Acute Pain Treatment

Pain is an unpleasant sensory and emotional experience usually arising from actual or potential tissue damage. Acute pain can be a difficult medical problem to diagnose and treat. It may be caused by many events or circumstances. Symptoms can last hours, days, or weeks and are commonly associated with tissue injury, inflammation, a surgical procedure, childbirth, or a brief disease process. Other types of pain may be classified as chronic (pain of long duration), neuropathic (pain resulting from damage to nerves), psychogenic (pain not due to visible signs of disease or injury), or cancer-related (effects of a malignant disease on the body). The January 2, 2008, issue of JAMA includes an article that identifies trends in the prescription of medicines to treat acute pain in US emergency departments.

DIAGNOSING THE CAUSE OF PAIN

Your doctor will ask you about your symptoms and the history of your illness, injury, or surgery. You may be asked to fill out a questionnaire to assess the intensity and location of your pain. The Wong-Baker FACES Pain Rating Scale (below) may help young patients rate pain intensity.

Ongoing depression, anxiety, and substance abuse need to be identified. Additional diagnostic tests may include:

- Blood tests
- Imaging studies (x-ray, CT, MRI, nuclear scans, ultrasound)
- Dye-injection studies such as a diskogram to identify painful disks in the spine or myelogram to identify areas of spinal nerve compression
- Electromyography and nerve conduction studies to identify nerve abnormalities

TREATMENT OF PAIN

Diagnosing and treating the cause of pain is an essential aspect of treatment. Initial treatment may include some of the following:

- Resting the affected part of the body
- Application of heat or ice
- Nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen, or naproxen; or acetaminophen
- Physical therapy
- Exercise
- Bioelectric therapy (using local electrical stimulation to moderate pain)
- Stress reduction
- Opioid (narcotic) medications (such as codeine or morphine)
- Muscle relaxant medications

A secondary tier of treatments may include:

- Antidepressant medications
- Anticonvulsants
- Nerve blocks (use of local anesthetics to block nerve activity)
- Trigger point injections to treat muscle spasms
- Steroid injections to reduce tissue inflammation
- Acupuncture

FOR MORE INFORMATION

- American Pain Foundation
  [www.painfoundation.org](http://www.painfoundation.org)
- American Board of Pain Medicine
  [www.abpm.org](http://www.abpm.org)
- American Society of Anesthesiologists
  [www.asahq.org](http://www.asahq.org)

INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page link on JAMA’s Web site at [www.jama.com](http://www.jama.com). Many are available in English and Spanish. A previous Patient Page on acute abdominal pain was published in the October 11, 2006, issue; one on opioid abuse was published in the September 15, 2004, issue; and one on pain management in the November 12, 2003, issue.


Sources: American Pain Foundation, American Board of Pain Medicine, American Society of Anesthesiologists

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