



Psychotherapy & Counselling That Works

OldPain2Go®

Questions and Answers

Please note: This does not constitute medical advice nor is it a substitute for it. You must have been diagnosed by a medical professional who has prescribed or advised pain relief.

As OldPain2Go® Practitioners we will work with you to help you access the part of your mind that deals with your own healing processes and help you ask for it to review your pain messages. It is not a treatment, it is a non-medical intervention of self work.

Q. What does the medical profession think of it?

A. I have demonstrated this to doctors and have also demonstrated on them, all of whom have been impressed. However, I have only met the ones open minded enough to make contact with me. I have also trained Doctors, Psychologists and Physiotherapists who have become Practitioners in OldPain2Go® .

Q. Does it work?

A. Yes it can with a client who is positively wanting to be pain-free.

Q. Is this a Pain Management technique?

A. No. Pain management is about ongoing effort and rarely leaves you free of pain.

Q. What can I expect?

A. Your pain is unique to you and so is your perception of its level. At the end of a review session you may have a change in that perception to record one of three things: Zero Pain, Reduced Pain or, No Change.

Q. Does it work on any pain?

A. The review may bring about changes regardless of the original cause, providing there isn't still a need for it to be retained at that level. If there is still a medical reason to keep the pain then your unconscious will not release it.

Q. Do I need the pain until that part is completely healed?

A. No. Pain is a message that once it has alerted you to the problem, and you have done all you can, it is usually no longer needed. Think of a fire alarm, it gets switched off and reset to be alert when the fire is out, even if it has caused damage! Our pain is usually noticeably lower as we start to heal so that we can notice a pain message indicating if it isn't healing.

Q. I am on really strong painkillers, can an OldPain2Go® Practitioner help me?

A. Yes, they may. Just think about this for a moment, if you are prescribed strong pain tablets or injections that is the medical profession saying that the pain is not necessary! Pain killers do not stop the pain message being sent out they simply interfere with it reaching the part of the body it is intended for. OldPain2Go® is directed at you asking for messages to be stopped, providing it is safe to do so.

Q. I have a lifelong condition can the pain go?

A. Yes it can. The old pain message has done its job and alerted you and the medical profession to the problem. If it is no longer perceivable then it is able to allow new pain to arrive as is needed to alert you to a new problem or a worsening condition.

Q. I have a deteriorating condition, how will it work on that?

A. On deteriorating conditions, you are likely to have regular assessments by your medical practitioner to review the problem area. OldPain2Go® would act like pressing the fire alarm reset button. Your body is aware of the damage caused by the old incident and can reset the alarm to stop ringing so it will automatically ring again to tell you of a new danger.

Q. Why does my pain get worse and require ever stronger pain relief?

A. When pain is first triggered it forms a neural pathway in your brain, which fades quickly if the pain is short term. However, if the pain continues it builds up an increasingly stronger neural connection almost like a neural motorway. This is the same way we learn to run things automatically. Unfortunately, we are learning the wrong thing. Pain does not have an end date stamped on it, and it

may "forget" to re-evaluate or turn off. There is also an issue with sensitivity to pain that it builds over time.

Q. I have put up with this pain for many years, how could it go in just minutes?

A. The longer you have had the pain the more likely it is that it no longer serves a purpose - you are aware of it - nothing can be done (medically) and your doctor prescribes pain relief. These are all signs that the old pain message is redundant. All that is required is for you to convince your unconscious of it.

Q. How often do I need treatment?

A. Typically this is a once only session for that old pain. It works by you asking for the old pain messages to be deleted, therefore, the old pain message should not return, just as a deleted answer phone message cannot be played again and the tape is cleared to accept new messages. A second session would usually only be wanted if the first session didn't produce a result you are satisfied with, or we feel there may be further traumas or opportunities for improvement.

Q. I have many different sources of pain, do I need a separate session for each one?

A. No, we may help you deal with all issues at the same time or tackle the most problematic pain issue first and then ask for the others issues to do likewise. It may take more time though so please make us aware in advance so as to allow sufficient time for your session.

Q. I have Fibromyalgia, will it work for me?

A. OldPain2Go® is not a medical treatment or a cure for any illness or ailment, it is simply a helping you and your body have a reassessment of the unconscious processes that decides on the need for pain and the level of it. Please read [here](#) Stephen Blake's introduction to OldPain2Go® and how it can benefit Fibromyalgia, CFS or ME. If you would like us to use OldPain2Go® to help with any of these conditions, it is a requirement that you read this through and understand. We can only help people willing to do what is necessary to recover.

Q. What if there is still a reason to keep the pain?

A. Quite simply the unconscious will not switch it off, because it would be unsafe to do so. The same reason you don't take the battery out of a smoke alarm.

Q. What reasons or circumstances will stop it from working?

A. Providing you are of sound mind and rational – not under the influence of mind-altering drugs or alcohol, it may work for you – except where there is **more reason to keep the pain than to lose it**. Whilst you will gain a better quality of life from being pain-free there are things you may also lose, such as; state benefits, sympathy, help, support, and reasons to not go to places – or do things you don't want. Whilst consciously you may deny that any of these influence you, it is your unconscious that decides on the balance of being in pain, or pain-free. The simple test is to answer this question out loud, "Do you want to be free of this pain?" If your answer is a solid and loud yes, then you are a good candidate. If you hesitated or thought of reasons or excuses then it might not work. However your practitioner may be able to help you with that, please bring this to their notice. It is most important you are honest and open with them.

Q. Surely if it numbs an area that would be dangerous if a new injury occurred?

A. Yes, it would, but it doesn't numb the area, it just reassess the old pain message allowing new pain to come as and when necessary. Holding on to old pain is similar to the problem of numbing an area, it means new pain might not be noticed and acted upon.

Q. Could I bring the old pain back?

A. We will instruct you on use of language and internal thoughts. If you keep looking for the pain you have lost it could convince your unconscious to give you pain again. Also, our exaggerations can intensify pain or make it seem too much of a problem to remove. Take the phrase "this pain is killing me" and you can see that is never true but it will affect how you feel.

Q. My pain comes from a very traumatic event, does that make it harder to get rid of?

A. It is frequently the case that the unconscious mind holds onto a pain message following a traumatic experience. As trauma therapists, we will first help you to remove the patterns surrounding the trauma, enabling us to then deal with the pain messages. Once the trauma is no longer being seen as a stumbling block by the unconscious mind, it will be highly likely to remove the pain.

Q. Is it Hypnosis?

A. No. The process is the simple setting-up of a yes signal and a direct discussion you will have with your own unconscious under the guidance of the Practitioner, no trance state is needed.

Q. Is it SAFE?

A. Yes totally. It works by the same internally processing of your unconscious that keeps you alive, runs your heart, your lungs and every other cell in your body. Together we just make it aware of that the pain is more of a problem than helping you. Your unconscious then makes the **best** choice for you, and it has kept you alive all these years.

Q. Why isn't it well known?

A. People don't really seek out the help they don't know exists and are therefore cynical in trying it. It sounds and feels unbelievable even long after you no longer feel any pain. It's a bit of a vicious circle when people don't take the opportunity because it seems like no-one else has! All our clients hoped it would work but didn't really believe it could until they saw it happen.

Disclaimer – Please read before considering OldPain2Go®

This method does not constitute medical advice. The content is for informational purposes only based on Steven Blake's methodology, personal views, experiences, research and training. He has no medical training, qualifications or background.

This is not a substitute for medical diagnosis, assessment or treatment, and is simply a way of you changing your attitude to pain by talking directly to it.

OldPain2Go® is a non-medical intervention. This is not a pain treatment, it is simply a way for someone to ask their own healing system to review the need for the perception of pain. Their own internal system then does whatever is safe and effective to do so, which may include no change.

Consult with your Doctor (GP) on all medical issues regarding conditions and treatment. The information on this site is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Sessions are not a substitute for a medical examination, nor does it replace the need for services provided by a medical professional. Always seek the advice of your medical professional before making any changes to your treatment.