A River Runs Through Us
Navigating Our Upstream Battle

One of Many Documentary
A Summer to Remember
Dermatomyositis Research
My Pushy Wife
Osteoarthritis Research
Conference for HCPs
In Memory

Also...
Research and Resources
Support Groups
ACPA Mobile App is Here

VISIT OUR WEBSITE!
www.theACPA.org
The ACPA Chronicle is our voice to help facilitate peer support, education, and hope for individuals living with pain conditions. We strive to raise awareness among the health care community, policymakers, and the public at large about issues of living with physical and emotional pain. Our vision is to motivate those with pain conditions to seek quality care, to optimize healthcare office visits, and to prevent chronic disease. Our goal is to provide those with pain conditions the resources needed to make educated and shared decisions with their healthcare provider. Opinions in the Chronicle are those of the Authors and do not necessarily reflect the opinions or viewpoints of the ACPA. Although some topics may seem controversial, it is important for the Chronicle to cover a variety of topics regarding pain. And as always, consult a healthcare professional on all healthcare decisions.

Our Mission
Navigating My Upstream Battle
By Scott Farmer, MBA

I grew up by the Finley River in Southern Missouri. The Finley was in my backyard, down a very steep hill, and only a few yards from my house. The raw power of the Finley amazed me. If I were to describe the Finley, I might characterize it as a gentle stream, but after a summer rain it would turn into a raging river.

While living by the Finley, there were a few things you could be certain about... the steep slippery path that leads to it and a potentially fierce current with destructive water.

When the crystal-clear waters of the Finley turned into dark muddy water, it became an unrelenting force. The current would sweep away giant sycamores and place debris high in tree branches. The water would cut through the banks leaving erosion and new channels.

The Finley, like many rivers are a lot like chronic pain, constantly traveling through our bodies. The pain signals act as a current which is always flowing. Although we attempt to slow the flow, the current is sometimes intense and brutal... and certainly nagging.

Ideally, we find ways to live more fully with pain, but it is usually like swimming against the current. To navigate the upstream battle, we must recognize when to push ourselves, versus when to flow with the current. When we are flooded with pain, anger, regret, frustration, and disappointment, we must find ways to find hope and motivation.

As I grew older, I gained respect for the Finley River. I learned when to avoid it, and when to enjoy it... it gave back immense joy and pain.

One of the most painful memories I have of the Finley is sliding down the steep bank behind my house trying to launch a canoe. In reality, the canoe and gravity launched me. So, in the summer of 1997, a friend and I constructed concrete steps from my house down to the bank of the Finley River.

Although I moved away in 2001, every once in a while I visit the Finley. Those concrete steps are still there. To me, these symbolize a person’s ability to confront their pain, and to find constructive ways to ease the pain. Although my pain is like a river, I built a path to ease it.
One of Many: A Much-Needed Documentary
By Brittany Wagner

The ACPA is pleased to present an unprecedented partnership!

When approached by a team of documentary filmmakers—the ACPA became intrigued by a true story, and the opportunity to raise awareness about Chronic Pain.

Enter the One of Many Cast and Crew. These filmmakers are determined to shine a light on the experience of living with Chronic Pain (and caring for it) in an authentic way. The decision of the ACPA to support the ONE OF MANY documentary was an easy one...
1. To give people with Chronic Pain conditions a louder voice.
2. To help facilitate peer support.
3. To help educate the general public on the Chronic Pain crisis we are facing.
4. To provide hope for individuals living with pain conditions.
5. To raise awareness among the health care community, policymakers, and the public at large about issues of living with physical and emotional pain.

If you’d like to learn more or support the project, please click below.

Be Part of the Project

THE FILM
Art meets reality in ONE OF MANY as Mike Wagner, a blue-collar family man, loses his battle with chronic pain while fighting a maddening bureaucracy.

ONE OF MANY REVEALS THE HIDDEN TOLL OF CHRONIC PAIN ON PEOPLE, THEIR LOVED ONES, AND THE LARGER COMMUNITY WHILE SHINING A LIGHT ON OUR FLAWED HEALTHCARE SYSTEM.

Through the perspective of Mike, who secretly recorded 697 videos documenting his daily struggle while his daughter Brittany made a comedic web series about it—we give an intimate look at the dark reality of living with Chronic Pain, like nothing seen before in a documentary film.

MEET THE MAN
Mike Wagner is a modern-day everyman character, with everyman paradoxes that make him relatable to many. People like Mike aren’t typically represented in film. In fact, the film is firmly rooted in struggling middle America—a community of the borderline poor and forgotten who are neither blue nor red but just trying to get by. Their stories are almost never told and usually die with them.
Mike is representative of their frustration with the broken systems that make it impossible to get the compassionate care needed. HIS STORY IS JUST ONE OF MANY.

MEET THE CREATOR
Brittany Wagner is Mike’s eldest daughter—a filmmaker, writer, and producer. She is not only the director of this film, but she also serves as the occasional on-camera guide of ONE OF MANY. As Mike paints a picture of pain for us and the pursuit to find the support he so needs, Brittany makes the connection between his private video recordings and her public web series, RAISING ADULTS.

In 2016, Brittany set out to tell their story through her lens, to connect with others over the complex and sometimes darkly funny circumstances they found themselves in as a daughter supporting her disabled father. Little did she know, Mike had other plans as he secretly documented his day-to-day, giving us a raw glimpse of his pain and each unfortunate hurdle, he encountered. In a story of unconventional struggle where art imitates life, life also began to imitate art once Mike turned the camera on himself.

Brittany, who also managed Mike’s healthcare, was close with her dad. She was his confidant, his power of attorney, and his best friend. Handed a legacy, Brittany is now tasked with telling the true story of the man that is sadly like so many others with Chronic Pain.

QUOTES FROM THE CREATOR
Never has the silent suffering experienced by so many been documented so thoroughly or intimately.

Behind my dad’s story is a struggle that was deeply felt by others. My family, my sister, our community and I were all witnesses to his daily battle and the pain that was ever-present from the moment of his accident. But we didn’t know the half of it.

When I started this project, I thought it was just a chance to let him tell his story; I didn’t know I’d learn more about him and the reality of living with Chronic Pain than I already knew. And I never expected that his story could speak to more than those with chronic pain until I watched, transcribed, and absorbed hundreds of hours of footage. His words and feelings, while unique to him, are representative of a collective misery and a larger problem.

ACPA Disclaimer:
Contents of the documentary, including but not limited to documents, interactions, interviews, opinions, and actions in the ONE OF MANY documentary are those of the Authors and do not necessarily reflect the opinions or viewpoints of the ACPA. Although some topics may seem controversial, it is important for the ONE OF MANY documentary to cover a variety of topics regarding pain.

Always, consult a healthcare professional on all healthcare decisions.

Be Part of the Project
During National Peripheral Neuropathy Awareness Week, and to officially take peripheral neuropathy awareness to the next level, we are proud to announce the mnemonic (memory aid), M.O.V.E., that was created by people living with painful diabetic peripheral neuropathy – for people living with diabetic peripheral neuropathy.

A group of community members embarked on a mission to crowdsource a memory aid to help people remember four important things to share with their healthcare provider and start a conversation about how pain is impacting day-to-day life and activities.

**Remember:** Although various treatment options exist for diabetic neuropathy, approximately 50% of diabetic peripheral neuropathies may be asymptomatic. Delaying diagnosis and interventions can increase risk for injuries, ulcers and in severe cases can lead to amputation.

Make a M.O.V.E. to manage your diabetic nerve pain of the feet!

**Do You Have PDPN?**
Access ACPA Painful Diabetic Peripheral Neuropathy Resources

**CLICK HERE**
A Summer to Remember
By Jennifer Weisbrod, MS

Growing up in the Midwest, I could not wait for summer to arrive. I reveled in no snow to shovel or heavy coats to wear, and time off from school and a demanding schedule of extracurricular activities. I explored nature, new hobbies, and took on very “grownup” part-time volunteer jobs. Adult summers meant travel, picnics, more daylight, and whatever outdoor adventures I could squeeze in when not working.

This changed when a series of springtime illnesses and injuries stole my summers from me. My special season often focused on treatment and the tough work of physical therapy. Rather than spending time on warm weather sports, meeting new people, and photographing amazing but little-known locations, I shuffled from one practitioner to the next on exhausting roundtrips between home and medical facilities.

Though I didn’t notice at first, I came to dread summer, and spring was all about waiting for the other shoe to drop. Author Sarah Dessen expressed my mindset well in her 2009 novel, Lock and Key... if you expect the worst, you’ll never be disappointed.

As years went by, my husband and two close friends insisted that my outlook was unnecessarily limiting, that I was robbing myself of joy. Curiosity propelled me to examine how and why I had allowed this to happen. Brain science offered up the answers.

As human beings, we naturally seek out patterns in our physical and social environments. Our inherent pattern-seeking skills help us navigate roads, learn languages, predict the weather (well, sometimes), and even recognize threatening behavior of animals or people. I, however, fell prey to a common phenomenon, apophenia, the finding of patterns, connections and meanings between events and experiences where none actually exist. My brain connected summer to a series of randomly occurring unpleasant medical episodes. I came to expect the worst each year. Even when no unfortunate incidents came my way, I still waited for that other shoe to drop, protecting myself from the big summer letdown.

Another brain dynamic, I realized, was conspiring against me. By repeatedly entertaining gloomy thoughts, I was reinforcing strong negative neural pathways that would keep me rooted in this dispiriting seasonal cycle.
A Summer to Remember
By Jennifer Weisbrod, MS

Just knowing about my propensity for conjuring patterns and meanings where none existed and acknowledging that persistent dismal thinking was digging a deeper hole with every passing year, did not resolve the issue. Clearly, I needed to make a change, but what and how?

Fortunately, I had a mighty ally in the brain’s neuroplasticity. I could alter those neural pathways and rewire my brain to once again associate summer with happy feelings and experiences.

In January of this year, I committed to tackling what I considered my summer problem. So, I read about the many methods of stimulating neuroplasticity and harnessing this powerful innate mechanism for change. A select few of these techniques have become my road map for a better summer.

So far, this is what I have done:
• visualized myself engaging in adventures (travel to, and photograph, woodland scenes),
• initiated social connections (network in my professional organization),
• scheduled time for aerobic activity (with instruction from my physical therapist),
• brainstormed with my husband about novel or new activities we can share (play a round on a putting only golf course),
• identified enriching or stimulating environments (attending a major outdoor art fair), and
• pondered a new sense of purpose in life (encourage colleagues most vulnerable to professional burnout).

I don’t know exactly how my summer of 2023 will unfold, but I’m sure of one thing. It will be a summer to remember, filled with the positive memories I choose to create.
NEW! cMigraine

cMigraine is a coloring book that enables a parent to explain and learn about Migraine, along with a child! As you color, you will learn important migraine management techniques. With twenty pages to color, along with your child or grandchild, you will learn about migraine and coping techniques like learning the causes and triggers of migraine. The interactive coloring book will allow you and your child to learn every aspect of migraine management, including ways your child can help while you have a migraine. Likewise, if your child has migraine, how you can help. Together, you will learn how to track your migraines, prepare for healthcare visits, and communicate with a medical clinician.

Proceeds go to the ACPA!

Order Here: www.acpanow.com/cb

For anyone in our community interested in participating in research, a new clinical trial for Dermatomyositis is enrolling across the US. The investigational treatment is an oral pill, and researchers are inviting patients between ages 18-75 who are currently on stable treatment to explore their eligibility:

https://lpcu.re/VALORStudy

Participant Qualifications:
• Age 18 to 75 years old
• No history of cancer in the past 5 years
• No current severe liver disease
• No thrombotic events in the past year
• On a stable dermatomyositis treatment for the last 3 months

It’s not always easy to know where to start with exploring clinical trial options, and the study team aims to make the process as comfortable as possible by guiding you each step of the way. If you think you might be interested, fill out a short questionnaire here:

https://lpcu.re/VALORStudy

You’ll be connected with someone on the team to determine whether it might be a good fit for you.

Note: Any personal information you fill out is secure and confidential.
Chronic Panes: Windows on the Emotions of Chronic Pain
By Randall H. Duckett

My Pushy Wife
We’ve been in love for decades. Would chronic pain pull us apart?

This was it: I would die at the hands of a taxi in Istanbul. My wife, whose nickname is MeK (mey-kay), inched me out as we strove to cross a car-clogged street in the city where Europe ends and Asia begins. The apparently offended drivers of yellow cabs and small sedans refused to slow and cede to us. Sitting in my wheelchair—which had made the 5,644-mile trip (as the crow flies) from our former hometown in Tennessee to Turkey’s largest city—I felt out of control as the notorious traffic bore down. At the last nanosecond before I’d be hit, MeK snatched my chair backward, saving my life.

The ancient world—Istanbul was founded as Constantinople 1,800 years ago—wasn’t built for people with chronic pain like me. In the city of 15.4-million residents, my wife maneuvered me as she struggled down ripped-up sidewalks and brutally bumpy cobblestone streets. She carried the wheelchair up the railless stairs to the second-story apartment where we stayed. She hefted it into the trunks of taxis whose drivers were clearly suspicious of a handicapped American. We braved the Spice Bazaar, where disaster nearly struck again. At one point, among the prism of fragrant sumac, black cumin, and saffron, we encountered a downhill grade.

My wife used every bit of her 115 pounds to hold back her 240-pound husband from mowing down a group of women dressed in burkas.

Over the years before and since, MeK’s willingness to push me has opened up more adventures than my chronic pain should allow. She has become expert at sussing out accessible places—state and national parks with paved trails, nature preserves with boardwalks, beaches with concrete paths to the sand.

I have a genetic condition called Multiple Epiphyseal Dysplasia (MED, pronounced M-E-D), with which I was diagnosed at age 6. Its main effect is that the ends of the bones that come together to form my joints grew deformed. Picture broken gears grinding against each other, wearing down with age. As you’d expect, this causes crippling chronic pain. To get relief, I’ve had both hips replaced (twice on each side), both shoulders replaced, and both knees replaced. And still I hurt.

All the while, my wife propelled me—figuratively and literally—to recover. She wheeled me to physical therapy appointments and physicians’ offices. She emptied the urinal when I was laid up from the joint replacements. She weighed my food and gave me protein shakes after bariatric surgery, as I lost a more wheelchair-manageable 80 pounds. My wife of 37 years has been there through all the ups and downs of hospital stays, rehab, and opioids. When I couldn’t walk, she didn’t walk.
My Pushy Wife Continued
By Randall H. Duckett

I now walk with a HurryCane around the house and for short distances, with MeK mastering striding beside me as I use her shoulder to steady my gait. We break the wheelchair out of the back of our SUV for our longer adventures.

To cope with my pain, I spend my life trying to stay in control. Each step and movement are fraught because of the hurt they can cause. I spend my days anticipating physical and emotional danger. I like to think that if I can just control my environment, I can fend off the worst parts of being disabled. But riding in the wheelchair, I have no control. When we travel, I depend on MeK to have my back, literally. Like I did that day crossing the street in Istanbul, I’ve had to trust her implicitly to get me safely where I need to go.

I fret that I’m imposing on her too much, that I am somehow forcing her—the old “in-sickness-and-in-health” vow we made back in the ’80s—to give up a part of herself to care for me. Would she, I often wonder, be better off not pushing me around? I usually repress such feelings, but recently I asked MeK about them. I love pushing you, she responded from the kitchen as I sat in my La-Z-Boy in the living room. I love to hike, but what’s the fun in doing things alone? Pushing you feels like we’re walking together. It’s made me more conscious of my surroundings. We got to go to the Lincoln Memorial; who knew there was an elevator? We found the accessible botanical gardens in Savannah and Chicago. Remember when we went to the game at the minor league stadium in Columbia [South Carolina]

and got to see the eclipse because we could take the wheelchair into the outfield area? I have such great memories of exploring with you.

MeK never makes me feel bad about being in chronic pain. I know that minding a handicapped person is hard on her body and emotions. When I get upset, I try to remember that pushing the wheelchair and other acts of caregiving are her love language. She does it for the life we’ve built over 40 years of being best friends. We are bonded by the barriers we’ve faced.

In September 2021, as the pandemic eased and before Omicron, we attended a new church near our now home in the Philadelphia suburbs. The event was outside under the theory that any corona virus particles would blow away harmlessly. Because I needed a place to sit, MeK pushed the wheelchair through the parking lot and into a driveway where the service would be held. On that bright fall morning, the minister preached about the potential to do good and live well despite COVID. As I sat listening in pain, I thought about how little in life is in our control and how we must persevere despite obstacles like cracks in the sidewalks. MeK believes in heaven and a higher power that guides us. I am not so sure. I bump at the idea that there is some deity in the sky controlling our lives, however, that doesn’t matter. I go to church not because I am religious, but because it is another experience my pushy wife and I can share together... because I believe in us.

CAREGIVERS ARE AMAZING!
Find a Caregiving Guide
Click Here!
Osteoarthritis Research Program

This Research Program aims to solve treatment challenges in osteoarthritis by developing new ways to help the human body regenerate its own joints.

The program, called Novel Innovations for Tissue Regeneration in Osteoarthritis (NITRO), is the first of several programs.

OA is a common and often very painful condition where bones and cartilage break down. The condition currently affects more than 32 million Americans, with numbers predicted to rise as the population ages. There is currently no therapy available to reverse the damage caused by the disease.

To get a better solution to everyone with OA, NITRO will explore technologies focused in three areas - injectable bone regeneration, injectable cartilage regeneration, and replacement joints built from human cells.

Through a Broad Agency Announcement (BAA), ARPA-H’s NITRO program will solicit proposals to develop and leverage innovative forms of regenerative medicine to create minimally invasive therapeutics that fully regenerate damaged joints. A Proposers' Day for interested research teams, or performers, is scheduled for June 15, 2023. For more on NITRO, visit the ARPA-H website at https://arpa-h.gov/engage/programs/nitro/

The Great Now What is a feature length documentary film executive produced and co-written by ACPA member Maggie Whittum. The film is about resilience in the aftermath of a major health crisis. The documentary follows Maggie’s life after surviving a massive brainstem stroke at age 33, and learning to live with intense nerve pain. It also features several other women with disabilities and chronic illnesses who are performing artists and visual artists. The film explores how art is an invaluable part of the healing process.
YOU are invited to…

Inspire

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Capital Federal Conference Center
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Top Thought Leaders Present HOT Topics…
Osteoarthritis | Painful Diabetic Peripheral Neuropathy
Pain and Sleep Disorders | Managing Back and Neck Pain
Migraine Treatment and Prevention | Interventional Pain Management
Lifestyles and the Brain-Gut Connection | Latest in Medical Cannabis
OIC | Opioids for Chronic Pain in 2023 and much more!

TO REGISTER GO TO
www.acpanow.com/2023-CME

An Inspired CME Conference
For Those Treating Pain

Target Audience: Physicians, Nurse Practitioners, Physician Assistants, Nurses,
Medical Technicians, Pharmacists, Psychologists, Physical Therapists and other healthcare
professionals that treat pain conditions.

This activity is supported by educational grants provided by Averitas Pharma, Inc.,
Collegium Pharmaceutical Inc., and Salix Pharmaceuticals.

Interested in Exhibiting in the Regnier Atrium? Email: ksapp@theacpa.org

American Chronic Pain Association | 11936 W. 119th Street, Suite 216 | Overland Park, KS 66213 | 913.991.4740
Remembering James M. Gray
By The Family of James M Gray

Dear ACPA,

We would like to recognize your wonderful organization in honor of James M Gray. James passed on December 12, 2022, and suffered many years with chronic pain. His family and friends are sending this memorial in his honor.

The Family of James M Gray
Omaha, Nebraska

A Netflix Documentary:
Calling Attention to Complex Regional Pain Syndrome (CRPS)

Click here: http://rsdfoundation.org/en/netflix.htm
Holly Harris
The Holly Harris Memorial Golf Outing will be on Friday July 28th, 2023 (1:30 PM) at Sycamore Hills, Macomb MI. This is in honor of Holly Harris (12/24/64 to 03/16/21). Holly passed away of heart failure and had chronic pain. She needed two knee replacements, two shoulder replacements and her right femur needed to be replaced as well. Proceeds from the outing will go to the American Chronic Pain Association (www.theacpa.org). Contact Mark Harris at (284) 229-8267.

Don Bowman
In loving memory of Uncle Don Bowman... from S Ferris.

A Special Thanks To...
• Larry Kellett... (2 Lifetime Memberships in the amount of $2,000)
• Peter Labadie... (Lifetime Membership in the amount of $1,000)
• Eric Sheridan... (Premium Member in the amount of $515.38)
• William Schmidt... (Premium Member in the amount of $200.00)
• Robert Goodman... to Matt (Premium Member in the amount of $103.48)
• Gary Klien... (Premium Member in the amount of $100.00)
• Mary Ann Fastook... (Premium Member in the amount of $100.00)
• John Loeser... (Premium Member in the amount of $100.00)
• Mistie Anderson, Lyn Spens, Adele Garland, and Evan Shin
• All support group facilitators!
People with pain can play an important role in the development of new therapies by taking part in clinical trials. Find a listing of IRB-approved clinical trials that might be of interest to you at www.ACPANow.com/research/. New trials are posted often, so check back regularly.

Current Research Studies
- Knee Osteoarthritis
- Cannabinoids
- Fibromyalgia
- Rheumatoid Arthritis
- Dermatomyositis
- Anxiety and Pain

People Prescribed Opioids and Drink Alcohol Needed for Online Study!
If you are currently prescribed opioids, drink alcohol, and are at least 21 years-old, you may qualify to participate in an online research study about substance use and health. If interested, please call (315)443-1052, email bmrg@syr.edu, or complete this brief questionnaire: https://syracuseuniversity.qualtrics.com/jfe/form/SV_eFlaWMRxkvvo0RM

- Behavioral Medicine Research Group, Syracuse University

NEW

PRESCRIPTION OPIOID TAPER SUPPORT (POTS) AND MEDICAL CANNABIS STUDY (Earn $1,130)
Are you struggling with headaches?

MigrainePro.com

The ACPA and Stanford Chronic Pain Resource Guide

The ACPA Inspire Pain Freedom Video Conference

Painful Diabetic Peripheral Neuropathy Resource Guide
The question I hear most often from other facilitators is *what do we discuss within the group?* My answer is the *Ten Steps From Patient to Person.* It provides endless topics to discuss. By following, discussing, and analyzing each step over several meetings, the steps act as goals for group members. Written by Penney Cowan (Founder of the ACPA), simply ask the questions, *what does this step mean to you? Have you accomplished this step? How?*

**Endless Group Discussion**

**Step One: Accept the Pain**
Learn all you can about your physical condition. Understand that there may be no current cure and accept that you will need to deal with the fact of pain in your life.

**Facilitator:**
I explain what this step means to me, and if I have accomplished this step. If I have, I explain how. If I am still trying to accomplish this step, I explain how I plan to accomplish it. Then I open these questions for group discussion...

**Step Two: Get Involved**
Take an active role in your own recovery. Follow your doctor’s advice and ask what you can do to move from a passive role into one of partnership in your health care.

**Questions:**
- *What does this step mean to you?*
- *Have you accomplished this step?*
- *How did you accomplish this step?*

**Step Three: Learn to Set Priorities**
Look beyond your pain to the things that are important in your life. List the things that you would like to do. Setting priorities can help you find a starting point to lead you back into a more active life.

**Step Four: Set Realistic Goals**
We all walk before we run. Set goals that are within your power to accomplish or break a larger goal down into manageable steps. And take time to enjoy your successes.
Step Five: Know Your Basic Rights
We all have basic rights. Among these are the right to be treated with respect, to say no without guilt, to do less than humanly possible, to make mistakes, and to not need to justify your decision—with words of pain.

Step Six: Recognize Your Emotion
Our bodies and minds are one. Emotions affect physical well-being. By acknowledging and dealing with your feelings, you can reduce stress and decrease the pain you feel.

Step Seven: Learn to Relax
Pain increases in times of stress. Relaxation exercises are one way of reclaiming control of your body. Deep breathing, visualization, and other relaxation techniques can help you to better manage the pain you live with.

Step Eight: Exercise
Most people with chronic pain fear exercise. However, unused muscles feel more pain than tones, flexible ones. With your doctor, identify a modest exercise program that you can do safely. As you build strength, your pain will decrease. You will feel better about yourself.

Step Nine: See the Total Picture
As you learn to set priorities, reach goals, assert your basic rights, deal with your feelings, relax, and regain control of your body, you will see that pain does not need to be the center of your life. You can choose to focus on your abilities, not your disabilities. You will grow stronger.

Step Ten: Reach Out
It is estimated that one in three suffers with chronic pain. Once you have begun to find ways to manage your chronic pain problem, reach out and share what you know. Living with chronic pain is an ongoing learning experience. We all support and learn from each other.

The Ten Steps From Patient to Person are a copyright of the © American Chronic Pain Association 1985-2023.
Dear ACPA Members,

Since 1980, The American Chronic Pain Association has advocated for people living with pain and provided them with resources. Our efforts have reassured people with pain that they are not alone, as we offer the support and the hope they deserve. The ACPA has shown millions of people in pain how to achieve reduced suffering and a better quality of life.

The ACPA understands the daily battles people in pain fight. Therefore, we continue to advocate for your rights and provide pain management strategies and tools for you, your caregiver, and your healthcare team to better understand your condition. We believe more resources are needed to provide empowerment and shared decision-making in pain management.

We are grateful for your partnership. When you support the ACPA, you help fight for people living with pain to be heard, respected, and treated equally. Your support makes the important work of the ACPA possible, so please consider support today.

Sincerely,

Kathy Sapp, CEO
American Chronic Pain Association

HOW TO SUPPORT THE ACPA

- Recognize someone to be featured in the Chronicle ($50.00) [Click Here]
- Purchase a Premium Membership ($100.00) [Click Here]
- Purchase a Contributor Membership ($500) [Click here]
- Purchase a Lifetime Membership ($1,000) [Click here]
- Purchase a Legacy Membership ($5,000) [Click here]
- Advertise in the Chronicle. Email us for pricing: acpa@theacpa.org
- Corporate Membership. Email us for pricing: acpa@theacpa.org
- Consider the ACPA in your Estate Planning: acpa@theacpa.org

IMPORTANT NOTE: STANDARD MEMBERSHIP IS FREE. EVERYONE GETS ACCESS TO ALL RESOURCES!
The American Chronic Pain Association (ACPA) is a non-profit, 501(c) (3) organization. Our Mission is to facilitate peer support, education, and hope for individuals living with pain conditions. We strive to raise awareness among the health care community, policymakers, and the public at large about issues of living with physical and emotional pain. Our vision is to motivate those with pain conditions to seek quality care, to optimize healthcare office visits, and to prevent chronic disease. Our goal is to provide those with pain conditions the resources needed to make educated and shared decisions with their healthcare provider.

Have a Wonderful Summer
-ACPA Team-

Thank You for Reading!

VISIT OUR WEBSITE!
www.theACPA.org