04 Pain Management

Pain Definition: “An unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage”

Neuropathic Pain vs Nociceptive Pain

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| |  |  |  |  | | --- | --- | --- | --- | | **Two Major Types of Pain** | | | | | **Nociceptive Pain**  Normal process of stimuli that damages normal tissues or has the potential to do so if prolonged; usually responsive to nonopioids (NSAID) and/or opioids. | | **Neuropathic Pain**  Abnormal processing of sensory input by the peripheral or central nervous system; treatment usually includes adjuvant analgesics. | | | **Somatic Pain**  Arises from bone, joint, muscle, skin, or connective tissue. It is usually aching or throbbing in quality and is well localized. | **Visceral Pain**  Arises from visceral organs, such as the GI tract and pancreas. This may be subdivided:   Tumor involvement of the organ capsule that causes aching and fairly well-localized pain.   Obstruction of hollow viscus, which causes intermittent cramping and poorly localized pain. | **Centrally Generated Pain**   Deafferentation pain: Injury to either the peripheral or central nervous system.  Examples: Phantom pain may reflect injury to the peripheral nervous system; burning pain below the level of a spinal cord lesion reflects injury to the central nervous system.   Sympathetically maintained pain: Associated with dysregulation of the autonomic nervous system.  Examples: May include some of the pain associated with reflect sympathetic dystrophy/causalgia (complex regional pain syndrome, type I, type II). | **Peripherally Generated Pain**   Painful mononeuropathies: Usually associated with a known peripheral nerve injury, and pain is felt at least partly along the distribution of the damaged nerve. Examples: nerve root compression, nerve entrapment, trigeminal neuralgia.   Painful polyneuropathies: Pain is felt along the distribution of many peripheral nerves. Examples: diabetic neuropathy (b/c lack of blood flow), Shingles (from varicella virus) alcohol-nutritional neuropathy, and those associated with Guillain-Barré syndrome. | |

Ladder of Analgesia

Ad

Adjuvants

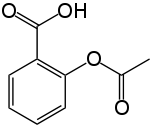
Antidepressants (Tricyclics)

Anticonvulsants (gabapentin)

Anesthetics

antispasmodics

Drugs

NSAID

Salicylate NSAIDS: Aspirin (ASA), Trilisate (has no antiplatelet activity), Dolobid, Disalcid

Use: Mild pain

Bone pain

Inflammatory pain

Acetaminophen

Narcotics: Agonist and Mixed Agonist/anTAGonist

Adjuvants: Antidepressants (Tricyclics)

Anticonvulsants (gabapentin)

Anesthetics

antispasmodics