For an injury that would create so much pain, it seemed almost harmless at the time. Lauryn and her older brother Brady were on a family vacation to Florida, tossing a football back and forth on the beach. Brady hurled a long bomb. Lauryn chased the football as it hurtled through the air, feet padding against the soft sand. As the ball sailed over her head, she turned to catch it and tripped. Her right foot swelled, but not so badly that she couldn’t go back to playing. And in the days that followed, the injury seemed to improve.

However, soon after coming back home, the pain and swelling returned. The 15-year-old went to her physician. Her physician sent her...
for an x-ray. The foot was undamaged, just a bit of mild swelling on the cuboid bone. So, Lauryn iced and rested her foot, as instructed, but the pain persisted. Next came an MRI. Again, it was the same—no visible damage.

With no diagnosis or cure for the pain and swelling, Lauryn began physiotherapy. However, her foot and ankle were so hypersensitive to touch that it made progress near-impossible. Three months after she began treatment, things had only worsened. Her foot was often cold, swollen, and purple, and the pain had spread all the way to her knee. The injury had also begun to take a more serious psychological toll, too. The once ebullient teen had become quiet and reclusive, plagued by panic attacks and stomach aches. She missed months of school.

There were more scans, more appointments, even a new physiotherapist. Nothing seemed to help. There was no visible damage, nothing on which a surgeon could operate. Finally, almost a year after the injury, Lauryn’s mother insisted her family physician refer them to a neurologist. The physician made the referral. It seemed like their last hope.

After learning of Lauryn’s painful journey, including the myriad frustrations and failed treatments, the neurologist had a diagnosis. It was Complex Regional Pain Syndrome I, a chronic pain condition believed to be triggered by nerve damage. The doctor only knew of the condition because she herself had suffered and recovered from it. Lauryn and her mother cried. After months of confusion, frustration, and suffering, they had a diagnosis. They had hope.

The neurologist prescribed Lauryn medication—five pills a day, two in the morning and three before bed. But she also gave Lauryn what her mother had wanted for months: a referral to the Pain Centre at SickKids.

Lauryn rode in her parents’ car in silence. It’d been over a year since she’d tripped on that beach in Florida, and she was still no closer to a cure. At nine, she’d been so inspired by the SickKids telethon on TV that she declared she was going to become a paediatric brain surgeon. Now, she was riding to that same hospital, in search of something, anything, that could help her manage the constant pain.

After insisting that she would be the one to tell her story, Lauryn hobbled towards the room for her appointment. Inside she was met with a veteran team of seven specialists, including a psychologist, psychiatrist, and the head of the program. Lauryn took off the shoe and sock of her right foot, then, once again, described everything that happened thus far. Her parents watched her speak with a mix of pride and awe, tears streaming down their faces. After Lauryn finished, the seven-person team peppered her with questions. When your pain is at its worst, what would you give it on a scale of ten? And its best? Though frustrated, Lauryn answered as best she could. At its worse, her pain was a nine, at its best, a six.

For Lauryn, the initial visit was a disappointment. She’d had enough of talking. She wanted change, relief. But from the meeting, a plan formed. Lauryn was to visit the clinic twice a month and continue taking her medication.

In those first sessions at SickKids, Lauryn learned the 3 P’s of chronic pain management: physical therapy, pharmacology (medicine), and psychological therapy.

“At Get Up and Go, we help teens recapture their vision of what a meaningful and joyous life looks like to them.”

TO DATE, PAIN IN CHILD HEALTH TRAINEES AND FACULTY HAVE PRODUCED OVER 500 PUBLICATIONS
and psychology (coping strategies). Her new physiotherapist introduced her to seven-minute meditation exercises, but the instructions confused her, and the exercises left her drowsy. As an alternative, Lauryn turned to a different mindful practice—music. Inspired by her brother, who taught himself guitar by watching YouTube videos, Lauryn picked up the ukulele. At first it was only a couple of songs, played over and over again, but her repertoire soon expanded. Better yet, the instrument proved a great way to cope with her pain.

As summer approached, Lauryn steadily improved. She even felt well enough to apply for a job as a camp counselor. But during a meeting with her SickKids physiotherapist, Lauryn learned of a program that would change not just her summer plans, but her entire life.

The Program was Get up and Go: Persistent Paediatric Pain Service, an intensive month-long program consisting of a two-week inpatient stay followed by a two-week day program, first launched in 2015 as a partnership between SickKids and Holland Bloorview Kids Rehabilitation Hospital. The first of its kind in Canada, Get Up and Go exists to help youth like Lauryn suffering from chronic pain, many of whom also suffer social isolation, disrupted sleep, emotional distress, and reduced day-to-day functioning. The program functions like a holistic boot camp for chronic pain, using a multidisciplinary team of eleven professionals to teach children everything from proper medication storage to yoga and mindfulness. Ardith Baerveldt, a psychologist with Get Up and Go, explained her job is to "help teens think about how they handle the tough stuff in their life, like chronic pain." Baerveldt said, "At Get up and Go, we help teens recapture their vision of what a meaningful and joyous life looks like to them."

Although space was limited, Lauryn was in luck—she was accepted into the program for August.

During her intake session, the team explained that the program was intended to help Lauryn increase her self-confidence, coping ability, and independence. Soon after, Lauryn began her two-week stay at Bloorview Holland with a group of girls close in age. In that first week, Lauryn pushed herself physically, but was told she needed to open up more. However, in that second week, her family started to notice a real difference.

"Lauryn sent me a text early one morning to tell me that she was 'going into the forest for a run,'” said Jodi, Lauryn’s mother. She thought Lauryn was describing a dream. She wasn’t. “She went for a run. Outside. For 30 minutes. And she was doing it again the next day.”

Lauryn kept running and kept improving, and by the end of those two weeks, she was utterly transformed.

“Before I came into this program, I was not myself,” Lauryn later recalled. “I would sit in my room all day and I was always in a lot of pain. After coming into this program, I was able to get back to who I am, both mentally and physically, and it’s really helped me become the person I am today.”

On the last day of the program, the Get Up and Go team detailed Lauryn’s incredible progress. When they finished, Lauryn had the opportunity to speak. This time, there were no more horror stories of endless pain and failed treatments. Lauryn only wanted to say thank you to the team that helped give her life back.
THANK YOU.

Every day, SickKids is working towards improving the lives of children, and our success depends on the generosity of donors like you. Your commitment to SickKids’ Pain Centre ensures that we can continue to offer the best possible health outcomes for children suffering from pain. Thank you for your remarkable generosity.

If you have any questions regarding the information included in this report, please contact:

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