

What is Chronic Pain?

Fact Sheet

WHAT IS CHRONIC PAIN?

In 1931, the French medical missionary, Dr. Albert Schweitzer wrote, "Pain is a more terrible lord of mankind than even death itself." Today, pain has become a serious and costly public health issue, and it remains largely under-treated and misunderstood. According to the National Institutes of Health, 90 million people in the U.S. suffer from chronic pain. The American Pain Foundation estimates that chronic pain is the cause of \$100 billion a year in lost work time and health care.

The scope of individuals enduring some type of pain even eclipses cardiovascular disease, the nation's number one killer of adults. By comparison, the American Heart Association reports that 71 million Americans suffer from cardiovascular disease.

The National Pain Foundation (www.nationalpainfoundation.org), a health advocacy group for pain sufferers, notes that one in four people in the United States suffers from chronic pain and more than 40 million physician visits every year are related to pain. Yet, when individuals complain about pain, they are often given inadequate treatment or, out of strong fear of medications or aggressive therapies, they simply give up and decide to live with their pain.

TYPES OF CHRONIC PAIN

When pain lasts for a long time, it is considered to be chronic pain. Many physicians consider pain to be chronic when it has lasted for six months or longer. Others say that pain is chronic when it lasts one month longer than would generally be expected considering the injury, surgery, or disease that is causing it.

To understand chronic pain, it can be helpful to categorize pain in general. Basically, there are two types of pain: nociceptive and neuropathic.

NOCICEPTIVE PAIN

Nociceptive pain is caused when special nerve endings—called nociceptors—are activated. This type of pain results from an injury to the body (such as a cut or burn), surgery, or a disease that is not a part of the nervous system (like arthritis or cancer). Pain from the activation of nociceptors depends on the parts of the body involved. It can be felt as a localized sharp, aching, or throbbing pain that is constant, or it can be a generalized deep, aching pain that comes and goes.

NEUROPATHIC PAIN

Neuropathic pain is caused by a malfunction of the nervous system due to injury, disease, or trauma. It can be sharp, intense, and constant, usually felt as a burning, shooting, or tingling pain; it can also be sporadic and felt as a dull, aching, and throbbing pain (for example, the chronic pain that people experience in their lower backs, upper backs, and legs is usually of this type). Neuropathic pain is divided into two categories: simple and complex. Simple neuropathic pain usually involves a single extremity such as an arm or leg, while complex neuropathic pain usually involves multiple extremities and has the possibility of spreading.

Because chronic pain can arise spontaneously without a known cause and can vary widely in intensity, location, and response to therapy, treating it successfully can be a major challenge. Not treating it or under-treating it, however, can be devastating.

St. Jude Medical, Inc.
Global Headquarters
One Lillehei Plaza
St. Paul, MN 55117

sjm.com

Media Contacts

Denise Landry
Tel: 972-309-8000
dlandry@sjm.com

Guy Davis
Tel: 972-309-8000
gdavis@sjm.com

TREATMENT APPROACHES

Chronic pain has been under-treated in part because the traditional practice of medicine was to focus on an underlying disease and not its symptoms. However, as pain came to be considered by many to be, itself, the disorder, a newer branch of medicine has evolved that deals specifically with pain management. Now, many physicians and clinicians realize just how important it is to treat pain in order to fully meet their patients' desire to live fuller, more active lives. And, on their part, patients are becoming more involved in their treatment and are requesting pain relief therapies from their doctors.

Pain is a reaction to signals transmitted from a pain source that travel through the nerves in the spinal cord to the brain. This means that pain can be controlled by interrupting or modulating the pain signals before they reach the brain.

Most individuals who develop a chronic pain condition try several types of therapies in their search for relief. Typically, they begin with conservative measures such as exercise, over-the-counter medications, rehabilitative therapy, transcutaneous electrical stimulation, and cognitive and behavioral modification.

When these treatments fail to work, physicians may prescribe more aggressive pain therapies such as nerve blocks, which use a chemical blocking agent, or neurolysis, which physically destroys nerve tissues. Prescription pain medications (systemic opioids) are frequently introduced at this stage; however, negative side effects, including dependency, can result.

When chronic pain conditions resist these therapies, patients may require more advanced treatment options. Surgery, implantable drug pumps, or neuroablation (a permanent surgical technique that blocks pain by destroying nerves and tissues at the source of the pain) may be recommended to combat chronic pain. Neurostimulation is an advanced alternative that pain practitioners also may offer their patients. This therapy includes spinal cord stimulation (SCS) systems that interrupt the pain signals on their way to the brain.

PATIENT RESOURCES

Patients should always be encouraged to talk with their physicians or seek out pain management practitioners if they believe they are suffering from chronic pain. Information on how to locate a physician who treats pain can be found at www.PowerOverYourPain.com.

SOURCES FOR STATISTICS AND INFORMATION:

- www.PowerOverYourPain.com
- www.NationalPainFoundation.org

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