

Chronic pain treatment

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Patients with chronic pain and comorbid [obesity](#) achieved sustained Health-Related Quality of Life (HRQoL) improvements from Interdisciplinary Multimodal Pain Rehabilitation (IMMPR). This finding suggests that rehabilitation professionals should consider using IMMPR for patients with comorbid obesity even though their improvement may not reach the same level as for non-obese patients ¹⁾.

Chronic pain syndromes caused by degenerative and post-infectious changes in the cervical spine continue to pose significant management challenges to neurosurgeons and pain practitioners. The identification of an individualized treatment plan, astute surgical technique, comprehensive and multimodal analgesia and adequate rehabilitation processes do not necessarily result in diminished pain.

Spinal cord stimulation

[Spinal cord stimulation for chronic pain.](#)

Deep Brain Stimulation for chronic pain

[Deep Brain Stimulation for chronic pain.](#)

[Deep brain stimulation](#) (DBS) and [motor cortex stimulation](#) (MCS) are established surgical modalities that have been successfully used over the last several decades for treatment of numerous chronic pain disorders.

Virtual Reality

see [Virtual Reality for Chronic Pain Treatment](#)

1)

Dong HJ, Larsson B, Rivano Fischer M, Gerdle B. Maintenance of quality of life improvement for patients with chronic pain and obesity after interdisciplinary multimodal pain rehabilitation - a study using the Swedish Quality Registry for Pain Rehabilitation (SQRP). Eur J Pain. 2019 Jul 25. doi: 10.1002/ejp.1457. [Epub ahead of print] PubMed PMID: 31343806.

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