Pain. We’ve all felt it, it’s a part of life and to be honest, it serves a purpose. Pain is nature’s way of keeping us from damaging our bodies or to make us rest until we have healed an injury.

The International Association for the Study of Pain defines pain as “an unpleasant sensory and emotional experience associated with actual or potential tissue damage”.

Chronic or long-term pain is not fully understood by the medical community, meaning treatment and management are often not available or appropriate. Chronic pain is our nation’s third-most costly health problem, yet it’s not considered an official disease or a public health issue.

As many types of chronic pain can’t be seen during an operation or on scans, those affected may find getting a correct diagnosis for their pain challenging. Dr Susan Evans, a gynaecologist, laparoscopic surgeon and pain medicine physician at Pelvic Pain SA, explains this can be a particular problem for women. Pelvic pain is more common in women than men. The pain isn’t visible, may vary with her hormonal cycle and isn’t part of the shared life experience of those around her. “It is easy for her symptoms to be dismissed as psychological, especially when a cause for

Women’s symptoms are unfortunately often considered psychological if a cause cannot be found.
the pain isn’t visible,” says Dr Evans, who specialises in the management of persistent pelvic pain. “With persistent pelvic pain, this can mean unnecessary tests or procedures, and an unacceptable delay in effective treatment.”

**Types of pain**

**Short-term or acute pain** is the type you experience after an injury and usually passes within three months. The pain is often easily managed with painkillers. Some cases of acute pain can progress to chronic pain if not treated properly, but in general this type of pain is well understood and managed.

**Long-term or chronic pain** is much more complicated. It continues long after an injury or trauma has healed and often occurs for no known reason. With chronic pain, the nervous system changes, causing hypersensitivity and rewiring of the pain pathways, so that constant persistent pain may be experienced with no obvious cause.

If you suffer from chronic pain you’re not alone; it’s estimated that this debilitating condition may affect one in five Australians during their lifetime. This includes children and adolescents, most of whom will have to miss out on school and sporting activities, leaving them feeling left out and isolated.

**Why is chronic pain different from acute pain?**

Pain is a complex, subjective experience and can really only be understood by the individual experiencing it. A person’s personality, attitudes and belief can strongly affect their experience of pain, according to Pain Australia.

Chronic pain can continue long after your body has healed itself from trauma or be due to an ongoing condition such as osteoarthritis, endometriosis or cancer. Often there is increased and unexplained nerve activity in the surrounding tissues, with normal actions such as touching the skin causing severe pain. In these cases the nervous system appears to have gone into ‘overdrive’, and the pain tends to get worse with time.

The areas of the brain that process pain are also involved in our emotions, appetite, sleep, anxiety and memory—this is why pain can have a far-reaching effect. This also explains why people seem to experience and cope with pain differently.

In some cases, no actual physical cause can be found for chronic pain, with X-rays, scans and diagnostic tests all coming back normal. This can be incredibly frustrating for the person experiencing the pain, as doubt can be cast on their pain, making them feel as though no one believes them.

Dr Mandy Deeks, psychologist and Deputy CEO of Jean Hailes for Women’s Health says that women who haven’t had a diagnosis for their pain might feel frustrated, helpless and hopeless. “It can be exhausting if you have tried many different treatments or ways to ease the pain and nothing is working,” says Dr Deeks. “Many women have reported to me they are sick of people thinking they are crazy or making it up.”
The costs associated with chronic pain are not just financial; it puts you at much greater risk of suffering a range of other issues such as anxiety, depression and social isolation. Living with chronic pain can play havoc with many aspects of your life, although some people simply appear better able to cope than others.

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**MEDICATIONS**

The first port of call for most people in pain is to get over-the-counter (OTC) or prescribed painkillers (analgesics). There are different types of analgesic available. It’s important to speak to your doctor about what type of pain relief is best for you as many painkillers have side effects.

**Paracetamol**

No one actually knows how paracetamol works but it appears to block the production of chemicals called prostaglandins, which are involved in pain and high temperatures.

**Opioids**

Opioids bind to receptors (opioid receptors) throughout your central nervous system and body, altering your brain chemistry and decreasing how much pain you feel. They tend to only be used for severe pain, due to their addictive nature. Morphine, oxycodone and codeine are commonly prescribed in the short term.

**Non-steroidal anti-inflammatory drugs (NSAIDS)**

NSAIDS such as aspirin and ibuprofen reduce inflammation, temperature and pain. They block the production of prostaglandins, which trigger many of the changes in your tissues when you injure yourself.

**Antidepressants and antiepileptic drugs**

These may be prescribed for some types of neuropathic pain, such as shingles or damage caused by chemotherapy.
Non-drug management of pain
Most people find that using a combination of methods helps them to cope with their pain. Reducing the fear and anxiety associated with your pain, and learning to accept it, has been shown to help reduce symptoms.

• Transcutaneous electrical nerve stimulation (TENS) – a low-voltage current is sent through points on the skin to scramble the pain signals and encourage your body to produce natural pain-relief chemicals
• Physical therapies – stretching, walking, or any activity that improves your mood will help with pain. When you exercise, your body releases feel-good hormones that help quell pain sensations
• Cognitive behavioural therapy (CBT) – this therapy can teach you to change how you think and feel about your pain. It is easily learnt at home and can be a highly useful tool in coping with chronic pain
• Meditation or finding meaningful pastimes you enjoy can take your mind off the pain and reduce anxiety
• Gentle relaxing activities such as yoga can help take the focus off your pain
• Massage can help reduce pain caused by soft tissue injuries (avoid for joint pain)
• Hot/cold packs can relieve localised muscle pain

“When you’re in constant pain, it may seem best to stay at home on the couch, or give up work. However, reducing activity makes pain worse,” says Dr Evans. “You need to give your brain something to think about that isn’t pain. Keeping busy with high-motivational activities that you really enjoy improves your quality of life and reduces pain,” she says. “Daily gentle exercise is the best non-drug treatment for pain.”

Dr Deeks encourages women to seek out the right support. “It’s important to find health professionals who are understanding and caring, who listen to what you’re experiencing rather than dismissing you.”

3 THINGS TO KNOW
1. Long-term or chronic pain can sometimes be difficult to diagnose
2. It’s important to find a health professional who takes your concerns and questions seriously
3. In addition to pain medication, there are many things you can do to reduce pain