



Chronic Pain and Women's Health Newsletter

PAIN 101

(Part 1)



Why do some people seem to get over an injury quickly while others have chronic symptoms that last for years without going away? Why do some people have debilitating pain after a small injury? Why are chronic pain conditions such as fibromyalgia so debilitating? Why do some treatments work while others don't? What are the best treat-

ments available for pain?

The next few newsletters will contain a multi-part article discussing pain, the differences in types of pain, and some of the best treatment options available.

First let's start with an explanation of the different types of pain. **Acute pain** is short-term pain that may be intense but only lasts for a short period of a few days or weeks. This type of pain is the body's natural protective response to prevent further injury. It is usually fairly localized. **Chronic pain** is pain that lasts for 6 months or longer than the normal course of time associated with a particular injury. It serves no particular protective function as it is pain that has per-

sisted beyond the healing stage of an injury. It can be severe and either constant or intermittent.

Pain also can come from different structures in the body. **Cutaneous pain** is caused by an injury to the skin. An example of this is a paper cut or sunburn. This type of pain is localized to the skin. **Somatic pain** comes from damage to the ligaments, tendons, and bones. This is a poorly localized type of pain that is longer lasting. Examples are muscle sprains and broken bones. **Visceral pain** originates from the body's organs and produces pain that is difficult to localize. **Neuropathic pain** is pain from injury to the nerve tissue itself. This disrupts the transmission of the sensory

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Clemens Physical Therapy PLLC

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BLADDER PAIN

(Interstitial Cystitis— IC)

Nine million people in the United States are diagnosed with interstitial cystitis or severe bladder pain every year, 90 % of whom are women. Interstitial cystitis or IC is characterized by symptoms of pelvic pain and the frequent and urgent need to urinate. IC

sufferers often have to go to the bathroom over once an hour due to bladder pain and irritation. They also have their sleep severely disrupted by the need to go several times a night.

There are several potential triggers for IC which in-

clude allergens, bacteria, autoimmune inflammation, nerve inflammation and bladder infections. The bladder is one of the pelvic organs with the most nerves. Once the trigger sets off the inflammatory pain cycle in the bladder,

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Coming Soon!

- © Pain 101 continued
- © When Pain Goes Wrong
- © How to Help Pain
- © Non-drug Treatment of Pain
- © TMJ—Jaw Pain
- © More of Your Questions Answered

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Interstitial Cystitis Cont:

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normally silent nerves transmit a more intense pain signal to the brain. The pain then causes muscles in the pelvic floor to spasm leading to pelvic pain, bladder irritation, and painful intercourse.

Unfortunately IC is a diagnosis of exclusion. This means that all other potential causes of symptoms have to be ruled out before considering IC. This condition is often misdiagnosed or diagnosis is delayed 5-7 years on average and patients may see up to 5 physicians before being diagnosed.

If you think you may have IC it is important to get diagnosed and start treatment as soon as you can before the pain cycle becomes more difficult to treat. See your physician to rule out other medical conditions. If you are diagnosed with IC your physi-



**Gotta Go Right Now?
You may have an irritable bladder.**

cian can start you on the appropriate medication. It is important then to see a physical therapist specializing in the treatment of the pelvic floor for stretching of tight muscles and integrating exercises to stop the pain cycle as soon as possible. You can also be taught relaxation techniques specific to the bladder to calm its irritability.

Future issues of this newsletter will go into more detail regarding some of the treatments available for pain.

Tips and Tricks: For an Irritable Bladder

The bladder is very sensitive to irritants. Drink lots of water to dilute your urine and avoid the following things which may irritate the bladder.

*Smoking

*Acidic fruit such as oranges

*Cured and smoked meats such as bacon

*Foods with preservatives

*Spicy foods

*Caffeinated beverages

*Alcoholic beverages

*Yogurt, sour cream, and some cheeses

Try retraining your bladder to go longer in between bathroom trips.

Learn pelvic floor exercises to strengthen the muscles and improve their function.

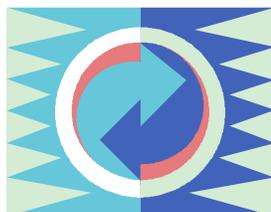
Learn relaxation techniques to quiet the overactive nerve signals to the bladder

Get the tight muscles of the pelvic floor treated.

Research: Breaking the Pain Cycle

Research is showing more and more that the best approach uses multiple treatments aimed at collectively breaking the vicious pain cycle. This includes using medications, injections, proper exercise, and reducing pain by tapping into your body's own pain controls by using breathing or biofeedback techniques. When used together these pain treatments have a much greater effect. Medications and injections can help reduce the chemical pain response, exercise and the mind-body techniques can en-

hance the effects of the medications with the body's own pain killers so that you need less medication and it is more effective.



Scientists Stopping Pain

Sean Mackey, MD and scientists at Stanford University were able to show a 40 % improvement in pain control by

teaching people to visualize and control it.

Dr Kevin Tracey has done multiple studies which show a hard-wired connection between the immune system and the brain. He has shown that the brain appears to have a reflex that controls inflammation. If people can learn relaxation techniques, they can enhance this reflex to control pain and inflammation.

These types of studies give us insight in to new ways to control the pain cycle.

Pain 101 Cont:

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nerves to the brain. Because of this, the brain may interpret normal signals coming from the skin, muscles, or organs as painful, even when there is no injury to these areas. People with this type of pain may experience pain from even the lightest touch of their clothing because the nerve is damaged and the brain “sees” this input as painful. This pain may be experienced as sharp, stabbing, burning, cold, tingling, numbness or weakness.

Referred pain is felt in a distant body part that seems unrelated to the original area of injury. This is due to the way the nervous system is wired. This is why heart attacks often cause “referred” pain in the shoulder and arm. The nerves to the organs also stimulate the areas of the

spinal cord that are stimulated by the skin and muscles. This causes the brain to interpret pain signals coming from the organs as muscle or skin pain. Someone with a kidney infection may feel they have pulled the muscles in their back due to the brain confusing the pain signal input.

There are two types of pain nerves. **Fast pain** nerves send sharp, localized pain signals. **Slow pain** nerves send a

slower pain signal that is more of an aching, throbbing pain. For example, if you touch a hot stove, the fast pain nerves first send the sharp, localized pain signal to the brain to get you to stop touching the stove. Then later the aching, throbbing pain from the slower pain signals reach the brain and last for a while.



In PAIN 101 Part 2 in the next newsletter, we will look at the difference between a normal and an abnormal pain response.

Pain may be referred from another area of the body

Frequently Asked Questions

Q: Should I use heat or ice after an injury?

A: It depends. As a general rule you should always use ice for the first 48-72 hours after the initial injury. The body produces inflammation in response to the damage and the ice helps control the pain and swelling. You can also Rest, Compress, and Elevate the injured part. (These actions combined with Ice constitute the well known RICE principle).

After the first couple of days you can then use either ice or heat. Continue to use ice if there is any inflammation or swelling. Heat works best to relax muscles and increases blood flow to help heal the damaged area. Make sure you don't use either for much more than 20 minutes at a time and protect your skin due to the risk of burns or frostbite.

**Heat or Ice
for an
Injury?**

Q: I have pain in my arm/leg, why are you working on my neck/back?

A: When you have pain in the arm or leg, you may have an injury to that area. It is also common to have “referred” pain from the spine or even from an internal organ (see front page article in this newsletter for more info).

During an evaluation of your problem, you will be asked questions and tests will be performed to help determine

the cause of your problem.

When pain is coming from the spine for example, pain may be reproduced in the spine and in the referral area of the arms or legs. For certain areas of the spine this pain may be felt quite a ways from the actual problem. Lower spine problems can be felt in the feet, upper spine problems can be felt in the hands. Other common referral sites include the knee for hip problems and the upper arm for shoulder rotator cuff problems.

Back pain can be especially confusing. You may have actual back problems or you may have problems with organs that refer to the back such as the kidneys.

It is especially important to determine if your pain is coming from an organ as further testing may need to be done and treatment for musculoskeletal problems will not help. Your healthcare professional can help determine not only where the problem is but the best course of treatment to help your problem.



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Helping People Who Hurt



Chronic Pain and Women's Health Newsletter

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The content of this newsletter is provided for informational purposes only and is not intended to diagnose or suggest treatment for individuals. Please see your health care provider regarding your specific needs.

Fibromyalgia
Chronic Pain
Headaches
Bladder Control
Pelvic Pain
TMJ (Jaw Pain)
Osteoporosis
Biofeedback
Tai Chi, Pilates, Yoga
Manual Therapy