlation between the tissue damage and the level of pain in chronic pain.

#### Rebecca:

Right.

#### Dr. Wolf:

Back to your question: There are different components of pain. In mindfulness, we are breaking down our experience, basically in three big buckets, components. And of course, they're overlapping. And only one of them is the physical sensation. So that would be like the physical aspect of the pain. And



then we have the emotional aspect. And then we have the meaning or the story, or the thoughts about the pain.

The mind wanders, and where does it wander to? It wanders into the past, or into the future. And then it tells a story there. It tells a story about what happened in the past: Why I'm ending up here, why shouldn't I be where I am right now? And that makes us usually feel bad, or angry, or frustrated, or hopeless. And then we have the stories about the future. There's maybe a pain in this moment and the mind goes like, "Ahh, the last time that happened, I ended up with a really big flareup and had to take medication, had all these sides effect. And that might happen again."

So, there's fear, which we're also feeling in this moment. The mind, trying to be helpful, like we're (laughs) really trying to help, is really making it so much worse. And mindfulness really helps with that. To really look at, to break it down, these three components to say, "In this moment, what is actually the hardest thing to be with right now? Is it really the physical component or the physical aspect? Or is it the emotion that's really hard to be with right now? Or the story that I can't let go of?"

#### Rebecca:

In your book, I think you call that the box called pain. Can you explain that?

#### Dr. Wolf:

Yes. For most people, we put all of these three components into a big box, we write pain on it, and then we try to not think about it, avoid it to kind of push it somewhere where we don't have to deal with it. And we know distraction works really well, up to a certain point. And there's really good research showing that distraction actually works better with acute pain than with chronic pain.

So, we're not trying to get rid of distractions. We want to basically just take the box and look inside. Because then suddenly, we see like, like: You know, when you get like these big Amazon packages. Sometimes (laughs) just a lot of package, and there's not that much in it.

### Courtney:

How do we sometimes make the pain worse, when we do focus on it? Or sometimes when we're trying not to focus on it, it can become more scary or more overwhelming.

### Dr. Wolf:

How our psychology works is like, we try to avoid something. And by this pushing away, we actually make it worse. We have the saying: What we resist persists.

None of what our brain does, or our system does, or what we have, is shameful. It's just we're just trying to get along. We just try to deal with things the best we can. And this is where the self-compassion comes in. But the mind makes it really bigger by then, of course, telling the stories about



it. And what's really interesting is, sometimes these stories can be a distraction. Because I'm kind of telling myself the story over here, which is painful, but I still believe that this is not as bad as actually feeling the pain over here, the real pain. Sometimes, once we actually allow ourselves to turn towards the physical sensations, they're not as scary.

#### Courtney:

When I started using mindfulness and meditation, I really struggled for lots of different reasons, like most people do. And I have some memories of sitting in retreats and just breaking into tears, because I was trying to avoid. I was doing a body scan and I was trying to avoid certain parts of my body.

#### Rebecca:

That's a good point, Courtney, because for a lot of people, we're asking them to tune in to their pain. And that's the one thing they're trying to avoid. So, for people who really struggle with that, what advice do you give to those who are afraid to truly tune in to their pain?

# Dr. Wolf:

What I try to encourage is to always ask yourself: What's the kindest thing to do right now? Like putting on a movie or to call a friend. Great, do that. And then what is very interesting, we have some evidence that, because the pain is so bad, what do we do? We try not to feel the pain. And then often, people, when we say, "So how is the pain today?", what would be a typical response? You say, "The pain is killing me" or "It's terrible."

And two things. First of all, that is what you're telling yourself, meaning there's something in you that is killing you, or that is terrible. And I think just the way that we listen to ourselves really has an impact on our system, which just makes it more fearful and more tense. The other thing about that is terrible, or killing, is not a sensation. It's an interpretation. Does that make sense?

#### Rebecca:

Totally, yeah.

### Dr. Wolf:

So, we go in and say, "What does it feel like right now? Is it cold? Is it hot? Is it tearing? Is it stabbing? Is it searing? Is it the texture? Is it rough? Is it smooth?" You can't say, "Oh, yesterday, it was like this." It's like, "No, no, what about right now?" And then you go, "Wait." And that is mindfulness.

And then you bring this quality of curiosity and openness to it. What happens is, what people start to notice is, it changes. And often what people, of course, say is, "The pain is always there," or "It's always bad." And then when we get them to pick up the courage, and with kindness and curiosity, to look, they go, "It's not always there. Because usually, I'm noticing I only kind of vaguely go in that direction once the pain is really bad. I never check when it's not in pain." And so that of course



influences the story that I tell myself about the pain. "It's terrible. It's killing me. It's always there. It's relentless." What we start to do with this practice is: We start to break that up. And then with that, we start to change the narrative.

#### Rebecca:

I think part of the problem for us, if you live with a form of arthritis, is that you might not just have one type of arthritis.

Dr. Wolf:

Yes.

#### Rebecca:

And you have different types of pain. And so, when you're in a lot of pain, sometimes it is hard to just push through because then you don't want people to feel sorry for you. You don't want to feel like you're always complaining. And I know that's something, you know, I feel that all the time. A lot of us are very guilty of always saying, "Oh, I'm fine. I'm OK."

Dr. Wolf:

Yeah.

#### Rebecca:

I am at the point where I don't answer in that standard response anymore: "I'm OK". "Well, just OK?" people will say. And I'll say, "Yeah, just OK." Because I'm not great. I'm not fine. I'm OK. But same thing with your pain. You go to the doctor's office, and they'll ask you, "What's your pain level today?" Well, with my RA, I'm fine. But my spine issues are giving me pain."

So, I can compartmentalize that pain. But you know, so not wanting to feel pitied all the time. But just being articulate about what my pain actually is, I think, has helped me realize that I can get through each day. And then on some days, the pain isn't as bad in my spine, right?

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That's https://www.arthritis.org/events/jbr.

#### Rebecca:

How do you differentiate self-compassion from self-pity? Because that's a hard thing to get to as well.



# Dr. Wolf:

As you said, it's like people don't want other people to feel pity for them. Because, of course, you want to be seen as strong and capable, being able to hold up your responsibilities and all of this. And that makes so much sense. So, here's where self-compassion really is different. If you think about self-pity, and if you have self-pity, what you're telling yourself is basically the story of "poor me."

A lot of people with chronic pain, they actually feel very isolated, because they don't know other people who have the same illness. So, it makes total sense that the brain would go like, "Yeah, that's just you, and everybody else is like leading a happy life around you." And that just really makes us feel more isolated.

Self-pity feels contracting, and it contracts around the person of me, or who I think I am, and how I feel I should be different. Self-compassion actually is opening up the space to feel in connection with all the other people who also have to go through this at this point, or whoever have felt that way. This is the power of support groups.

#### Rebecca:

Right.

#### Dr. Wolf:

Pain is part of life. And we have this capacity in our nervous systems. If we can connect on this level of seeing really, "I'm not the only person, we carry this together," that can bring a big amount of relief in our system. It's just amazing how that works.

Self-compassion has these two main components. One is this, what I just shared, which we call shared humanity. Imagine a friend comes to you, and they're going through a really rough spot, or they made a big mistake, and they feel so terrible, and they feel so ashamed. You wouldn't just say like, "How stupid are you? I can't believe that you just did that or made that. What's wrong with you? Just toughen up, just get over it." But often then, we flip that. And we say, "So now you're in that situation, how are you talking to yourself?" And people go like, "Oops." Right?

# Rebecca:

Yeah.

### Dr. Wolf:

What we're learning with self-compassion is really: We're learning to be a good friend to ourselves. And I think our nervous system responds to that. Some research shows neurotransmitters that are expressed in our brains, there is something really soothing about just saying, "This is a hard moment, or this is rough right now." And just the kindness and just the acknowledgement. We do this to ourselves,



or when a friend says, "Oh, I can see that's hard right now." And then your whole system goes, "Yes, yes. Thank you for seeing that." Again, just being seen, being heard, instead of just always having to be strong and pretending we're fine, and all that you shared, Rebecca.

#### Rebecca:

Right. It's the validation, right?

Dr. Wolf:

Yeah.

### Rebecca:

I think it's the validation that so many of us seek, and people with arthritis, often, it's an invisible disability.

Dr. Wolf:

Yes, yes.

#### Rebecca:

Some people might think that accepting the pain, though, is giving into it. So, what's the difference there?

# Dr. Wolf:

It's like, if I give into it, then it means it says yes. And it will always be here. And it will just like wash me away. No, no, no. Mindfulness is the awareness that arises when we pay attention, on purpose, moment by moment, and non-judgmentally. That's something we do on purpose. And then this is the beautiful thing: We only do it moment by moment. And that is really where we enter with like... surrender versus giving up. What we are asking is: Can you allow this to be here, in this moment? Why? Because it is already here. And we start to see more clearly with mindfulness, and also with kindness, how fighting it in this moment usually makes it worse.

# Courtney:

That really resonates also with my research. I've done some work about grief and how, for a lot of people with rheumatic diseases in particular, they have a lot of things that they've had to give up in their life. Some of that's the past and some of that's the future. I find myself often talking with people about the power of acceptance and how, if you work through that process there is... It's not going to go away on the other side, but you have muscles; it's like you strengthen your muscles. And then you're able to face that with more compassion and more peace and strength and all of that.

# Dr. Wolf:

Grief is a big, big, scary topic for many people for sure, yeah.



### Courtney:

That often isn't addressed in the world of chronic disease, maybe more now than it used to be. But I know, as for me, as a kid growing up with arthritis, there was never any discussion about my emotions, let alone this thing of grief. What is that?

### Rebecca:

At the Arthritis Foundation, we are helping people live their best life, right? We live Yes, and trying to be cheerleaders for people. Because it's all about all of us having to say No. We feel like, as soon as you're diagnosed, all you hear are, well, No, I can't do that anymore. With this idea of self-compassion and mindfulness, how are you seeing it in your work to transform people's experience of pain. And you, too, Courtney, because this is your area of research, too.

# Dr. Wolf:

This thing about acceptance, that's a really challenging topic. So, we say with something like acceptance, or kindness, or it's compassion, it's like it's an invitation. We're training that, so that it's like we are opening a window or a door repeatedly so that kindness and compassion can come in. We can't make them come in. It's just like with other people. It's like if you have somebody standing in front of your house, it helps if you have the door open, but you can't make them come in.

So, I think that's a good framework to think about this, because I hear that so often. People say, "Oh, this whole kindness and compassion, that doesn't work in acceptance. You've got to be kidding me. (laughs) I don't want to accept that."

#### Rebecca:

Right.

#### Dr. Wolf:

So, the way that I talk about this is like, OK, make some sense. And this is a journey, just like also with the grief, of course, and how about: Can you acknowledge it? Can you acknowledge and then... because we can make ourselves acknowledge something. So, can you acknowledge that the pain is here right now? People go, "Yeah, I can. Yes, it is." That's the first step. And very important: You don't have to like it. But can you just say, instead of pretending it's not there, it's not so bad. We turn towards... We call that the U-turn, and we say, "Yeah, it's here and it's bad."

And that starts to really, like in my experience, the path of transformation. So, we could acknowledge it. And then, for me, the second step is: Can we allow it for this moment? And again, just for this moment, notice what happens when you do that, compared to, say, "I don't allow it to be here." But the fact is, it is here. So, we're working really on softening our attitude towards it. And then over time, we can maybe have a moment of "Oh, I can accept that this is here. And it is in this moment. I



accept it in this moment." That doesn't mean I will still be accepting it tomorrow or next week. The moment-by-moment piece is so important with mindfulness.

Different people really use different tools. And this is one of the reasons that really... like the book that I've written... The book has 20 chapters with 20 different approaches, practices, and then a guided meditation, because it really works differently, right? So, some people, like Courtney, are saying they need to work on grief; that's where they get stuck. Other people really need to work a lot more on self-compassion. Other people have to work more on just opening their eyes again to all the beautiful things that are in life, right? There are all these different ways, kind of doorways, in different times in your life. It's not a one size fits all.

One of my patients says, "I have two full time jobs, just one to handle the chronic pain. And then I have my full-time job that earns my money. And they're often in conflict with each other. Oh, and then I have a relationship. And my mother is sick. And we have a pandemic." Right? All of these things, of course, influence stress levels. But yeah, people can lower the intensity of the pain, that kind of recall, like dialing down. Like what I started with: the hyper-protective brain.

By really doing these practices; also not taking things so personally, that's a big one. So that I don't make myself into "I am the pain patient," or "I am the person who can't do XYZ anymore." Because if I make that into a solid identity, that limits my life. Instead, when we're just saying, "This is an experience that I'm having, and this is how I'm relating to that experience. But it's not who I am because this is not defining me." So that is a really, really helpful approach.

# Rebecca:

What is the research behind using self-compassion and mindfulness as a way of managing your pain experience?

### Dr. Wolf:

The area of research is quite complex around pain, because pain is so complex. People often say, "Yeah, of course my stress level goes up in some area of my life. And there's often a direct correlation to the intensity of pain that I'm in." So, the autoimmune component of chronic pain conditions is very, very prevalent. And what it is, it is like a way of the body attacking itself, which is, if we think about it, like self-criticism is also a way of attacking ourselves.

# Courtney:

I find the overlap also with some mental health therapies to be really interesting and extremely helpful. I mean, even in my time as a social worker, the education and training didn't use to include anything about mindfulness. And now almost every single class includes mindfulness, and that's wonderful, because they really work together very well. And I hope that it only just becomes stronger and more accessible to people. I think a lot of my concerns is that it isn't. When I bring up the idea of



mindfulness, people sometimes have these ideas that "It's not for me or my type of people," or "It's not accessible. I can't afford it."

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### Rebecca:

What are some other self-care activities that can help people with their pain experience?

#### Dr. Wolf:

It can be very different for different people. I have a lot of people say, "I need to carve out some time for myself." I have three kids. I get up before everybody else in our house. I need quiet and I need not anybody speaking to me for like the first hour in the morning. It's part of myself. For coffee.

#### Rebecca:

For coffee, yeah.

### Dr. Wolf:

And I meditate during that time. But for other people, it might be really like gentle movement. Not everybody can sit still in that way because, and especially if you have a lot of discomfort or pain in the body, you don't want to just sit still and feel all of this. So, can you be mindful as you do tai chi or qi gong? Or just gentle stretching? Go for a walk. If you're at the pool, or you live close to a body of water, if that is something you can do, go for a swim.

Or really take some time to mindfully pet your cat. I mean, there's just something really powerful about... like it's connection when you feel how soft the fur is and how much you love that animal. And that can be really a mindful activity. And I think it's also kindness that is in there. But it's also, coming back to what you said earlier, Rebecca, this idea of saying no, that's really hard for a lot of people. And especially if you're forced, if your body forces you. Sometimes your body says no for you.

### Rebecca:

Sometimes you need to listen to it, right?

### Dr. Wolf:

Sometimes you need to listen to it, yeah. And then we can see really our patterns. How are we not listening to our bodies? And then what happens next? So, this whole process of just tuning more in with ourselves, I think in the end, at least that's my experience, is more helpful than these ideas that are more external: just lighting a candle or listening to some music, which is... I don't want to put that



down. But if it doesn't penetrate, if we can't take that really in, just like self-compassion, it's not changing anything.

### Rebecca:

So, they can be a distraction sometimes.

### Dr. Wolf:

It could be a total distraction, yeah. So, this idea is just like that. We say, "Change starts within." I really believe in that.

# Courtney:

I really like this idea, also, of you are collecting pearls. It would be great if you could say a little bit about that.

#### Dr. Wolf:

What we're doing with this practice is: We're starting to use the practice of saying yes and... It's not pollyannish ... we're saying, "Oh, everything's great." No, everything's not great. But what we're looking at is...

A good example is to say like, in this moment, what's the percentage of your body that is in pain compared to the percentage of your body that is not in pain right now? And while of course, sometimes people say, "My entire body is in pain," that is rather the exception. For most people, they have areas that are in pain, but most of the time more of the body is not in pain than it is in pain.

Part of the practice is we can open that up and say that yes, the knee hurts. And in this moment, the rest of the body is actually not in pain. So, we say, "Yes and. Yes, the knee hurts, and the rest of the body is not in pain." And that is a way of retraining the brain to go like, OK, it can be both at the same time. And that can be a big relief. But we're also, as something pleasurable happens, we start to pause for a moment and say, "Where do I feel that in my body?"

And as we do this, that reinforces that in our body. And that is something that goes into our implicit memory of: How does life feel like? Because often, when we have to deal with chronic pain, there's this hyper-focus on the unpleasant. I have people coming in saying "There was not one pleasant moment today." And when they do this, practice it, OK? But then start looking for something pleasant.

Just take a moment. If there was something pleasant, right now, in your experience, in this moment, what would that be? And they go and look around and they say: Oh, like the flowers on my table or like being with you guys on this call. That's pleasant. And so, do you see that that is a retraining?



### Rebecca:

Yeah.

#### Dr. Wolf:

So, every time you have a little moment, like: oh, there's a little pearl and I put that in my pocket. Because those moments I remember.

#### Rebecca:

I love that analogy because it is hard when you are in pain to try to find those positive moments sometimes. But I love that idea. And the visual of collecting pearls. So, thank you for that analogy. That's great.

A lot of our listeners might also be caregivers of people of chronic pain, or parents of children who have a chronic pain condition or type of arthritis. How does this type of advice about showing self-compassion and practicing some mindfulness apply to them as well?

### Dr. Wolf:

Self-compassion also applies to them. And you can say it's really hard in this moment, right? Because you care so much about the person that you're caring for. And then it's really helpful to look at the fact that you have to also protect yourself. And if we're very empathic, we really might feel the pain of the other person really deeply, and at the same time to be aware that that is actually not helping the other person. Research shows there's a difference between empathy and compassion.

Empathy is more "I feel your pain." So that is, just I see another person in pain. And if I'm an empathic person, I will feel your pain. But there's no buffer. And that is why often caregivers, and not just family caregivers, but also people who work in the health care field, burn out, especially therapists. Because it's just one pain after the other walks through your door.

Compassion is actually not about fixing, but about being with somebody who's in pain. Or my own pain, if it's self-compassion, regardless of the outcome. "I'm here no matter what." That is what compassion is about, and really compassion, or the love, buffers the burnout. So, right now, if I can change this, can I have more ease or peacefulness with it? And that is a very powerful practice. Also, for caregivers, in particular for parents, right? It's like you're not helping your child. And this is not like wagging your finger. It's just like...

But if you feel the pain, it's not helping your child. There's often guilt around not feeling the pain because, your loved one, in particular, if it's your child is in pain. For the caregivers, really do something that nourishes you, and that fills you up, and do something that has not to do with the person that you're taking care of.



Usually, the person who is in pain is glad to support that in the other person. If you're in pain and you know your spouse or your parent is suffering so badly, that kind of makes it even heavier on you. Because now you feel responsible, right? (secretly nodding, right?) Then you also feel like, "I'm doing it to my parents, I'm doing this to my partner."

### Courtney:

And you often feel like you have to carry that. I know that's something I've experienced myself, but also have talked with many young people who've grown up and felt that they had to hold that for their parents.

Dr. Wolf:

Yes.

# Courtney:

Because they wanted to protect their parent.

#### Dr. Wolf:

Of course, which leads in the whole like I'm fine. I don't need anything, just powering through. And again, like when we can see how much of that is really motivated by love and care. And again, it just makes me very tender.

# Rebecca:

I've seen so many kids who have juvenile arthritis and done some interviews with them, and when they see their parent become emotional, talking about their child's journey. It's really hard. And I've experienced that, too. Well, my son can articulate, "Oh, my mom has arthritis, and she's had a lot of surgeries." And stuff like that. It's heartbreaking for me to hear him talk about it, too.

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### Rebecca:

A new segment of the podcast that we do, Dr. Wolf and Courtney, is a listener segment about taking comments and tips from our listeners on the topic. We posted on social media: What kind of things do you do to show yourself compassion and for self-care?

Somebody on Instagram named Chastity shared with us that she uses Dr Teal's sleep lotion after a bath or shower, and it helps her to relax and helps you fall asleep. And I have to vouch for taking like an Epsom salt lavender bath. When I do that, that's some of my best sleep.



# Courtney:

I have to admit that I'm trying to talk my husband right now into getting a better bathtub. (laughs) Just to take a moment to myself and close the door and be able to breathe and relax in the heat.

### Rebecca:

We're always saying to make sleep a priority. But that is a form of self-care and self- compassion, to know that I need to make sure I get my sleep.

# Dr. Wolf:

Yeah. And it's hard. Because sometimes we know when we're in pain, the body isn't sleeping. And it doesn't matter how early I go to bed or how much I take care of the sleep hygiene, right? And also, it's just like sleep is not always curing the tiredness that comes with chronic illness. But in general, the same principles with sleep apply. Notice what usually... when we can't sleep, the mind starts to spiral into "Oh, I need to sleep. If I don't sleep, I won't have enough... it will be a terrible day tomorrow. I have all these things to do." So, it spirals. And what we want to do then is to notice that with kindness. The mind does that, tries to help, and then focus on something that is not the mind.

### Courtney:

And the next person here named Amy Lynn, she says, "This is so important, and I was never taught this until my 40s when a cousin told me to be gentle with yourself."

Dr. Wolf:

Yeah. Not in our culture.

#### Rebecca:

We're go, go go, you know, go big or go home.

Dr. Wolf:

Yeah.

#### Rebecca:

It's hard to just stop and take a minute and take a breath and to, like you said... Most people are kinder to a friend or, you know, will think about it that way. But when you turn the table and think about being kind and gentle to yourself, that's a little harder pill to swallow, right? Another one that somebody mentioned, Dana, was chocolate, simply chocolate. (laughs) I love that one.

Dr. Wolf:

Oh, yeah.



#### Rebecca:

Once in a while, we all need some chocolate, right?

Dr. Wolf:

For sure.

### Courtney:

And Amanda said, "Allowing myself to rest when I feel tired. I'm constantly on the go. I enjoy my rest days with a hot cup of tea and the Hallmark Channel."

### Rebecca:

I have to admit, when I read that one, I was like, that sounds like a really good idea. Can I just do that tomorrow? (laughs) But it's true. And one of the keywords I think, in what Amanda's comment is, is allowing myself, right Dr. Wolf?

Dr. Wolf:

Yes.

#### Rebecca:

Allowing myself, finish the sentence: to rest, to sleep, to take a bath, to go have a minute.

# Dr. Wolf:

Yeah, and allowing myself not to finish my to-do list.

#### Rebecca:

Yeah. One of the ways we love to end our podcast, Dr. Wolf and Courtney, is with our top takeaways from this conversation.

### Courtney:

I really liked how you talked about what was happening in the brain and what was happening in our bodies. And when we try to retrain, that makes a lot of sense with my training, and it's presented a little bit differently than how I've heard it, too. I found that extremely helpful. And then I love your pearls piece, because I'm going to use that for sure. Because I know I need more joy in my life. I find myself saying that a lot. Because it's just go-go, especially during the pandemic, it's just been nonstop. And I need to do that more. And I'm also going to encourage other people. So, those practices are just really useful bits of information.

### Rebecca:

Dr. Wolf, your top three takeaways?



#### Dr. Wolf:

I think the main takeaway is always be kind to yourself. See that your whole body is trying to heal, your brain is trying to help you. And then really like... So, mindfulness, like turning towards experience with curiosity, and just seeing what is here, what's actually here? What are the components? Really helpful. And to see: Where are we adding to the pain without being aware of it? And letting go of that, and then really, this encouragement of just: Dare to go back into your body; you only have this one body. And there are ways how you can re-befriend the body, even if it's in pain.

And there's a really beautiful quote, and maybe that's what I would like to end with, by Nayyirah Waheed. And she said, "And I said to my body softly, 'I want to be your friend.' And it took a deep breath and replied, 'I've been waiting my whole life for this.'" And I just love that because so many...

### Rebecca:

Hove that.

### Dr. Wolf:

Where we're not really friends with our bodies. And having a chronic illness and having chronic pain is kind of making it even harder. And yet here is this one body, the only body that we'll ever have. Now can we learn to make friends with it?

#### Rebecca:

Thank you so much, Dr. Wolf, for joining us. Thank you, Courtney, for joining me in this conversation. Tune in to our show notes and check out Dr. Wolf's book, "Outsmart Your Pain" that's coming out.

Dr. Wolf:

Thank you.

Courtney:

Thank you, Rebecca.

MUSIC BRIDGE

# Rebecca:

Dr. Wolf is going to walk us through a guided meditation. I think you call it "The Box We Call Pain," correct?

Dr. Wolf:

Correct, yes.

Rebecca:



And so, if you haven't tried any mindfulness practices or guided meditation, give this one a try.

### Dr. Wolf:

Thank you. And I just want to say just two sentences before we go into the meditation. Our mind tends to put the pain into a box in our mind and tries to not touch that box. And part of the mindfulness practice is to turn towards that box that we call pain and look inside, with kindness and with courage. And what we find inside is the three components of experience. Most experiences are made out of these three, and when you're in physical pain, there are three components.

What we have is, of course, the physical aspect. We also have the emotional aspect: How are we feeling about this right now? And then we have thoughts about it, what we also call the story. And we will look at these three components in this meditation.

Alright, so, I'm inviting you to find a posture that is comfortable or as comfortable as possible, either sitting or lying down. Also, stand up if you'd like. Sometimes standing is the best possible option. And just taking a moment and checking in with yourself, noticing how you can make this more comfortable. And then starting by feeling into the support, the support into the ground, chair, the bed. Then, if the breath is a good anchor for you, bringing the attention to the sensations of the breath.

If you'd like, you can make these next few rounds of breathing a little bit longer and deeper. It's just a way to really feel the breath. It's not thinking about the breath or visualizing it, but actually feeling it. And noticing where it's the easiest to connect with the sensations of the breath. It could be at the tip of the nose or maybe the chest. Maybe the belly. And then just letting the breath flow naturally. We don't have to do anything with it. We don't have to manipulate it. The body knows how to breathe.

We can use the breath as an anchor, an anchor we can come back to when we get distracted or if it feels a little too intense and you give a moment. And then turning attention towards the pain, maybe noticing or even checking as you hear me say this. And then seeing in this moment, out of the three parts or the three components, which I've mentioned, the physical sensations, the emotion, or the thoughts or the story, which out of the three is the strongest right now?

If this was a pie, with three pieces, which one is the biggest piece? And that's what you would start with when you do this practice by yourself, and maybe just working with that part. In our practice here today, we will briefly go through all three, so you have an idea of how to work with these parts. It's actually often the story that it's hardest to be with. We'll start there.

So, working with thoughts, or with thinking rather, noticing where do you experience thoughts or thinking in your system? When you realize you're thinking, where is that located? Is that within the body, or within the head, or above the head? And how do you know you're thinking? How do you



recognize thoughts? Images or words? Do you feel thoughts or hear them or see them? Can you be aware of thinking instead of being the thoughts?

And then with attention to the emotional field, very similar here, so notice where do you even check for emotions in your body or in your system? In your chest, your belly, in your head? And what is here, in this moment? Is there an emotion? Or maybe there are several. Do you know what they are? And softly name them. For example, this is frustration. Or this is sadness. Or this is what sadness feels like. Then see if you can just track that in your body or in your system. Just like with the thoughts, being aware of the emotion instead of being the emotion. And expressing that in the way that you talk to yourself.

Instead of saying, "I'm anxious," you say, "There is a lot of anxiety here," or "This is what anxiety feels like." And notice what changes when you do that. It's part of the experience in this moment. Sometimes when noticing the presence of an emotion, and then maybe also then noticing its absence. What does it feel like when it's not there?

Now moving to the actual sensations of the pain, in this moment. So, remember, we're not trying to feel the past pain or the future pain, but really checking in right now, in this moment. What is here right now? If it feels too much, you can kind of take a little bit more of a distance. We want to bring curiosity and openness to what is actually here right now? Where is it? And then, see if you can describe that to yourself. What are the qualities? For example, is it tense? Is it hard? Or more liquid? Or a temperature, or a texture, or a color or a shape. Does it change? Or does it stay exactly the same?

And of course, when the mind wanders off, we can either bring it back to wherever we are. Or just bring it back to the breath. Exploring the sensations of this discomfort right now, these sensations. And then, for right now, for this practice, just letting go of all the concepts and words, and just resting back, opening awareness to include the whole body, or if you'd like for the moment, even including the space around you. Becoming aware, with your eyes closed, of the room around you, the room that you're in. And again, maybe taking a couple of longer, deeper breaths, as we're about to end this practice.

Then, when you're ready, just open your eyes, and inviting movement, or maybe a big stretch back in.

Thank you.

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