

100 million Americans have chronic pain. Very few use one of the best tools to treat it.

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When pain settled into Blair Golson's hands, it didn't let go.

What started off as light throbbing in one wrist 10 years ago quickly engulfed the other. The discomfort then spread, producing a pain much "like slapping your hands against a concrete wall," he says. He was constantly stretching them, constantly shaking them, while looking for hot or cold surfaces to lay them on for relief.

But worse was the deep sense of catastrophe that accompanied the pain. Working in tech-related startups, he depended on his hands to type. "Every time the pain got bad, I would think some variation of, 'Oh no, I'm never going to be able to use computers again; I'm not going to be able to hold down a job; I'm not going to be able to earn a living; and I'm going to be in excruciating pain the rest of my life,'" he says.

Like many patients with chronic pain, Golson never got a concrete diagnosis. For a decade, the 38-year-old Californian went from doctor to doctor, trying all the standard treatments: opioids, hand splints, cortisone injections, epidural injections, exercises, even elective surgery.

Overall, the takeaway is that "pain isn't just something that happens to us," says Beth Darnall, a professor of anesthesiology at Stanford University. "We are participating with pain by how much attention we give to it, by the contents of our thoughts, and our appraisal. How awful and negative is it? How helpless and hopeless do you feel about it? Do you feel [like] a victim; do you feel at the mercy of your pain?"