September 2016- National Pain Awareness Month

A note from the author---
Hello readers! This month, I chose to feature a very common and important subject to discuss: PAIN. At some point in our lives, we all experience pain. For some, it may be after a surgery, after an injury, or while we are sick. For others, pain is a daily occurrence that interferes with quality of life. No matter what your aches and pains may be, or how severe, this article may help you.

What is National Pain Awareness Month?
The month of September has been dedicated to bringing national awareness to pain and pain management. The first Pain Awareness Month was in 2001, when the ACPA (American Chronic Pain Association) led a coalition of groups to establish September as Pain Awareness Month. ACPA established Partners for Understanding Pain and 80 organizations, both health care professionals and consumer groups, including the NAACP supported the effort.

The Hard Facts About Chronic Pain
The truth of the matter is this: pain is not normal. Our bodies have pain receptors that, just like the alarms and monitors in your car, go off to alert us that something is wrong. Pain lets us know that we need to pay attention to that area of our body because something is happening that is hurting us. Here are some important facts from the physicians at Johns Hopkins Medical Center:
Nearly 100 million Americans experience chronic pain — more than those who have diabetes, heart disease and cancer combined.

Pain is a warning sign that indicates a problem that needs attention.

Pain starts in receptor nerve cells located beneath the skin and in organs throughout the body.

Living with pain can be debilitating and adversely affect everyday life.

According to the U.S. Bureau of Labor Statistics, chronic pain is the nation’s primary cause of lost workdays.

Why is it Important to Acknowledge Pain?
Under-treatment of pain is a significant public health issue with far-reaching impact. With over 100 million people in the U.S. affected by chronic pain, it is no surprise that the societal burden of chronic pain is simply staggering. The Institute of Medicine in 2012 reported that the economic burden of pain exceeds $500 billion per year in the U.S., including health care utilization costs and lost workforce productivity.
Aside from the economic impact, undertreated chronic pain significantly impairs quality of life, and can be severely physically, psychologically, and socially debilitating. The results of the 2010 Massachusetts Pain Initiative survey of adults with chronic pain did a good job quantifying the impact of pain on quality of life: 79% of respondents reported having sleep difficulties due to their pain, 68% said that pain reduced their ability to do everyday things, and 73% said that pain interfered with their ability to work.

Healthcare’s Increasing Focus on Pain

The adoption of pain as the "fifth vital sign" in 2001 has helped increase the legitimacy of pain as not just a symptom but a serious detriment to quality of life, requiring proper medical attention. It also helped further the notion that every person has a right to timely and effective pain management. However, despite increased attention on pain management, major barriers still persist that prevent people with chronic pain from receiving effective pain management. Some of these barriers include, but are not limited to:
- Limited training of health care providers about chronic pain and its management
- Prescriber fear of regulatory scrutiny
- Misconceptions about addiction and abuse of pain medications
- Various institutional barriers, contributing to a dearth of dedicated pain management teams
- Regulatory restrictions on prescribing controlled substances

A major aim of Pain Awareness Month is to foster partnerships among individuals and organizations, with a common goal of effecting positive change in the state of pain management. By promoting education, awareness and advocacy, the goal is to recognize and address these barriers to pain management - barriers that leave millions of people suffering needlessly.

**What is Chronic Pain?**
While acute pain is a normal sensation triggered in the nervous system to alert you to possible injury and the need to take care of yourself, chronic pain is different. Chronic pain persists. Pain signals keep firing in the nervous system for weeks, months, even years. There may have been an initial mishap -- sprained back, serious infection, or there may be an ongoing cause of pain -- arthritis, cancer, ear infection, but some people suffer chronic pain in the absence of any past injury or evidence of body damage. Many chronic pain conditions affect older adults.

![Image of back pain](image-url)

Common chronic pain complaints include headache, low back pain, cancer pain, arthritis pain, neurogenic pain (pain resulting from damage to the peripheral nerves or to the central nervous system itself), psychogenic pain (pain not due to past disease or injury or any visible sign of damage inside or outside the nervous system). A person may have two or more co-existing chronic pain conditions. Such conditions can include chronic fatigue syndrome, endometriosis, fibromyalgia, inflammatory bowel disease, interstitial cystitis, temporomandibular joint (aka TMJ) dysfunction, and vulvodynia. It is not known whether these disorders share a common cause.
Do you Suffer from Chronic Pain?
Pain is a costly epidemic that causes millions of Americans to suffer and Pain Awareness Month initiatives are intended to get citizens to recognize the effects of pain and the symptoms associated with pain so that individuals can find appropriate relief and regain a strong quality of life.

It is estimated that 80 percent of Americans will suffer from back pain at some point in their lives. According to pain experts, the most common type of pain is lower back pain, followed by severe headaches or migraines.

We can take our health for granted - but for people living with pain there is nothing they desire more than to have that pain lessened and feel okay.
**Common Offender #1: Arthritis**
Arthritis refers to over 100 different conditions ranging from autoimmune disease to normal joint inflammation.

- Recent experiments have uncovered that the body’s own immune system makes unique antibodies to help the most severe cases of rheumatoid arthritis progress.
- Unfortunately, there is no cure for arthritis -- treatment plans often involve both short-term and long-term approaches.
- An estimated 294,000 children are affected by juvenile rheumatoid arthritis (JRA) and other rheumatological conditions.

**Common Offender #2: Back Pain**
According to the National Institutes of Health, eight out of ten people will have back pain at some time in their life.

- Bad posture and bad habits, even a simple cough or sneeze, can throw more than your back out of whack.
- Over the years, the treatments for back pain changed.

**Common Offender #3: Headaches**
Millions of people get crippling headaches, and there are dozens of different headache types -- but receiving the right diagnosis is key to getting the right treatment.

- Migraines can be triggered by stress, fatigue, or certain foods -- and researchers claim obese patients are five times more likely to develop chronic migraines.
A child's headache may be triggered by several factors, including: genetics, hormones, stress, diet, medication, dehydration, school or behavioral issues, and/or depression.

**Why is it Important to Go to the Doctor About your Pain?**

Pain is not normal: end of story. The first step in pain treatment is acknowledging that you are experiencing pain. A lot of people brush off pain as, “something that is normal” or “it will just go away”. The truth of the matter is this: you do not have to live with debilitating pain. There are many advances in modern technology that go beyond the basic, “take this pain pill” antiquated treatment. From anti-inflammatory drugs (i.e. Ibuprofen), to oral medications that help calm your nerve endings (i.e. Neurontin), and even topical analgesic patches and crèmes (i.e. lidocaine patches, icy hot crème), there are alternative treatments to narcotics and opiates that can cause dependency, which is a common reason for people not seeking treatment for their pain.

![Image](https://via.placeholder.com/150)

You think my pain is **FAKE**?

Do you really think I enjoy:
1) countless painful procedures
2) medication side effects
3) losing friends
4) unable to do the things I love
5) losing my career I loved
6) not being able to play with my children
7) being judged ????

**THINK AGAIN!!!**

www.facebook.com/survivingchronicpain

Also, besides medications, there are complementary therapies that can also help ease chronic pain, such as acupuncture, chiropractic care, STIM (usually given by physical therapists or chiropractors that use electrical stimulation to calm down nerve endings), and even massage therapy.

Many people with chronic pain can be helped if they understand all the causes of pain and the many and varied steps that can be taken to undo what chronic pain has done.
Scientists believe that advances in neuroscience will lead to more and better treatments for chronic pain in the years to come.

What is the Treatment for Chronic Pain?
Treating your pain is very individual: it depends on where your pain is, why you are in pain, and how you experience the sensation of pain. If your pain stems from a physical condition with a treatable cause (i.e. gallstones, torn ligament, dislocated joint, slipped or herniated disc), sometimes surgery or other medical treatments (i.e. injections) can help. If your pain is from a more degenerative or chronic condition (i.e. arthritis, colitis, diverticulitis, adhesions), treatments will be more focused on getting you comfortable and controlling your pain so that daily living is not impacted so severely (i.e. medications, local electrical stimulation, physical therapy).

According to the National Institute of Health, medications, acupuncture, local electrical stimulation, and brain stimulation, as well as surgery, are some treatments for chronic pain. Some physicians use placebos, which in some cases has resulted in a lessening
or elimination of pain. Psychotherapy, relaxation and medication therapies, biofeedback, and behavior modification may also be employed to treat chronic pain.

Many conditions, diseases, and external forces cause chronic pain

Innovations in Pain Treatment
There are many different methods and techniques for treating pain, both chronic and acute. Some of the newer treatments and advances in pain relief include:

- **Botox For Pain Relief** -- For patients who have a painful and debilitating nerve compression disorder called thoracic outlet syndrome, Botox may offer temporary relief and an alternative to rib-removal surgery. A small research study has shown promising results.

- **Attitude Adjustment** -- If you have chronic pain, especially face and jaw pain, you may sleep better and experience less day-to-day pain if you learn to dwell less on your ailments. Researchers studied 214 people and found a correlation between negative thinking about pain and poor sleep and worse pain.
Newly Discovered Protein May Turn Pain Off -- Researchers have discovered a protein that holds together multiple elements in a complex system responsible for regulating pain, mental illnesses, and other complex neurological problems. In other words: this protein has the capability to turn off the receptors that keep pain lingering.

Burning Away Intractable Pain -- When a 31-year-old Marine was defusing a buried bomb in Afghanistan last December, it exploded, leaving him unconscious for nearly a month. When he woke up, his face was scarred, he was blind in one eye, he was missing half of his right arm and his left arm was paralyzed. And he was in pain. Neurosurgeons opened the patient's spine and burned away the scar tissue to alleviate this pain.

Find a Pain Specialist
You don’t have to live through your pain alone. Pain is such a “hot topic” in medicine these days, that there is an increasing amount of pain centers, programs, and clinics popping up where you can find teams of specialists who aim to ease your pain, and allow you to live in as much comfort as possible.
Pain Specialists in Delaware
To help with pain management, I have included a list below of some doctors specializing in pain, located here in Delaware. Clicking on their name SHOULD bring up a link to their information as well.

**DISCLAIMER** I do not have any affiliation with any of the doctors listed below. I have simply conducted a Google search to help people in the NCP community more easily connect with some pain specialists in the area.

**Bakst, Barry L., DO**
87 Omega Drive, Newark, DE
302-733-0980
Category: Doctors Subcategory: Pain Management, Physical Medicine - Rehabilitation

**Chiang, Ginger, MD**
2006 Foulk Road, Wilmington, DE 19810
302-529-8783
Category: Doctors Subcategory: Pain Management, Physical Medicine - Rehabilitation

**Cucuzzella, Tony R., MD**
4735 Ogletown-Stanton Road, Newark, DE 19713
302-623-4144
Category: Doctors Subcategory: Pain Management, Physical Medicine - Rehabilitation

**Delport, Elva, MD**
4735 Ogletown-Stanton Road, Newark, DE 19713
302-623-4144
Category: Doctors Subcategory: Pain Management, Physical Medicine - Rehabilitation

**DeVotta, Emmanuel, MD**
4512 Kirkwood Hwy., Wilmington, DE 19808
302-998-2585
Category: Doctors Subcategory: Anesthesiology, Pain Management
Downing, James, MD
3411 Silverside Road, Wilmington, DE 19810
302-478-7001
Category: Doctors, Subcategory: Anesthesiology, Pain Management

Falco, Frank J.E., MD
100 Biddle Ave., No. 101, Newark, DE 19702,
302-392-6501
Category: Doctors, Subcategory: Pain Management, Physical Medicine - Rehabilitation, Sports Medicine

Gillis, Theresa, MD
4701 Ogletown-Stanton Road, Suite 1205, Newark, DE 19713
302-623-4510
Category: Doctors, Subcategory: Pain Management, Physical Medicine - Rehabilitation

Grossinger, Bruce, DO
4100 Dawnbrooke Drive, Wilmington, DE 19804
302-636-0920
Category: Doctors, Subcategory: Neurology, Pain Management

Grossinger, Steven, DO
4100 Dawnbrooke Drive, Wilmington, DE 19804
302-636-0920
Category: Doctors, Subcategory: Internal Medicine, Neurology, Pain Management

Kapur, Neeraj, MD
701 N. Clayton St., Wilmington, DE
302-421-4330
Category: Doctors, Subcategory: Pain Management

Kim, Ann MD
4745 Ogletown-Stanton Road, S225, Newark, DE 19713
302-731-2888
Category: Doctors, Subcategory: Pain Management, Physical Medicine - Rehabilitation

King, Conrad, MD
1400 Peoples Plaza, Newark, DE 19702
302-838-5600
Category: Doctors, Subcategory: Pain Management

Onyewu, Obi C., MD
100 Biddle Ave., No 101, Newark, DE
302-392-6501
Category: Doctors, Subcategory: Pain Management
Living with Pain
The goal of pain management is to increase function, improve quality of life and reduce one’s sense of suffering. However, it is very easy for people with chronic pain to feel hopeless, exhausted, mental depleted, and depressed. Therefore, in addition to the treatments discussed above, adjunctive therapies may help some people to cope with pain rather than feeling like they should just, “give up”.

The American Chronic Pain Association uses relaxation techniques as one of the necessary coping skills for dealing with pain. But when you are in a great deal of pain, it is difficult to relax. Relaxation, in part, is redirecting your thoughts off of your pain and on to something else that you enjoy. But, redirecting your thoughts can be difficult.
To help you, take a moment, and to yourself say your alphabet and at exactly the same time count from one to 25. Give it a try; you might be surprised at the results. You see, you cannot do it. Why, because we have a one track mind. While we are thinking A, B, C, we cannot be thinking 1, 2, 3. So, during the time that you are trying very hard to accomplish this task you were not focused on your pain thus you reduced your sense of suffering, one of the goals of pain management. With practice you can redirect your thoughts off of your pain and on to other things.

Listening to music, focusing on a project, or simply “zoning out” while watching television has been mentioned to help a lot of chronic pain patients. The key is: finding things you enjoy doing, that aren’t inhibited by your pain. For example, choosing to do something like hiking up a mountain may be a bad idea for someone suffering from tremendous lower back/knee pain. Instead, if you have a pain flare up and still enjoy walking, choose something a little more reasonable: try walking in the park or through a flat wooded area. That way, you are still doing something you enjoy, but instead of feeling defeated that you can’t get up that steep incline, you feel like your pain is not holding you back from doing the things you enjoy.
Bringing Awareness to Chronic Pain
It is important for all of us to help get the word out -- people with pain-causing conditions can take measures to reduce their pain! Individuals and organizations supporting the National Pain Awareness Month initiative may participate in the #Go Yellow online campaign, encouraging the public to raise awareness during September.

What Research is Being Done in the Field of Pain?
Clinical investigators have tested chronic pain patients and found that they often have lower-than-normal levels of endorphins in their spinal fluid. Investigations of acupuncture include wiring the needles to stimulate nerve endings electrically (electroacupuncture), which some researchers believe activates endorphin systems. Other experiments with acupuncture have shown that there are higher levels of endorphins in cerebrospinal fluid following acupuncture. Investigators are studying the effect of stress on the experience of chronic pain. Chemists are synthesizing new analgesics and discovering painkilling virtues in drugs not normally prescribed for pain.

Resources:
https://theacpa.org/September-is-Pain-Awareness-Month
https://www.painedu.org/articles_timely.asp?ArticleNumber=37
http://www.painphysicians.com/blog/september-is-national-pain-awareness-month
http://www.ninds.nih.gov/about_ninds/message/message-2016-PAM.htm