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PAIN

Definition:

 Pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage.
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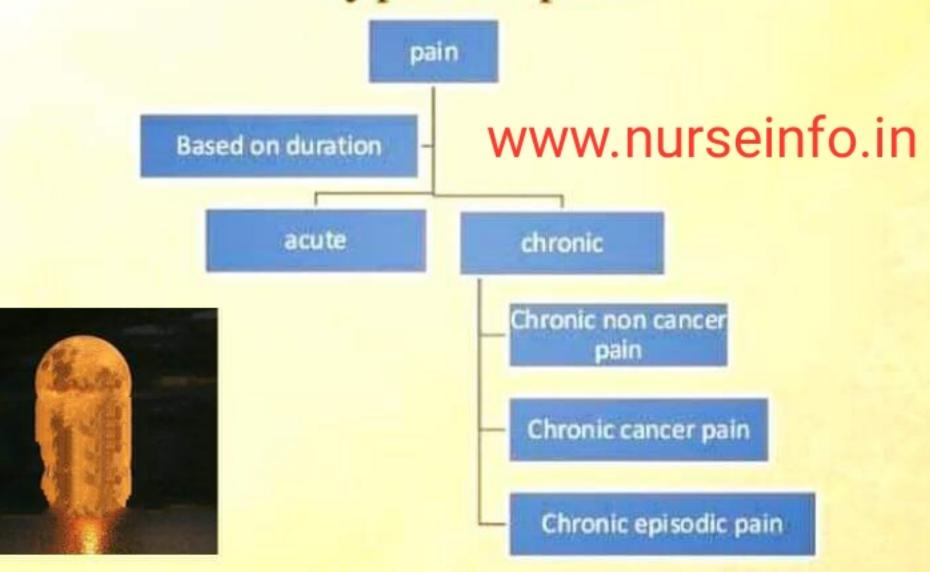
Nature of pain

- Pain is subjective and highly individualized.
- Its stimulus is physical and/or mental in nature.
- It interferes with personal relationships and influences the meaning of life.
- Only the patient knows whether pain is present and how the experience feels.
- May not be directly proportional to amount of tissue injury

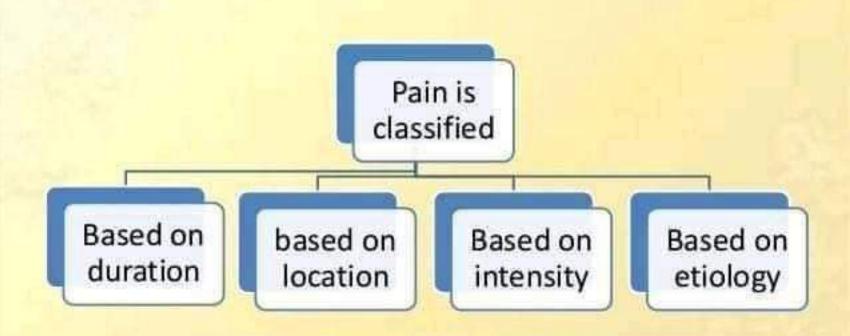
Signs and symptoms of pain:

- Increased respiratory rate
- Increased heart rate
- Peripheral vasoconstriction
- Pallor
- · Elevated B.P.
- Increased Blood Glucose Levels
- Diaphoresis
- Dilated pupils

Types of pain



Types of pain



Signs and symptoms of pain:

- MOANING
- GUARDING THE AREA
- RESTLESSNESS
- IRRITABILITY

Acute pain

- When pain lasts only through the expected recovery period, it is described as acute pain.
- Acute pain is protective, has an identifiable cause, is of short duration, and has limited tissue damage and emotional response.
- It eventually resolves, with or without treatment, after an injured area heals.

Acute pain

- Complete pain relief is not always achievable, but reducing pain to a tolerable level is realistic.
- Unrelieved acute pain can progress to chronic pain.

- Chronic pain is the pain that lasts longer than 6 months and is constant or recurring with a mild-to-severe intensity.
- It does not always have an identifiable cause and leads to great personal suffering.

Examples: arthritic pain, head ache, peripheral neuropathy.

Chronic non cancer pain:

 The chronic pain that resulted due to non cancer disease conditions is termed as chronic non cancer pain.

CHRONIC PAIN MAY BE:

- Chronic non cancer pain
- Chronic cancer pain
- Chronic episodic pain.

- The possible unknown cause of chronic pain, combined with the unrelenting nature and uncertainty of its duration, frustrates a patient, frequently leading to psychological depression and even suicide.
- Associated symptoms of chronic pain include fatigue, insomnia, anorexia, weight loss, hopelessness, and anger.

Chronic cancer pain:

- Cancer pain is the pain that is caused by tumor progression and related pathological processes, invasive procedures, toxicities of treatment, infection, and physical limitations.
- Approximately 70% to 90% of patients with advanced cancer experience pain.

Chronic episodic pain:

- Pain that occurs sporadically over an extended period of time is episodic pain.
- Pain episodes last for hours, days, or weeks. Examples are migraine headaches.

Based on intensity:

Mild pain:

 Pain scale reading from 1 to 3 is considered as mild pain

Moderate pain:

 Pain scale reading from 4 to 6 is considered as moderate pain

severe pain:

 Pain scale reading from 7 to 10 is considered as severe pain

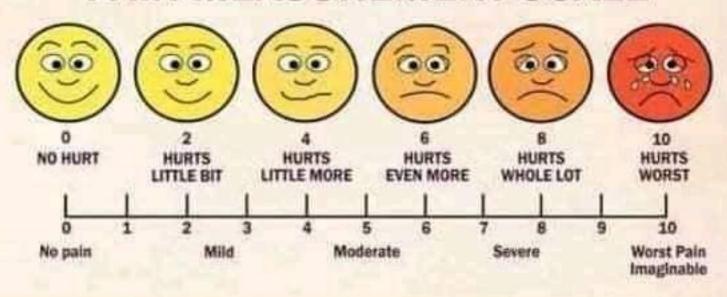
Classification based on location:

- This is based on the site at which the pain is located. Egs:
- Headache
- * Back pain www.nurseinfo.in
- Joint pain
- Stomach pain
- Cardiac pain
- Referred pain: pain due to problems in other areas manifest in different body part.
- For example, cardiac pain may be felt in the shoulder or left arm, with or without chest pain.

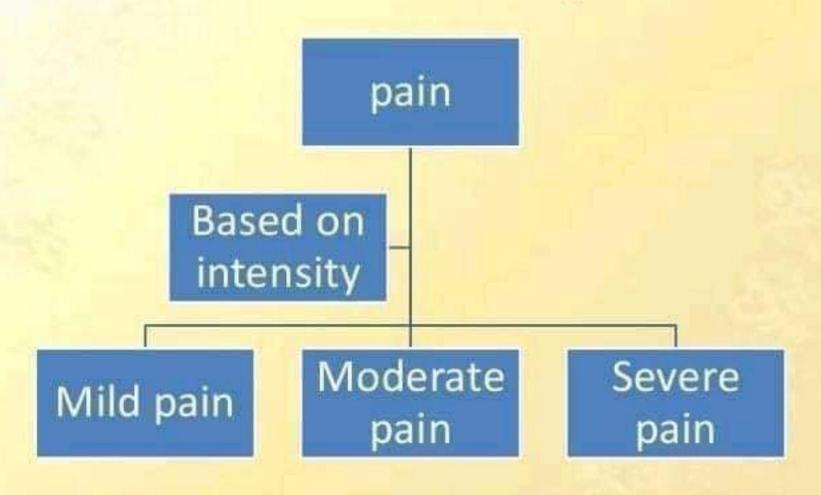


Pain scale

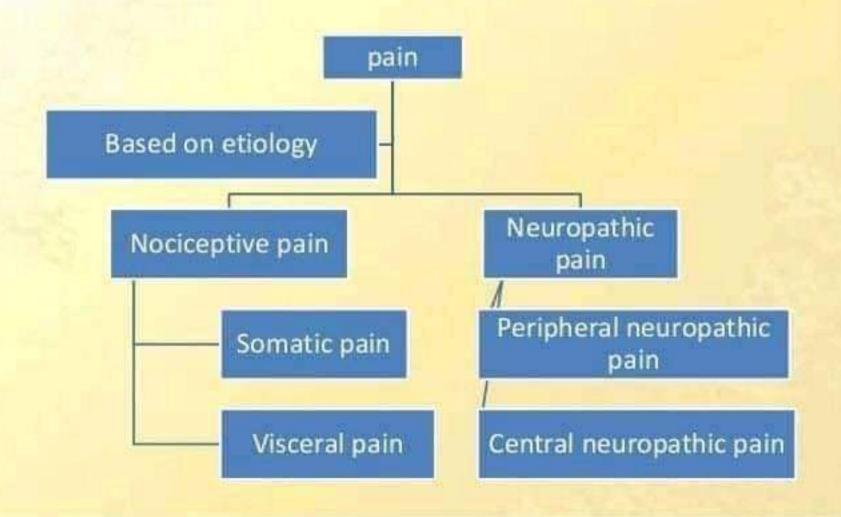
PAIN MEASUREMENT SCALE



Based on intensity:



Classification of pain based on etiology:



Classification of pain based on etiology:

Nociceptive pain:

- Nociceptive pain is experienced when an intact, properly functioning nervous system sends signals that tissues are damaged, requiring attention and proper care.
- For example, the pain experienced following a cut or broken bone alerts the person to avoid further damage until it is properly healed.
- Once stabilized or healed, the pain goes away

Nociceptive Pain

- Somatic pain:
- This is the pain that is originating from the skin, muscles, bone, or connective tissue.
- The sharp sensation of a paper cut or aching of a sprained ankle are common examples of somatic pain

.....Nociceptive Pain

Visceral pain:

- Visceral pain is pain that results from the activation of nociceptors of the thoracic, pelvic, or abdominal viscera (organs).
- Characterized by cramping, throbbing, pressing, or aching qualities.
- Examples: labor pain, angina pectoris, or irritable bowel.

- Neuropathic pain is associated with damaged or malfunctioning nerves due to illness, injury, or undetermined reasons.
- Examples:
- Diabetic peripheral neuropathy
- Phantom limb pain
- Spinal cord injury pain

- It is usually chronic.
- it is described as burning, "electric-shock," and/or tingling, dull, and aching.
- Neuropathic pain tends to be difficult to treat.
- Neuropathic pain is of two types based on which parts of the nervous system is damaged.
- 1. Peripheral Neuropathic Pain
- 2. Central Neuropathic Pain.

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- Peripheral neuropathic pain:
- Due to damage to peripheral nervous system
- Eg: phantom limb pain
- Central neuropathic pain:
- Results from malfunctioning nerves in the central nervous system (CNS).
- Eg: spinal cord injury pain,
- Post-stroke pain.

Factors Influencing Pain

- 1. Developmental factors
- Physiological factors- fatigue, genes, neurological functioning
- Social factors- attention, previous experience, family and social support, spiritual factors.
- 4. Psychological factors- anxiety, coping style.
- 5. Cultural factors

Developmental factors

Age:

- Age influences pain, particularly in infants and older adults.
- Young children have trouble understanding pain and the procedures that cause it.
- If they have not developed full vocabularies, they have difficulty verbally describing and expressing pain to parents or caregivers.

Physiological Factors

1. Fatigue.

- Fatigue heightens the perception of pain and decreases coping abilities.
- If it occurs along with sleeplessness, the perception of pain is even greater.
- Pain is often experienced less after a restful sleep than at the end of a long day.

.....Physiological Factors

2.Genes.

 Research on healthy human subjects suggests that genetic information passed on by parents possibly increases or decreases the person's sensitivity to pain and determines pain threshold or pain tolerance.

.....Physiological Factors

3. Neurological Function.

 Any factor that interrupts or influences normal pain reception or perception (e.g., spinal cord injury) affects the patient's awareness of and response to pain.

Social Factors

1. Attention.

 The degree to which a patient focuses attention on pain influences pain perception. Increased attention is associated with increased pain, whereas distraction is associated with a diminished pain response

.....Social Factors

2.Previous Experience.

- If a person repeatedly experiences the same type of pain that was relieved successfully in the past, the patient finds it easier to interpret the pain sensation.
- If a person is having worst previous experience he may experience much pain.

Social Factors

3. Family and Social Support

- The presence of family or friends can often make the pain experience less stressful.
- The presence of parents is especially important for children experiencing pain.

Social Factors

4. Spiritual Factors.

- Spiritual questions include "Why has this happened to me?" "Why am I suffering?" Spiritual pain goes beyond what we can see. "Why has God done this to me?" "Is this suffering teaching me something?"
- If the person is experiencing like this feelings it makes much painful

Psychological Factors

1. Anxiety:

- Anxiety often increases the perception of pain, and pain causes feelings of anxiety.
- Critically ill or injured patients who perceive a lack of control over their environment and care have high anxiety levels. This anxiety leads to severe pain

,....Psychological Factors

2.Coping Style.

Persons with better coping levels perceives lessa pain than the person with lower coping levels.

Cultural Factors.

- Cultural beliefs and values affect how individuals cope with pain.
- Individuals learn what is expected and accepted by their culture, including how to react to pain.
- Culture affects pain expression. Some cultures believe that it is natural to be demonstrative about pain. Others tend to be more introverted.

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Pain Assessment and Management



Pain Assessment

- P recipitating/Alleviating Factors:
 - What causes the pain? What aggravates it? Has medication or treatment worked in the past?
- Q uality of Pain:
 - Ask the patient to describe the pain using words like "sharp", dull, stabbing, burning"
- R adiation
 - Does pain exist in one location or radiate to other areas?
- S everity
 - Have patient use a descriptive, numeric or visual scale to rate the severity of pain.
- T iming
 - Is the pain constant or intermittent, when did it begin.

.....Pain Assessment

- Assess for objective signs of pain:
- Facial expressions facial grimacing (a facial expression that usually suggests disgust or pain), frowning (facial expression in which the eyebrows are brought together, and the forehead is wrinkled), sad face.
- Vocalizations crying, moaning
- Body movements guarding, resistance to moving

Pain Assessment Tools:

- These are various tools that are designed to assess the level of pain. The most commonly used tools are:
- Verbal Rating Scale
- 2. Numeric Rating Scale
- 3. Wong Baker's Faces Pain Scale

Management Of Pain:

Pain can be managed through:

- 1. Pharmacological interventions
- 2. Non pharmacological interventions

Pharmacological interventions

- Pharmacological therapy is given by using Analgesics.
- The analgesics may be NON OPIOIDS (NSAIDS)
 OR OPIODS OR ADJUVANTS
- NSAIDS: Non steroidal anti inflammatory drugs
- Opioids: Opioids are medications that relieve pain. Derived from opium.

Pharmacological interventions

 Adjuvants: Adjuvants are drugs originally developed to treat conditions other than pain but also have analgesic properties.

Pharmacological Interventions

Nonopioids:

- Used alone or in conjunction with opioids for mild to moderate pain
- Eg; NSAIDS- paracetamol, aspirin.

Opioids:

- -for moderate or severe pain
- -Eg: morphine, codeine

...WHO Pain Management Ladder

Pain scale reading WHO steps

• 1 -3 → STEP1

• 4-6 → STEP2

• 7-10 → STEP3

Pharmacological interventions

WHO Pain Management Ladder



.. Pharmacological Interventions

Adjuvants:

- Used for analgesic reasons and for sedation and reducing anxiety.
- -Eg:
- Tri-cyclic antidepressants
- Anti epileptics
- Cortico steroids

Patient-Controlled Analgesia

- A drug delivery system called patientcontrolled analgesia (PCA) is a safe method for pain management that many patients prefer.
- It is a drug delivery system that allows patients to self-administer opioids (morphine and fentanyl) with minimal risk of overdose.

Patient-Controlled Analgesia

- PCA infusion pumps are portable and computerized and contain a chamber for a syringe or bag that delivers a small, preset dose of opioid.
- To receive a demand dose, the patient pushes a button attached to the PCA device.

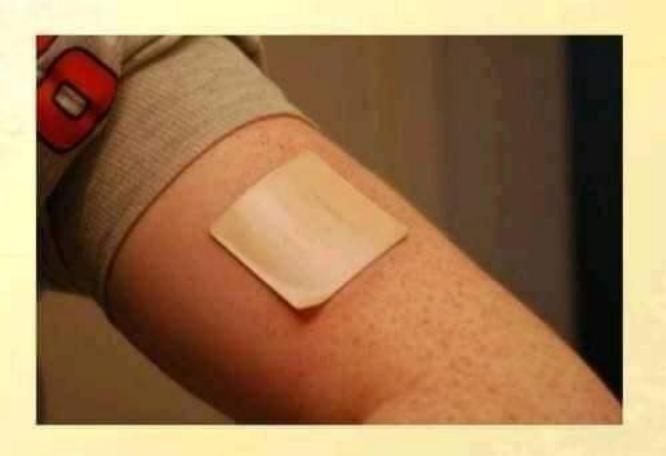
Topical Analgesics

- Topical analgesics are applied over the patients skin either in the form of topical ointments or transdermal patches.
- The patches will be sticking to the skin and delivers a small amount of dosage continuosly.

Patient-Controlled Analgesia



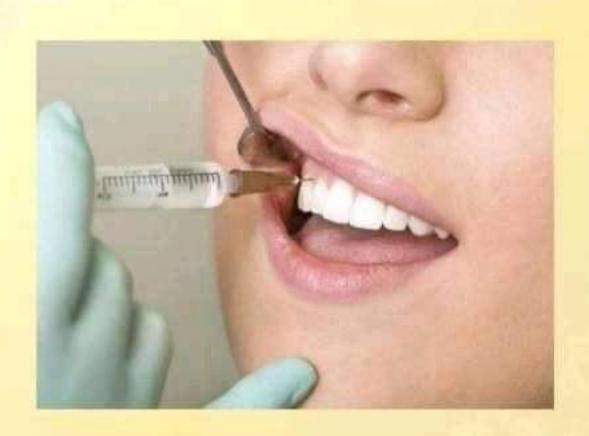
TRANS DERMAL PATCH



Local Anesthesia

- Local anesthesia is the local infiltration of an anesthetic medication to induce loss of sensation to a body part.
- Health care providers often use local anesthesia during brief surgical procedures such as removal of a skin lesion or suturing a wound by applying local anesthetics topically on skin to anesthetize a body part.
- The drugs produce temporary loss of sensation by inhibiting nerve conduction

Local Anesthesia



Regional Anesthesia

- Regional anesthesia is the injection of a local anesthetic to block a group of sensory nerve fibers.
- Examples of regional anesthesia include epidural anesthesia and spinal anesthesia.

Non-Pharmacological Pain Management

- For many individuals, the use of non-pharmacologic methods enhances pain relief.
- These nonpharmacologic strategies are often used in combination with medication

Non-Pharmacological therapies:

The methods are:

- Heat & Cold applications
- 2. Meditation
- 3. Distraction
- 4. Imagery

.. Non-Pharmacological therapies

- 5. TENS application
- Music therapy
- 7. Massage
- 8. Yoga
- 9. Acupuncture
- 10. Herbal therapy- Garlic, Echinacea, Ginseng.