

Pacing

Reducing stressors

Planning

Adapting: coping strategies; implementing ways in which family/friends/professionals can be helpful.

Specific measures:

Smoking: worsens circulatory problems, heartburn, and is linked with increased risk of scar tissue after spinal surgery. So it can cost a great deal more than money! Maybe putting aside the money saved and using it for a treat such as a holiday can be a helpful incentive.

Doctors/family should not, however, adopt a hectoring approach: the patient can only give up when he/she really wants to and pressure should never be brought to bear.

An American psychologist, Dr. James Prochaska has studied ways in which 'self-helpers' who give up smoking without any professional help, and has come up with a 5-stage system:

stage 1 is Precontemplation: more or less denial that there is a problem;

stage 2 is Contemplation: realisation that there is a problem and thinking how to solve it;

stage 3 is Preparation: setting a date for change and planning how to do it;

stage 4 is Action and last but not least,

stage 5 is Maintenance.

Prochaska maintains that each stage is vital and missing out a stage is likely to result in relapse. Prochaska's team have developed a computer programme to guide people through the 5 stages.

Each individual can go at his/her own pace.

As Prochaska himself admits, though,

“The concept of the five stages is simple-putting it into practice is far more complex.”

Based, as it is, on the experiences of thousands of real people, the programme helps people to benefit from those experiences rather than struggling along in the dark. After all, it is now being recognised that nicotine is hugely and rapidly addictive and is extremely hard to give up (much harder than heroin!)

In USA, the antidepressant Wellbutrin (Zyban) has been found to help people stop smoking; it successfully reduces the craving.

Alcohol: using alcohol to manage pain tends to be counterproductive; plus there is the danger of interaction with medication.

Alcohol is also a depressant drug which can of itself make a patient depressed and is therefore likely to exacerbate rather than ameliorate any depression the patient may be experiencing.

Illicit substances: Cannabis: until the early 70s, this drug was available legally for medical purposes as an elixir. A derivative of it, nabilone, is used nowadays to treat the nausea associated with chemotherapy.

There are currently trials being conducted in the UK to assess the use of cannabis in chronic conditions such as multiple sclerosis (MS); anecdotal reports certainly suggest that it is helpful in reducing the level of pain perceived and also in controlling muscle spasms (which is understandable as it is known to have muscle relaxant properties.)

Obviously, the ASG cannot advocate the use of an illicit substance, and it must be remembered that self-medication with the street drug is a hit-and-miss affair; the dosage cannot be determined. Different preparations contain different amounts of the active ingredient THC (leaves contain 10-15%; resin ~30%; hash oil 60%. There are some new types available on the street ('Northern lights' and 'skunk') which may have up to 30 times the concentration of THC of marijuana available 20 years ago.

In 1998, a House of Lords Science and Technology Committee report suggested that cannabis should be used to relieve the suffering of terminally ill cancer patients and multiple sclerosis patients.

The chairman said that evidence of the benefit of cannabis in relieving pain justified a change in the law. The committee heard evidence that chronic pain sufferers may require large doses, but relief of muscle spasms may be achieved with only 'half a joint' i.e. 0.1g. Users with chronic pain say that the cannabis does not take away the pain but it does make it more bearable.

To date, cannabis can still only be legally used experimentally in medicine, but in the USA, in Wisconsin, a statement positive was issued about the therapeutic use of cannabis for the sick and dying in 1999 and in June this year Hawaii enacted a law to protect seriously ill patients who grow, possess or use marijuana from being arrested.

It was the first state to do so.