



Student: Resendiz Estrada Alessandra

Teacher : Eduardo Enrique Arreola Jimenez

Ingles

LICENCIATURA EN ENFERMERIA

TAPACHULA, CHIAPAS

21 DE SEPTIEMBRE DEL 2024

UNIVERSIDAD DEL SURESTE

INVESTIGACIÓN

INDICE

Types of pain	3
Types of pain	3
Acute pain.....	3
Chronic pain	4
Types of pain based on pathophysiology	4
Nociceptive pain	4
Visceral	5
Neuropathic pain	5
Types of pain based on etiology.....	6
Cancer pain	6
Non-cancer pain.....	6
Types of pain depending on the affected system	7
Bibliografía	8

Types of pain

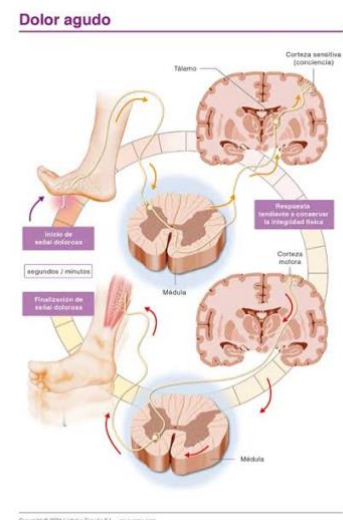
Pain is a signal from the nervous system that something is not right. It is an unpleasant sensation, such as stinging, tingling, stinging, burning, or discomfort. The pain may be sharp or dull. It can be intermittent or constant. You may feel pain somewhere in your body, such as your back, abdomen, chest, or pelvis. Or you may feel generalized pain. Pain can help diagnose a problem. Without pain, you could seriously injure yourself without knowing or realizing that you have a medical problem that requires treatment. Pain is not always curable, but there are many ways to treat it. Treatment depends on the cause and type of pain. There are treatments that use medications, such as pain relievers. There are also non-drug treatments, such as acupuncture, physical therapy, and sometimes surgery. Pain perception consists of a sensory neuronal system (nocioceptors) and afferent nervous pathways that respond to tissue nocioceptive stimuli; Nocioception may be influenced by other factors (e.g. psychological).

Types of pain

We can classify pain based on its duration, pathogenesis, location, course, intensity, prognostic factors for pain control and, finally, according to pharmacology.

Acute pain

Acute pain is considered a normal, physiological and predictable response of the body to a chemical, physical or traumatic attack. Therefore, acute pain is pain that persists while the healing process of the tissues lasts. In this sense, pain whose duration exceeds 3 or 6 months can be considered chronic. Bonica proposes to speak of acute and chronic pain depending on the duration and the amount of underlying pathology, so that short-term processes with a lot of underlying pathology would coincide with acute pain and painful processes of longer duration and less underlying pathology would be classified as like chronic pain.



Acute pain is a fundamental element for the survival of the organism. It constitutes a first-order alarm system and warns or advises that there is some danger to the integrity of the organism that deserves attention, allowing the implementation of avoidance or protection mechanisms.

Diferencias entre dolor agudo y crónico

Dolor	Agudo	Crónico
	Síntoma	Enfermedad
Intensidad	Proporcional	No proporcional
Evolución	Transitoria	Permanente/recurrente
Función biológica	Sí	No
Se asocia con	Ansiedad	Depresión
Respuesta al tratamiento	Buena	Regular

Among the characteristics of acute pain we can mention the following:

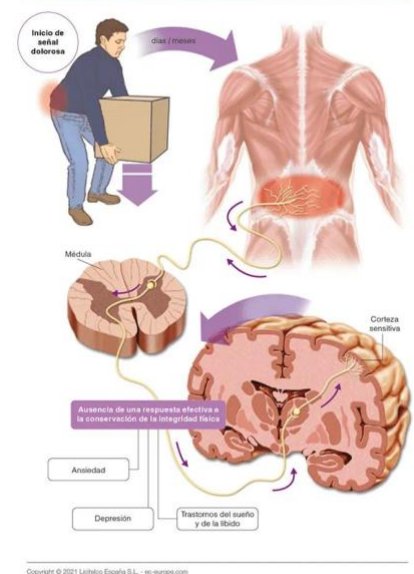
- It is secondary to actual or potential tissue injury.
- It constitutes a first-class alarm system.
- Its time course runs parallel to the repair process.
- Scar tissue disappears.
- It is a symptom of illness

Chronic pain

It is the one that persists more than 3 to 6 months from the moment of the tissue attack. Among the characteristics of chronic pain we can highlight the following:

- Temporary persistence beyond tissue repair.
- Be secondary to pathophysiological changes that occur in the nociceptive system.
- Unlike acute pain, which is a symptom of a disease, chronic pain is a disease in itself.

Dolor crónico



Types of pain based on pathophysiology

Nociceptive pain

Nociceptive pain results from activity in neural pathways, secondary to actual stimuli or stimuli that could potentially damage tissue. Somatic pain is pain whose origin is nociceptive information coming from any tissue that makes up the structure of the body. These tissues are: bones, muscles, joints, ligaments and tendons of the spine,

trunk and extremities. Technically, it would also include pain mediated by the nociceptive system coming from the skull, the meninges that cover the brain and bone marrow, and the teeth. More explicitly, somatic pain includes all pain originating from non-visceral structures of the body. Pain coming from the skull is included as headache and pain from the teeth is included as dental pain. Therefore, when we talk about somatic pain we are referring to all those musculoskeletal structures of the chest and abdominal wall, the spine and the extremities.

Visceral

Visceral pain is pain that comes from internal organs such as the heart and great vessels, lungs and respiratory tract, digestive system, liver, gallbladder, urological organs, such as kidneys and excretory tracts, and the reproductive system. Traditionally, somatic pain is understood as a form of protection for the body; However, in the case of visceral pain, its contribution to the protection of the individual is less clear. Some internal organs are insensitive to pain and, on other occasions, pain in viscera such as the liver appears when there is a very important and extensive injury, which can compromise life, being too late to take curative measures.

Visceral pain meets 5 clinical characteristics:

1. First of all, it must be noted that not all viscera are capable of generating pain; In fact, the liver, kidneys, lung parenchyma and most solid viscera are not capable of generating painful sensations.
2. It is not always associated with harmful or aggressive stimuli. For example, some harmful stimuli, such as cuts or burns, may not cause pain, and non-noxious stimuli, such as distension, may be painful.
3. Visceral pain is characterized by being diffuse and poorly localized.
4. It is accompanied by referred pain in other locations.
5. It is capable of triggering vegetative and motor reflex responses.

Neuropathic pain

Neuropathic pain is defined as pain that appears as a direct consequence of an injury or disease that affects the somatosensory system. When a disease or injury occurs in the somatosensory system, a series of changes begin in the pain conduction system that act as pain amplifiers. Among the mechanisms involved in neuropathic pain, the following are known:

1. Ectopic activity.
2. Peripheral sensitization.

3. Central sensitization.
4. Decrease in inhibitory modulation.
5. Activation of microglia. Depending on the location of the lesion in the nervous system, we will talk about central or peripheral neuropathic pain.
6. Depending on the location of the lesion in the nervous system, we will talk about central or peripheral neuropathic pain. Nociceptive pain is pain arising from abnormal processing of pain signals without any clear evidence of tissue damage or discrete pathology involving the somatosensory system. Previously known as functional pain syndromes, these conditions include pain conditions such as fibromyalgia, irritable bowel syndrome and possibly nonspecific back pain. The pathophysiological mechanisms that cause these disorders mainly involve increased sensory processing and decreased inhibitory pathways. With few exceptions, procedural interventions are associated with worse outcomes in individuals with nociceptive pain than in patients with neuropathic pain.

Types of pain based on etiology:

Cancer pain

Cancer pain is a complex symptom, which changes over time and is the end result of several pain mechanisms. It encompasses inflammatory, neuropathic, ischemic, and compressive mechanisms in various locations.

Cancer pain can be secondary to: The disease itself due to invasion and compression of structures. The treatments applied for the oncological process: surgery, chemotherapy and radiotherapy. Cancer pain, in turn, can be acute or chronic.

Non-cancer pain

Cancer pain is a complex symptom, which changes over time and is the end result of several pain mechanisms. It encompasses inflammatory, neuropathic, ischemic, and compressive mechanisms in various locations.

Cancer pain can be secondary to:

The disease itself due to invasion and compression of structures. The treatments applied for the oncological process: surgery, chemotherapy and radiotherapy. Cancer pain, in turn, can be acute or chronic. Non-cancer pain It is also called non-

malignant or benign pain and includes all those pains that are not secondary to an oncological process or its treatments.

Types of pain depending on the affected system:

Depending on the system that is affected, we can find various types of pain: that which affects the nervous system, the respiratory and cardiovascular systems, the musculoskeletal system, the cutaneous and subcutaneous system, the gastrointestinal system and the genitourinary system. The most common are those that affect the nervous system and the musculoskeletal system.

Nervous system

If the nervous system is involved, central or peripheral neuropathic pain may occur.

Musculoskeletal system

Musculoskeletal pain affects the skeleton, joints and surrounding parts. Within musculoskeletal pain we can talk about acute or chronic pain depending on its duration, nociceptive or mixed pain depending on the pathophysiology, and joint, myofascial or tendon pain, depending on the structure that generates pain. The importance of musculoskeletal pain, apart from the fact that it is what we see most frequently in pain units, is the enormous socioeconomic impact it implies. In fact, musculoskeletal pain poses an economic burden that ranks just behind the burden of cardiovascular disease.

Bibliografía

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