

# Chronic Pain: A Primer for Patients and Their Families

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Acute pain is an unpleasant sensation that alerts us to illness, injury or danger somewhere in the body. This is necessary for our survival. With pain, we know something is wrong and we can take steps to avoid or correct problems as they occur.

Chronic pain is simply pain that has outlived its usefulness. This is a part of life. As we age, we end up with “aches and pains” as the result of aging and injury. My father, at age 80 told me, “At my age, if you wake up in the morning and nothing hurts, check the obituaries”. My own experience bears this out.

Eight years ago I broke my left foot jumping over a fence. Being a physician, I did not go to my doctor, but continued to walk on it for the next 3 months. My wife got tired of watching me limp, and gently suggested that I see someone, so I did. The orthopedist looked at the X-ray of my foot and saw the fracture that had healed in a misshapen way. Now when my foot points North, my toes point Northwest. I also know when it’s going to rain about a day ahead of time.

This type of chronic pain is not harmful. It’s just a nuisance. I don’t miss days of work, take pain medicine, and have not been back to the orthopedist. Yet, some individuals have the same or similar type of injury and end up disabled and miserable from their chronic pain.

When chronic pain progresses from being a nuisance to a life-altering affliction, this becomes chronic pain syndrome. The body’s normal response to illness or injury is to heal. When this does not occur, chronic pain syndrome develops.

## **Understanding Chronic Pain Syndrome (CPS)**

### Wimps vs. Tough Guys

People say “it shouldn’t feel so bad –tough it out,” inferring that people who cannot take a lot of pain are weaklings.

Fact: I am a wimp. I do anything I can to avoid pain. When asked if I want freezing at the dentist, I say, “Make it a double.” Yet, when I broke my foot, I never developed CPS.

Mel is a fireman. In his career, he has entered burning buildings to save peoples’ lives. He is by nobody’s definition a wimp at all. Yet his foot has bee plaguing him, and the subsequent Chronic Pain Syndrome that has developed has made his life miserable.

### **The Four Elements of Chronic Pain Syndrome**

Many elements are at play with chronic pain syndrome. Mostly they are collapsed – one condition on top of another, making them indistinguishable.

We have identified four elements. They are:

1. Chronic Pain Syndrome
2. Psychological Factors
3. Addictions
4. Other Medical Conditions

Chronic Pain Syndrome that is described above can be either local or diffuse.

#### **Local**

- Neuropathic pain
- Pelvic pain
- Head pain
- Skeletal pain
- Irritable Bowel Syndrome

## Diffuse

- Fibromyalgia

We now know that both types of CPS result from an abnormal neurological response in the brain to pain. Why some people get CPS and others don't is unknown.

One way to look at this is that in some people, it is as if the brain becomes "allergic" to the pain. Some people suffer from allergies and others don't. We don't know why. We simply deal with the allergy as it shows up.

It's the same with CPS. Though we don't know why it occurs, we can take steps to alleviate its debilitating effects.

## **Other Medical Conditions**

Other medical conditions can affect those who suffer from chronic pain. If these conditions are left unattended, they can severely hamper or prevent recovery.

A diabetic with a broken leg will not heal their fracture unless the diabetes is controlled. Also, the diabetes will remain out of control as long as the fracture is not treated. The stress of an untreated fracture will keep diabetes in a state of imbalance. Both need to be addressed concurrently for a patient to recover.

Similarly, for those with CPS, we need to treat other existing medical conditions if they are to overcome the CPS.

More common medical conditions include, but are not limited to diabetes, other acute painful conditions (anything from a broken bone to appendicitis), vitamin deficiency, gastrointestinal, etc.

## **Psychological Issues**

Psychological issues may influence how we feel pain. Not all people with psychological issues have CPS. However, EVERYONE with

CPS has at least one psychological issue. To encounter and have to deal with CPS is very depressing. So, one psychological condition that develops is chronic depression. Other people may have other psychological conditions such as traumatic stress disorder, anxiety disorders, bipolar disorder, or other conditions. Just like the other medical conditions discussed above, these psychological issues, whether depression or something more, need to be addressed as part of the comprehensive care of CPS. Counseling, group therapy, and medication are often needed to treat these conditions.

Medications taken to treat pain may start out as the solution to pain but may end up becoming part of the problem. Opioid pain medications are a good example. These may be useful for acute pain, and in some cases, to alleviate chronic pain. But in CPS, they often lead to problems of tolerance. More and more of the drug is needed to get the same level of pain relief. It may also suppress the body's own natural painkillers, called endorphins. In both cases, patients with CPS may feel more pain, in spite of (or because of) the pain medications.

Side effects of these drugs can cause their own problems. Often these side effects are treated with yet other drugs, causing further issues. Some may try to cut back on their pain medication only to suffer miserable, sometimes excruciating withdrawal symptoms.

Sedatives, sleeping pills and tranquilizers are sometimes prescribed to treat people with CPS. These drugs may cause memory impairment, coordination problems, and falls as well as causing or worsening depression.

## **Addiction**

CPS is often complicated by the illness of addiction. While many CPS sufferers become chemically dependent, a few actually develop addictions to them, through no fault of their own.

Now go to people with other substance addiction (street drugs, alcohol) – past, remote addictions may impact pain perception (i.e. recovering alcoholics)

Tobacco addiction makes CPS worse and has a significant negative impact on recovery. Nicotine dependence affects medical conditions, psychological issues, and perceptions of pain.

### **Solving the CPS Puzzle**

To solve the puzzle of CPS, all four elements – *Chronic Pain Syndrome, Psychological Factors, Addictions, and Other Medical Conditions* – need to be addressed by a comprehensive treatment program. With all elements addressed, people can recover and lead productive lives.