Combining Technology with Tradition to Effect Superior Pain Management Strategies

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INTRODUCTION

“Pain is a very good servant but a bad master.”
- Author unknown

Everybody knows what pain is, but no one really knows how to switch it off, especially when it becomes persistent and annoying.

Pain is not just from physical disorders but also from combinations of physiological, pathological, emotional, psychological, cognitive, environmental, and social factors. The keys to successful pain control are the mechanisms that initiate and maintain pain. ... Now, the public and health professionals expect to control pain by using preventive and active strategies, including drugs and physical and psychosocial interventions. (Holdcroft & Power, 2003)

Have we lost sight of the real pathophysiology that underlies the phenomenon of pain? Are we concentrating on the end point rather than the cause of the malady? Drugs and physical therapies don’t have all the answers to pain management. Is there another way? Maybe we should take a broader look at why the pain started in the first place, and then we can work out the solution to the health challenge.

BACKGROUND

Pain arises when a living tissue is injured, and the tissue responds with inflammation. Inflammation involves a cascade of events involving cells, enzymes, cytokines, chemokines, and other substances, which will initiate other secondary responses by other cells and blood vessels. Inflammation is the beginning of the process of repair and healing. Ancient civilizations used various modalities to manage pain. They used physical therapies, medicinal foods, and herbs where appropriate.

Over the past century, pain and its management have changed dramatically. In this chapter, I propose to discuss the reasons for the change in pain experience and will explore the practical aspects of pain management using the best from the East and West. While scientists are dwelling deeply on the complex issues of pain and inflammation, patients in pain need help and advice now. Drugs alone cannot relieve all pain and suffering; surgical and psychological treatment may help some, but for most, a holistic approach may help to reduce or relieve the pain and suffering.

MAIN FOCUS OF THE CHAPTER

“We are what we eat.”

If we supply our body with inappropriate or inferior quality materials, the tissues and structures so made will be of inferior quality. Deficiency diseases like scurvy and rickets have been known to cause deformed tissues and cause pain with different characters. By correcting the deficiencies, these maladies can be cured. In our modern society, it seems that more people are experiencing and suffering from pain. Is it because the newer generations are made of “weaker” materials, or is it that the pain threshold is reduced or the background inflammation in the body system has heightened? The fact that we have not been able to quantify and identify the missing ingredients in chronic pain should not deter us from searching for an answer by going “back to basics.” Our body is created to function efficiently and effectively when it is provided with all the nutrients it needs.

MODERN MEDICAL MODEL OF PAIN MANAGEMENT

In modern medicine, pain is treated with analgesics and nonsteroidal anti-inflammatory drugs. If pain persists,
stronger narcotics and anti-inflammatory corticoste-
roids are used. Other drugs like antidepression and 
anti-epilepsy drugs often are used in pain clinics to 
help modulate the pain experience. Unfortunately, all 
these medications have unwanted side-effects. There is a 
growing awareness in the community that drug therapy 
is not the only way. People are looking for more natural 
alternatives and less harmful treatment modalities with 
more self-help involvement. They want to participate 
actively in the healing process. People are turning more 
and more to alternative and natural therapies such as 
physical therapies, (e.g., physiotherapy, osteopathy, chi-
ropractic) with stretching, mobilization, manipulations, 
heat/cold packs, and acupuncture/acupuncture-related 
methods in pain clinics around the world. There is 
acceptance of acupuncture as a treatment method (Fargas-Babjak, Rooney, & Geretz-Simon, 2001; Baxter, 1994) and Transcutaneous Electrical Nerve Stimulation (TENS). Both these 
techniques are well accepted by the patients, as needles 
are not used. There is evidence that these methods of 
acupuncture stimulation may give some of the benefits of 
needle acupuncture treatment. Although TENS was 
introduced more than 30 years ago as an alternative 
therapy to pharmacological treatments for chronic pain 
and in spite of its widespread use, the effectiveness 
of TENS is still rather controversial. A meta-analysis 
was carried out by scientists in 2001, and the results 
were published in the Cochrane Database Systemic 
Reviews, which showed that there was no evidence to 
support the use of TENS in the treatment of chronic low back pain, while the results for chronic pain were inconclusive.

Convention TENS stimulation has its limitation 
because of habituation from repetitive monotonous 
stimulation over the same points (Godfrey, n.d.; Carroll 
et al., 2001; Milne, et al., 2001). However, the Canadian 
research scientists were able to overcome this habituation 
by using a novel machine called Codetron®, which 
uses six negative electrodes and one positive electrode. 
At any one time, a pair of electrodes is stimulated. The 
sequence of stimulation is randomized so the brain 
will not filter out the stimulation and will accept each 
individual stimulation as a novel one. Controlled studies 
were done comparing Codetron with Sham Codetron 
therapy (Fargas-Babjak, Rooney, & Geretz-Simon, 
n.d.) and Codetron with Electroacupuncture (Richard 
& Cheng). The findings were very favorable toward 
Codetron therapy.

TRADITIONAL MEDICAL MODEL OF 
PAIN MANAGEMENT

In traditional Chinese medicine (TCM), diseases de-
velop when the flow of Qi (energy, prana, life force) is 
blocked or interrupted. The basis of TCM treatment is 
to reestablish the flow of Qi. The TCM practitioners use 
needle acupuncture and/or herbal remedies to alter or 
reestablish the flow of Qi to reestablish homeostasis 
in the body (Chinese acupuncture and moxibustion, 
1990; O’Conner & Bensky, 1983).

The Qi or Life Force is also derived from the air 
we breathe and the water and food we drink and eat. 
Proper breathing and nutrition form part of the total 
management in TCM to help bring the body back into balance. It is well known that the food we eat 
determines how we feel. There are certain foods that 
will initiate or aggravate the painful situation. Food 
sensitivities and intolerance can trigger inflammatory 
response and cause pain (Author’s clinical observation 
and treatment protocol).

ALTERNATIVE THERAPIES

Acupuncture, LLLT, & TENS

Since 1974, acupuncture has been an accepted treat-
ment method in pain clinics around the world. There is 
only one slight drawback with acupuncture. Not many 
pople, given a choice, would like to have needles stuck 
into them. So scientists did intensive research for a 
noninvasive acupuncture-point stimulation methods. 
In the East, traditional health practitioners used manual 
massage—Shiatsu, AnMo, and Tui Na—to stimulate 
the tissues and acupoints. Scientists discovered two 
modalities that can stimulate acupoints through the 
skin without inflicting pain by using Low Level LA-
SER Therapy (LLLT) (Oshiro & Calderhead, 1990; 
Wong & Fung, n.d.; Baxter, 1994) and Transcutaneous 
Electrical Nerve Stimulation (TENS). Both these 
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DIET, NUTRITION, AND PAIN 
MANAGEMENT

In recent years, many reports have been published stat-
ing that certain types of food cause or aggravate arthritic 
or rheumatic pain. Childers and Margoles (1993) in their 
article “An Apparent Relation of Nightshades (Solanak

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