

In the Past the Answer to Chronic Pain was "All in your Mind"

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Chronic Pain

A useful definition from Margo McCaffrey is the following: "pain is the description of the individual who is experiencing it and exist when he says so".

The International Association for the Study of Pain defines it as "an unpleasant sensory and emotional experience, combined with actual or potential tissue damage, or described in terms of such damage.

The pain is transmitted through the body to the nervous system, where the nerve endings detect damage in a body part. The nerves transmit the warning through specific neural pathways in the brain, where the signals are interpreted as pain.

Today specific pain can understand how the sensation of pain is generated: the way in which the nervous system, including the spinal cord, interacts with the brain, so as to create the sensation of pain. Knowledge of the neurotransmitter system, i.e. chemical messengers that transmit nerve signals, has opened the door to important new methods of treating pain. In recent years, scientists have learned how to manage these chemical messengers, to change the way we interact with brain signals.

This led to the use of antidepressants and other drugs, which work with specific chemicals in the brain that affect emotions and help in pain perception. Most drugs are very effective.

And with advances in magnetic resonance imaging, researchers can demonstrate that changes are very real to the brain. We can see exactly what creates the sensation of pain in the brain, when activated by a stimulus. We can see the impact of pain on the person's emotional state.

There is also a new concept, a process called central sensitization. If the original pain from an injury is not properly treated, then these pain signals are sent repeatedly, thus leads to changes in the central nervous system, which make it more and more vulnerable. So, over time even physiological stimuli, can perceive as painful. With this knowledge, the specialists of pain prescribe now drug treatments that attack moderate-to-severe chronic pain from different angles: innovative medicines, techniques designed to nerves and medical drug pumps, they offer a strong analgesia in the nerve roots. Doctors also approve the use of psychotherapy, relaxation techniques, and hypnosis and alternative therapies such as acupuncture, based on more and stronger evidence mind-body connection in relieving chronic pain. There is still much to

learn, but research has provided evidence for the development of even newer treatment options.

Treatment Options

Many patients come for treatment in the final stages of chronic pain when it is more difficult to treat. The sooner it starts treatment, the more chance there is for successful pain management.

When the pain is severe then doctors turn to stronger drugs:

1. Antiepileptic

2. Antidepressants

3. Creams for Pain Relief

4. Skin patches

5. Opioids

6. Nervous blocks: When a group of nerves causing pain to a specific organ or body area, the pain can be blocked by the injection of local anesthetic. This is a nerve block.

7. Cautery ablation (radiofrequency ablation): A small area of neural tissue is heated to reduce the pain signals from that area. The procedure is conducted under the guidance of imaging CT.

8. TENS: Transcutaneous Electrical Nerve Stimulation

9. Injection in the trigger point: Painful points in a muscle or connective tissue. They can sensitize the nerves around them and cause pain in other parts of the body.

10. Pain-Pacemakers: The technique called spinal cord electrical stimulation and includes a pacemaker type device, implanted in the body.

11. Implantable medical drug pumps: These are also called intrathecal pumps, because they send pain medication to the spinal cord.

12. Surgery: Surgery can help in some cases Advisory for better management of chronic ponoukai relaxation techniques.

13. Acupuncture: The National Institutes of Health recognizes acupuncture as an effective measure of pain management, particularly headaches and low back pain.

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Received September 25, 2015; Accepted September 26, 2015; Published September 30, 2015

Citation: Maria D (2015) In the Past the Answer to Chronic Pain was "All in your Mind" Pain Manage Med 1: 101.

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