

# Com podem fer que millorin els pacients amb dolor persistent?

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iasp-pain.org/Education/Content.aspx?ItemNumber=1698

The screenshot shows the IASP website with a green header. The header includes the IASP logo, the text "International Association for the Study of Pain", and the tagline "Working together for pain relief". It also features navigation links for "Global Year", "World Congress", "PAIN®", "DONATE", "Contact", "Login", and a search icon. Below the header is a navigation bar with links for "About", "Membership", "SIGs", "Publications & News", "Education" (which is highlighted in blue), "Advocacy", "Meetings", "Career Center", and a magnifying glass icon for search.

**HOME > Education**

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**IASP Terminology**

The following pain terminology is updated from "Part III: Pain Terms, A Current List with Definitions and Notes on Usage" (pp 209-214) *Classification of Chronic Pain, Second Edition*, IASP Task Force on Taxonomy, edited by H. Merskey and N. Bogduk, IASP Press, Seattle, ©1994.

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**Pain Terms**

Pain	Interdisciplinary Treatment*	Nociceptive Stimulus*
Allodynia*	Multidisciplinary Treatment*	Nociceptor*
Analgesia	Multimodal Treatment*	Nociplastic Pain*
Anesthesia	Neuralgia	Noxious Stimulus
Dolorosa	Neuritis	Pain Threshold*
Causalgia	Neuropathic Pain*	Pain Tolerance Level*
Dysesthesia	Central Neuropathic Pain	Paresthesia
Hyperalgesia*	Peripheral Neuropathic Pain*	Sensitization*
Hyperesthesia	Neuropathy*	Central Sensitization*
Hyperpathia	Nociception*	Peripheral Sensitization*
Hypoalgesia	Nociceptive Neuron*	Unimodal Treatment*
Hypoesthesia	Nociceptive Pain*	

*Note: An asterisk (\*) indicates that the term is either newly introduced or the definition or accompanying note has been revised since the 1994 publication.*

**Additional Information**

- IASP Terminology Background
- Copyright Permissions Request

## Dolor

Una experiencia sensorial y emocional desagradable asociada con daño tisular **real o potencial**, o descrita en términos de dicho daño.

## Pain

An unpleasant sensory and emotional experience associated with **actual or potential** tissue damage, or described in terms of such damage.



Symptom perceptions elicited by nails. The left panel exemplifies somatic amplification; reprinted from Fisher JP, Hassan DT, O'Connor N. Minerva. *Br Med J* 1995;310:70, with permission from BMJ Publishing Group Ltd. The right panel exemplifies somatic deamplification; reprinted with permission from Associated Press, Wide World Photos. 1/16/05.

Dimsdale JE, Dantzer R. A biological substrate for somatoform disorders: importance of pathophysiology. *Psychosom Med.* 2007 Dec;69(9):850-4.  
Review.

## Nociceptive pain

Pain that arises from actual damage to non-neural tissue and is due to the activation of nociceptors.

## Dolor nociceptivo

Dolor que surge del daño real a tejido no neural y se debe a la activación de nociceptores.



## Neuropathic pain

Pain caused by a lesion or disease of the somatosensory nervous system.

## Dolor neuropático

Dolor causado por una lesión o enfermedad del sistema nervioso somatosensorial.

(e.g. stroke, vasculitis, diabetes mellitus, trigeminal neuràlgia, postherpetic neuràlgia, genetic abnormality...)

El dolor neuropático está producido por un trastorno de las vías sensitivas del sistema nervioso central o periférico.  
Afecta a un 3-7 % de la población.

Zhu B et al. Intra-Venous Lidocaine to Relieve Neuropathic Pain: A Systematic Review and Meta-Analysis. *Front Neurol.* 2019 Sep 18;10:954.



El 14 de diciembre de 2017 fue aceptado por la IASP un nuevo término: «dolor nociplástico»

## **Nociplastic pain**

Pain that arises from altered nociception despite no clear evidence of actual or threatened tissue damage causing the activation of peripheral nociceptors or evidence for disease or lesion of the somatosensory system causing the pain.

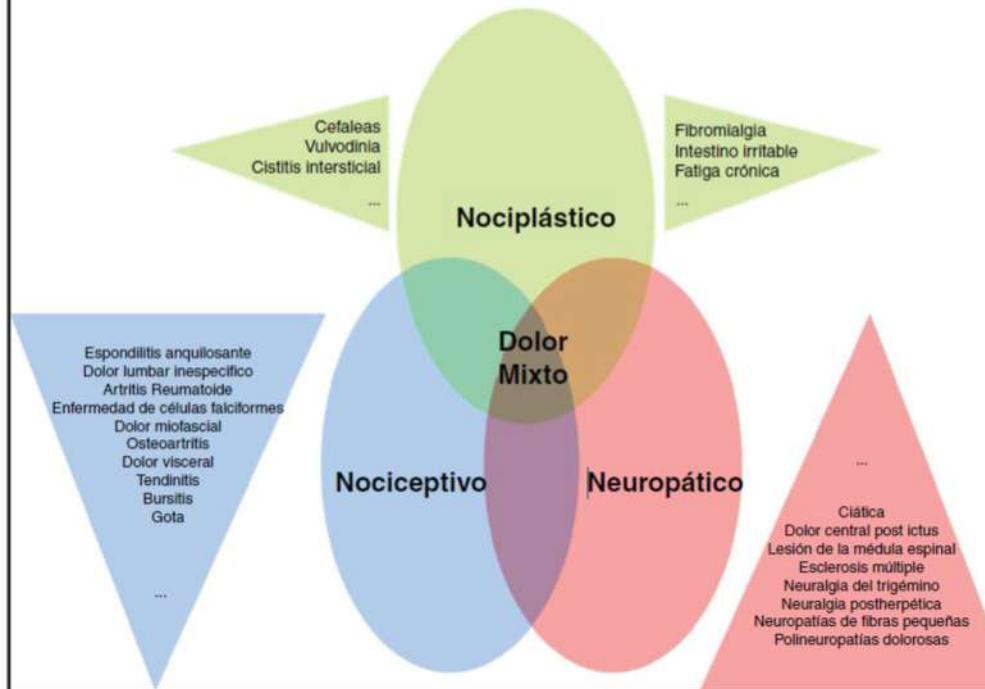
# Nociceptive pain

# Neuropathic pain

# Nociplastic pain

### ESTADOS POTENCIALES DE DOLOR MIXTO

Ciática, Lumbalgia, Cervicalgia, Dolor oncológico, Osteoartritis, Dolor crónico postquirúrgico, Trastornos musculosqueléticos, Trastornos temporomandibulares crónicos, Estenosis de canal lumbar, Dolor en la enfermedad de Fabry, Dolor articular crónico, Espondilitis anquilosante dolorosa, Lepra, Síndrome de la boca urente, ...



Adaptado por Alcántara Montero A et al. Semergen. 2019

From: Freyhagen R, et al. Current understanding of the mixed pain concept: a brief narrative review. Curr Med Res Opin. 2019 Jun;35(6):1011-1018.

# Ejemplo: Dolor Pélvico Crónico

## Definición



Dolor que **se percibe** en estructuras y órganos relacionados con la pelvis.  
En ausencia de patología aparente o infección, el fenómeno de dolor puede ser etiquetado como síndrome de dolor pélvico crónico.

Engeler D, Baranowski AP, Borovicka J, Cottrell A, Dinis-Oliveira P, Elneil S, Hughes J, Messelink EJ, Van Ophoven A, Reisman Y, et al 2014 Guidelines on chronic pelvic pain. Arnhem, European Association of Urology.

# 2016 !!!

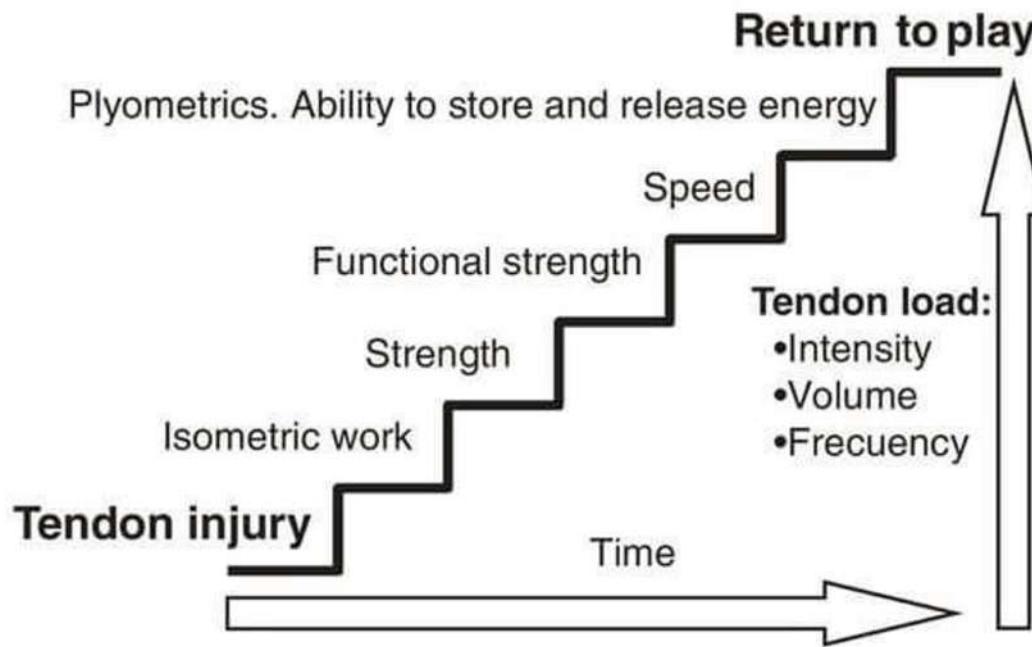
Los pilares en el tratamiento no farmacológico del dolor crónico son la actividad física y la educación del paciente en neurociencia del dolor.

## ABORDATGE DEL DOLOR CRÒNIC NO ONCOLÒGIC



**Health professionals  
have an educational role**

# Individual graded running programme



Mascaró A, Cos MA, Morral A, Roig A, Purdam C, Cook J. Load management in tendinopathy: Clinical progression for Achilles and patellar tendinopathy. Apunts Med Esport. 2018; 53 (197):19-27

# Paternalisme *versus* Responsabilitat

# Mecanismos de respuesta (protección) ante una amenaza

Sistema nervioso simpático

Sistema motor

Sistema endocrino

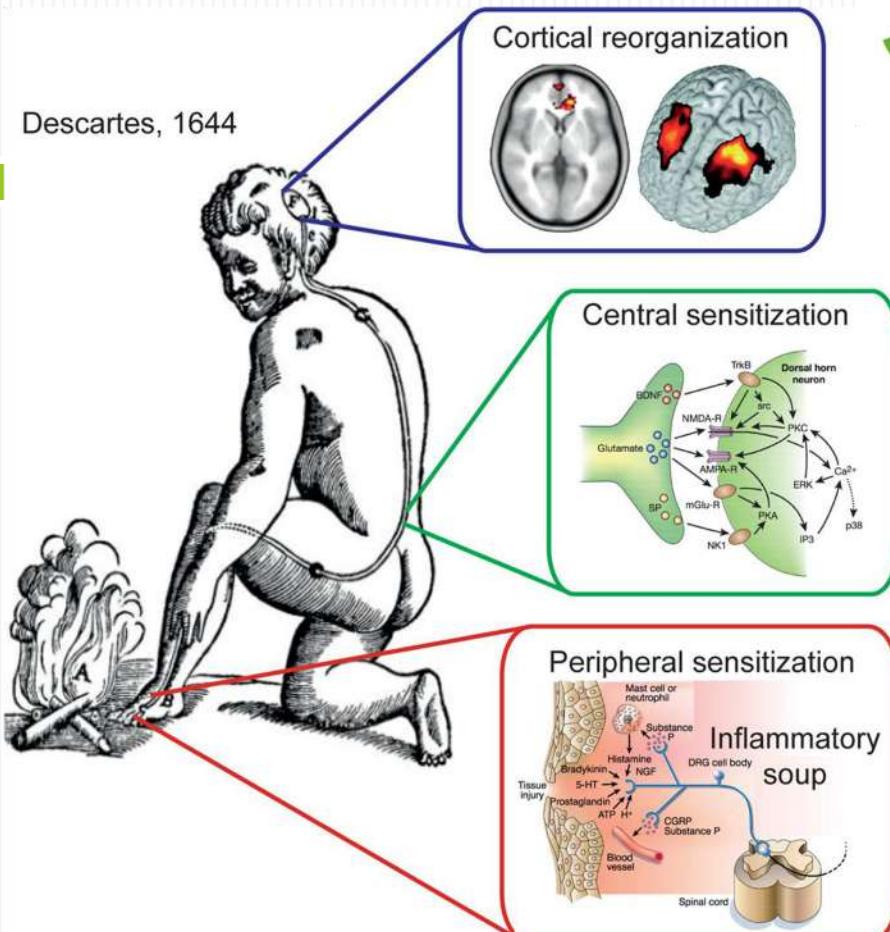
Sistema nervioso parasimpático

Sistema inmune

Dolor (la parte consciente de un sistema de protección muy amplio)

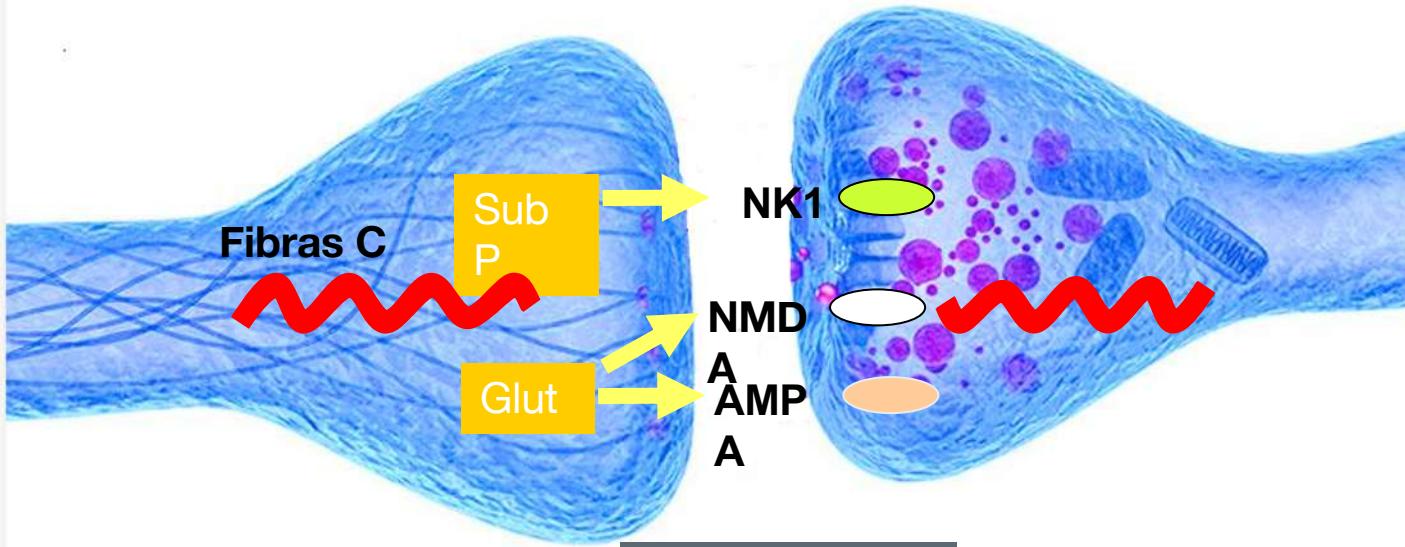


Descartes, 1644



Baliki MN, Apkarian AV. Nociception, Pain, Negative Moods, and Behavior Selection. *Neuron*. 2015 Aug 5;87(3):474-91

## Sensibilización central “Wind-Up”



Output > Input

1965 !!!



Ronald Melzack

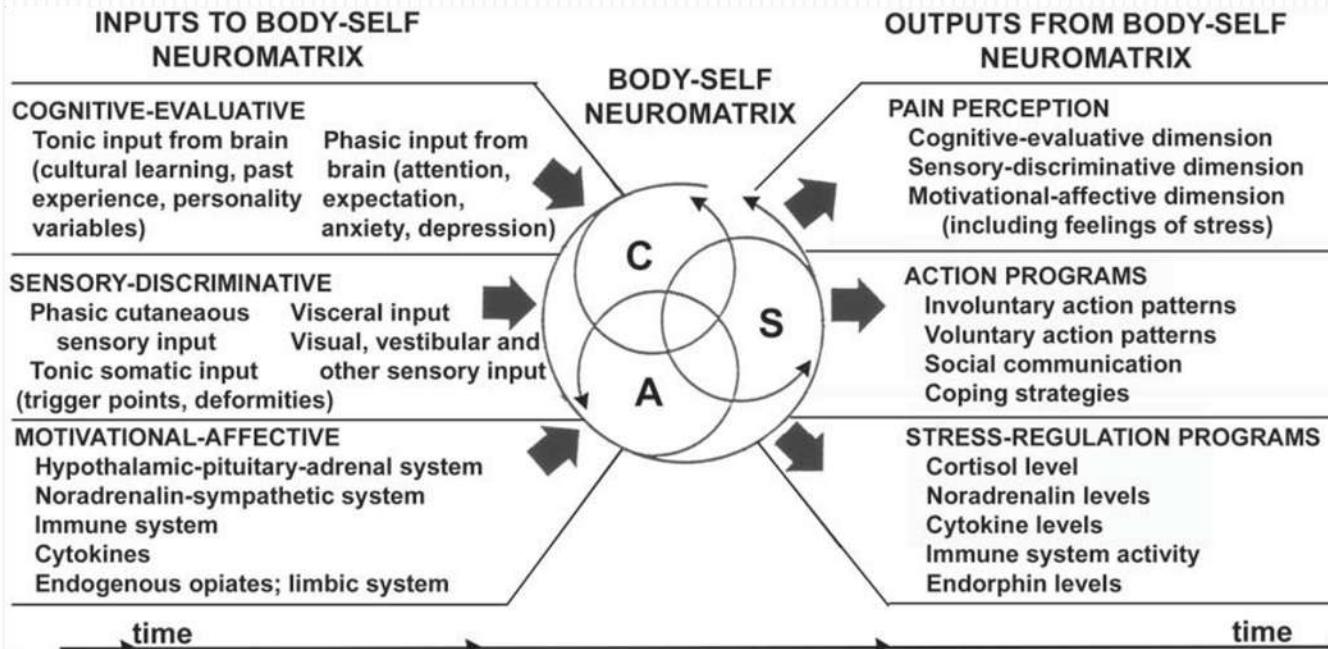


Patrick Wall

Melzack and Wall proposed that the Cartesian model of pain be replaced with the *“gate control theory of pain”*

Melzack R, Wall PD. *Science* 1965;150:971–9.

# NEUROMATRIX



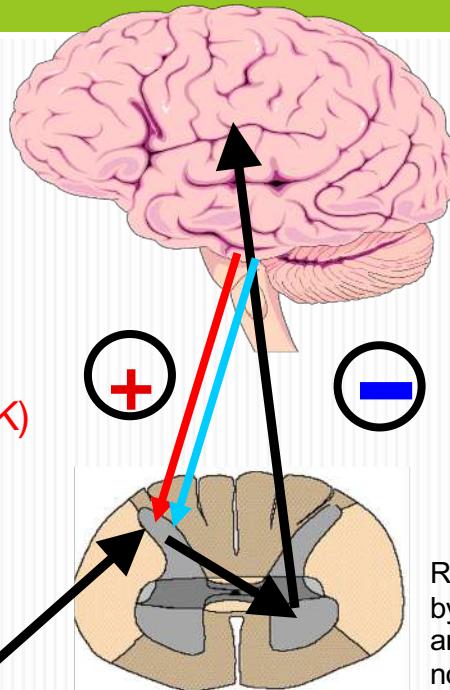
Melzack R.

From the gate to the neuromatrix. *Pain*. 1999 Aug; Suppl 6:S121-6. Review.

# **Información versus Catastrofismo**

## Amplifies signal

- Substance P
- Glutamate
- Serotonin ( $5HT_{2a, 3a}$ )
- Nerve growth factor
- Cholecystokinin(CCK)



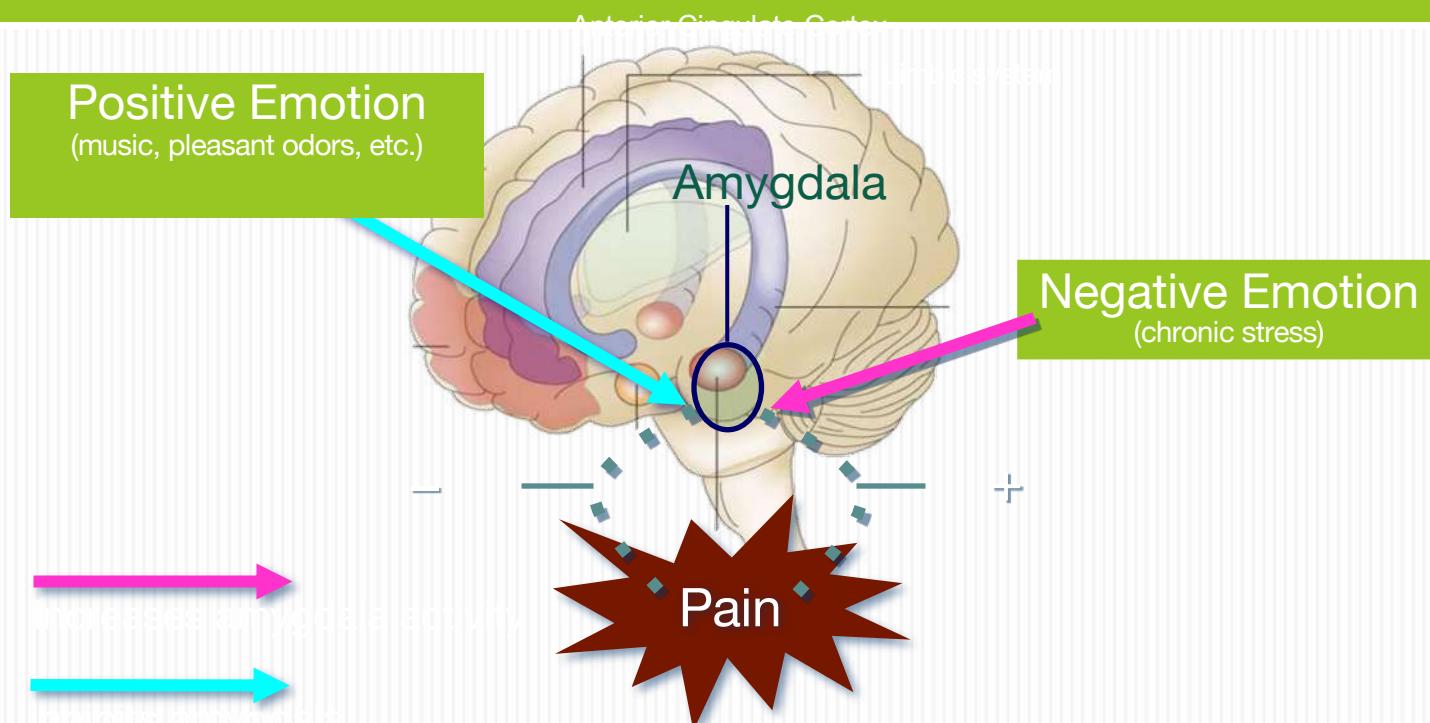
## Attenuates signal

- Opioids
- GABA
- Noradrenalin Serotonin  
( $5HT_{1a,b}$ )
- Adenosine

Roy M, Lebuis A, Peretz I, Rainville P. The modulation of pain by attention and emotion: a dissociation of perceptual and spinal nociceptive processes. Eur J Pain. 2011 Jul;15(6):641.

Eippert,F.; Finsterbusch, J.; Bingel, U. & Büchel,C. Direct Evidence for Spinal Cord Involvement in Placebo Analgesia. Science 2009 ; 326(5951): 404.

# How Positive and Negative Emotions Modulate Response to Pain



Modified from Neugebauer V et al. *Neuroscientist*. 2004;10:221-234.

# DOLOR ≠ NOCICEPCIÓN

La relación entre nocicepción y dolor es variable.

Dolor: parte de un sistema sofisticado para protegernos de la amenaza.

La experiencia del dolor depende del contexto:

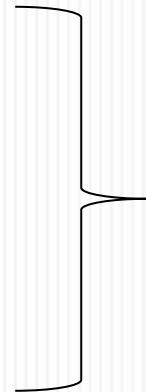
- Información previa.
- Espectativas.
- Consecuencias.
- Creencias.
- Esperanza.
- Miedos.
- Distracción.
- Etc....

Tang NK, Salkovskis PM, Hodges A, *Effects of mood on pain responses and pain tolerance: an experimental study in chronic back pain patients.*  
*Pain.* 2008 Aug 31; 138(2): 392-401.

Todo el entorno puede modificar la respuesta a una pregunta  
*¿Cuán peligrosa es esta situación?*  
El valor de la amenaza.  
El cerebro responde a esa pregunta

# Chronic Pain

- Difficult to diagnose
- Difficult to treat
- Difficult to cure



**Frustration for  
patient and  
physician**

# DOLOR ≠ NOCICEPCIÓN ≠ LESIÓN

van Wilgen CP, Keizer D. The sensitization model to explain how chronic pain exists without tissue damage. Pain Manag Nurs. 2012 Mar;13(1):60-5.

# El hombre es un animal simbólico

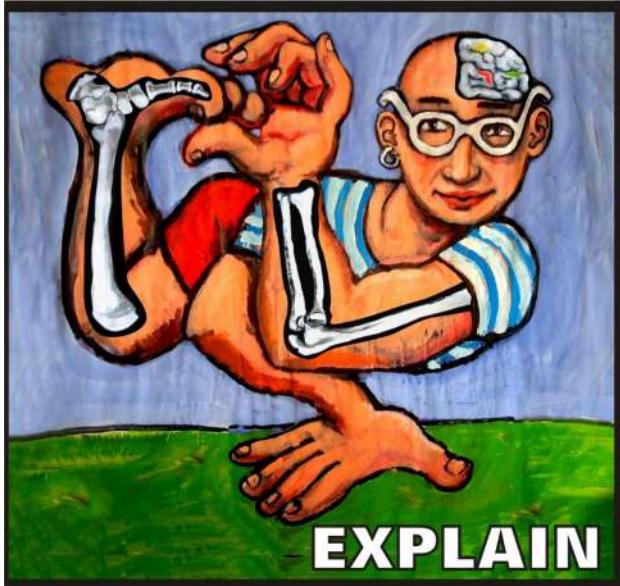
“La característica principal del hombre es su capacidad de simbolización y que la mejor forma para entenderlo es el estudio de los símbolos que crea en su vida en sociedad”



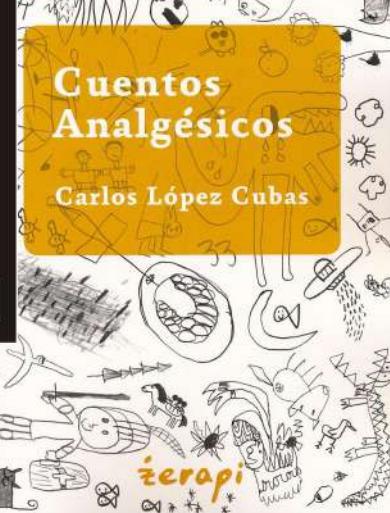
**Ernst Cassirer ( 1874-1945)**



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familiar i comunitària

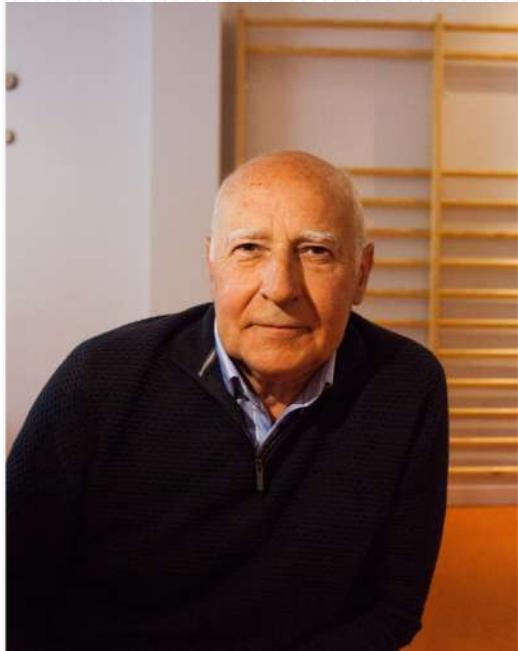


DAVID BUTLER | LORIMER MOSELY | ART SUNYATA

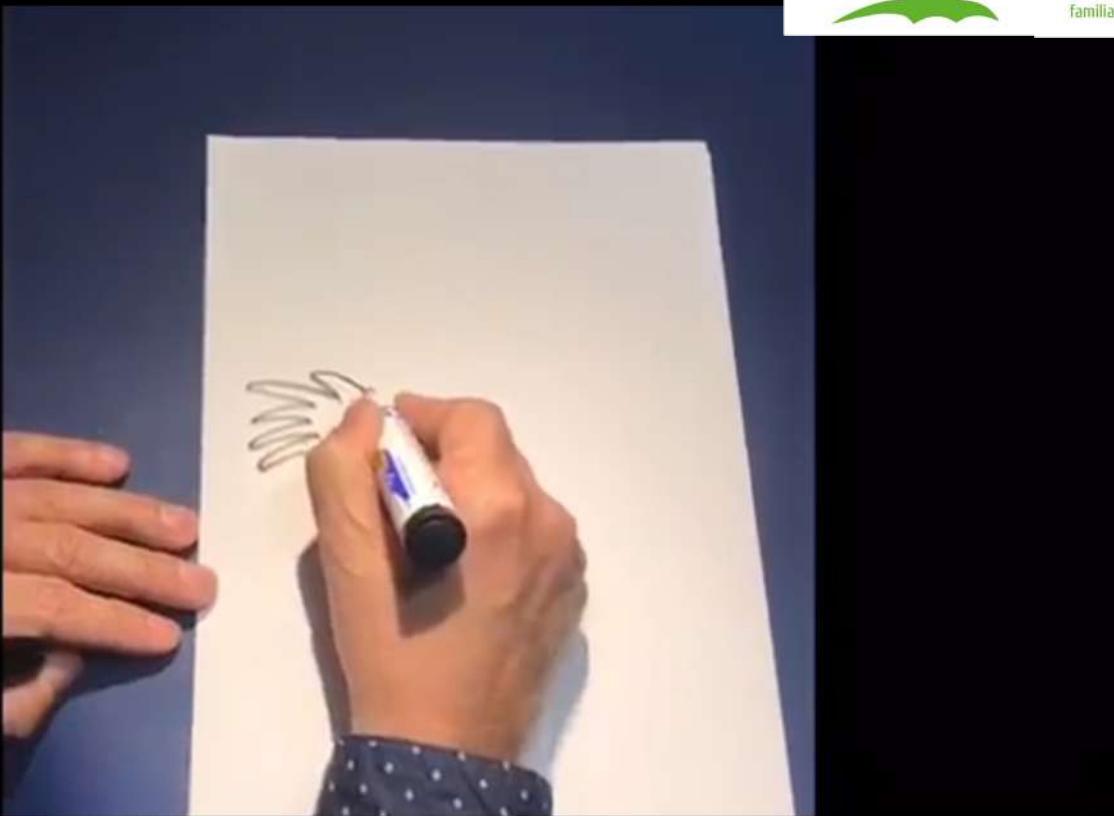


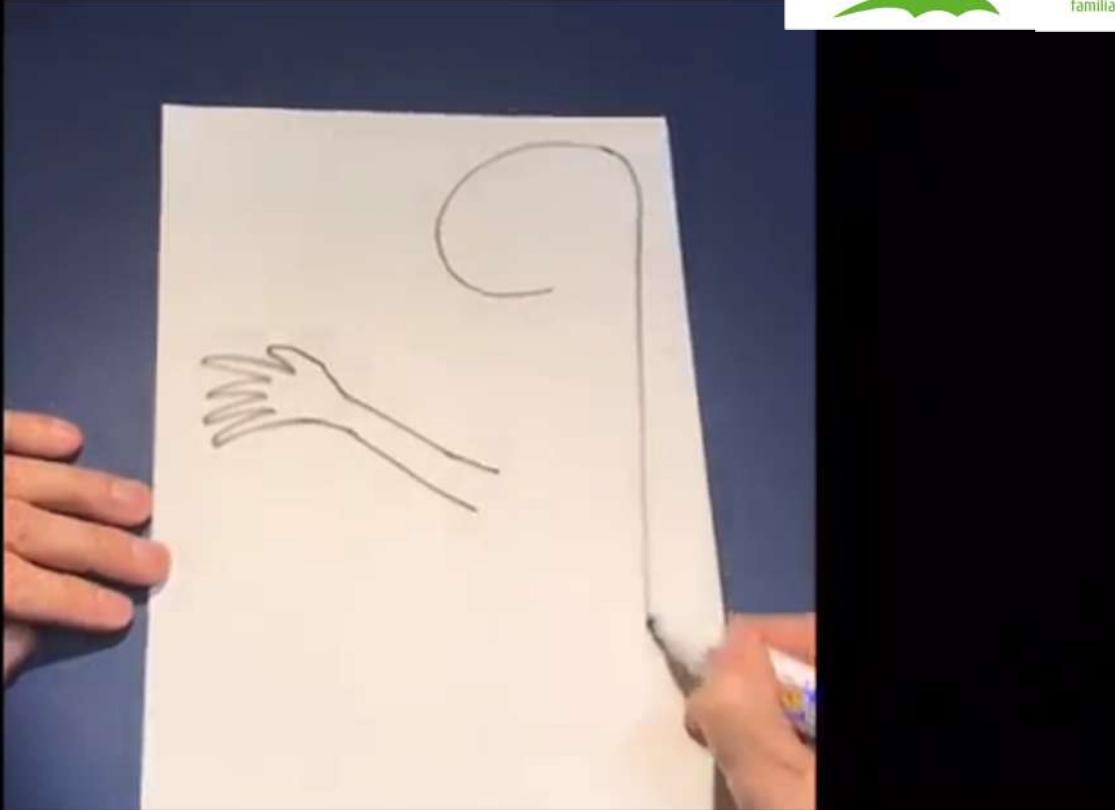


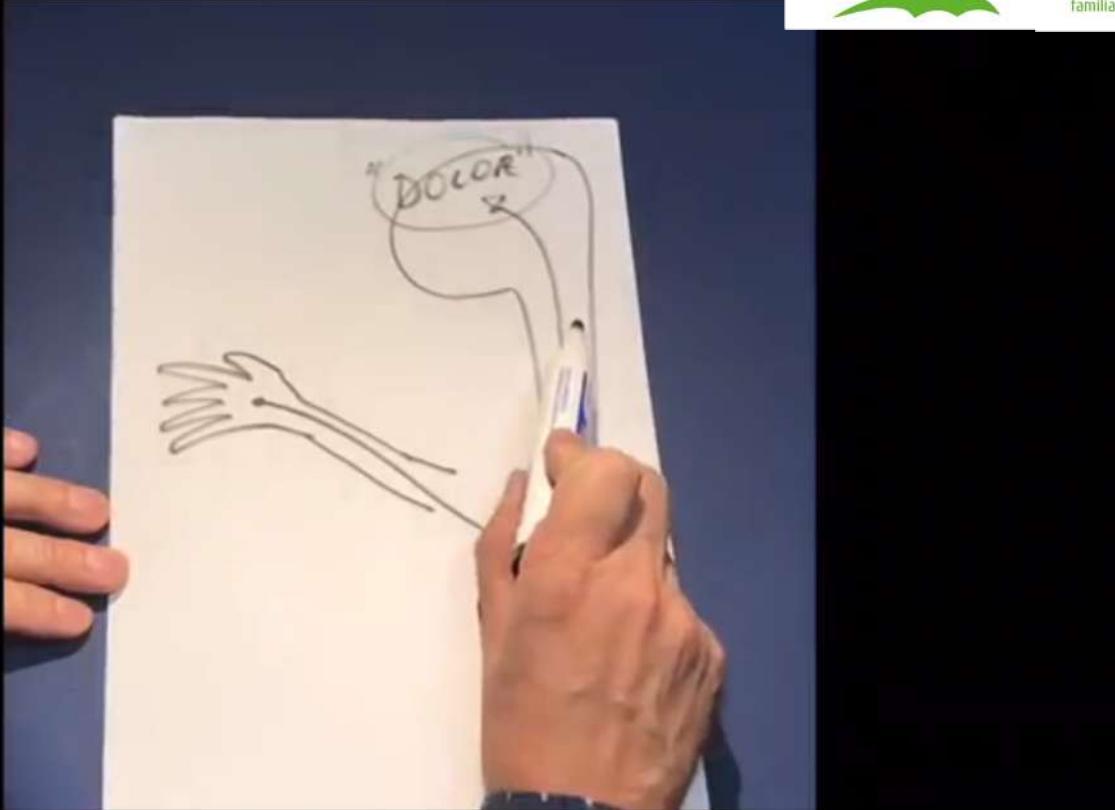
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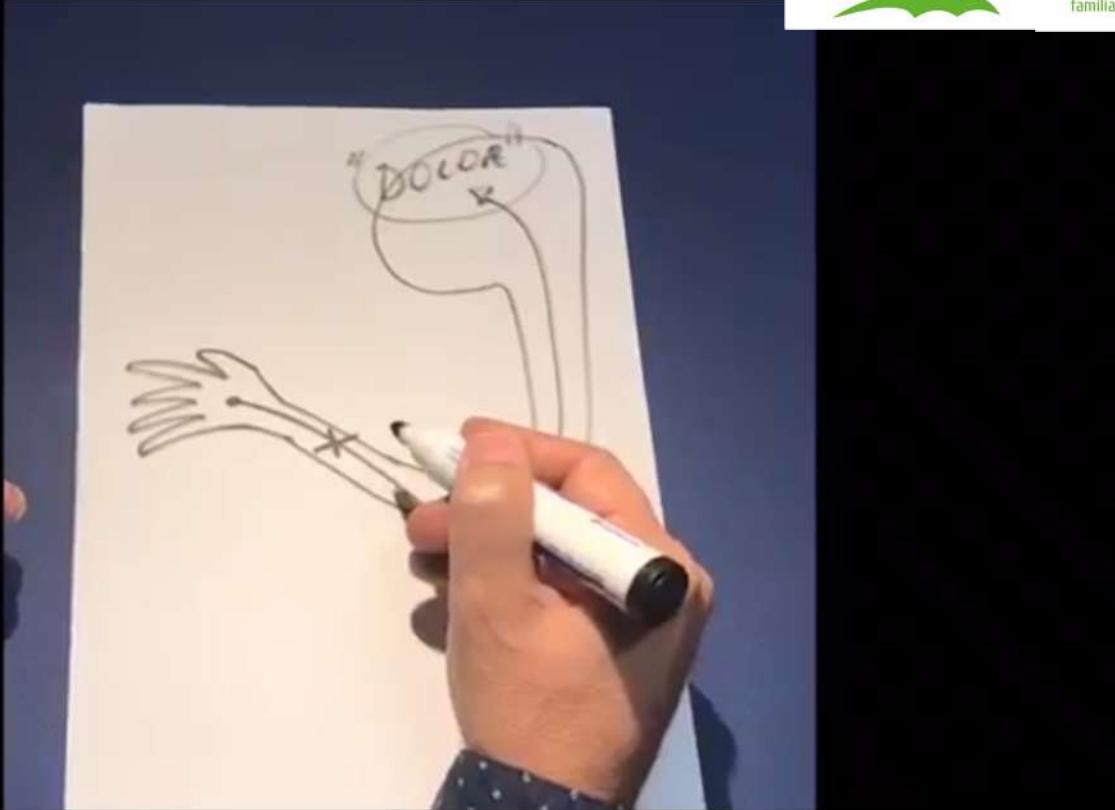


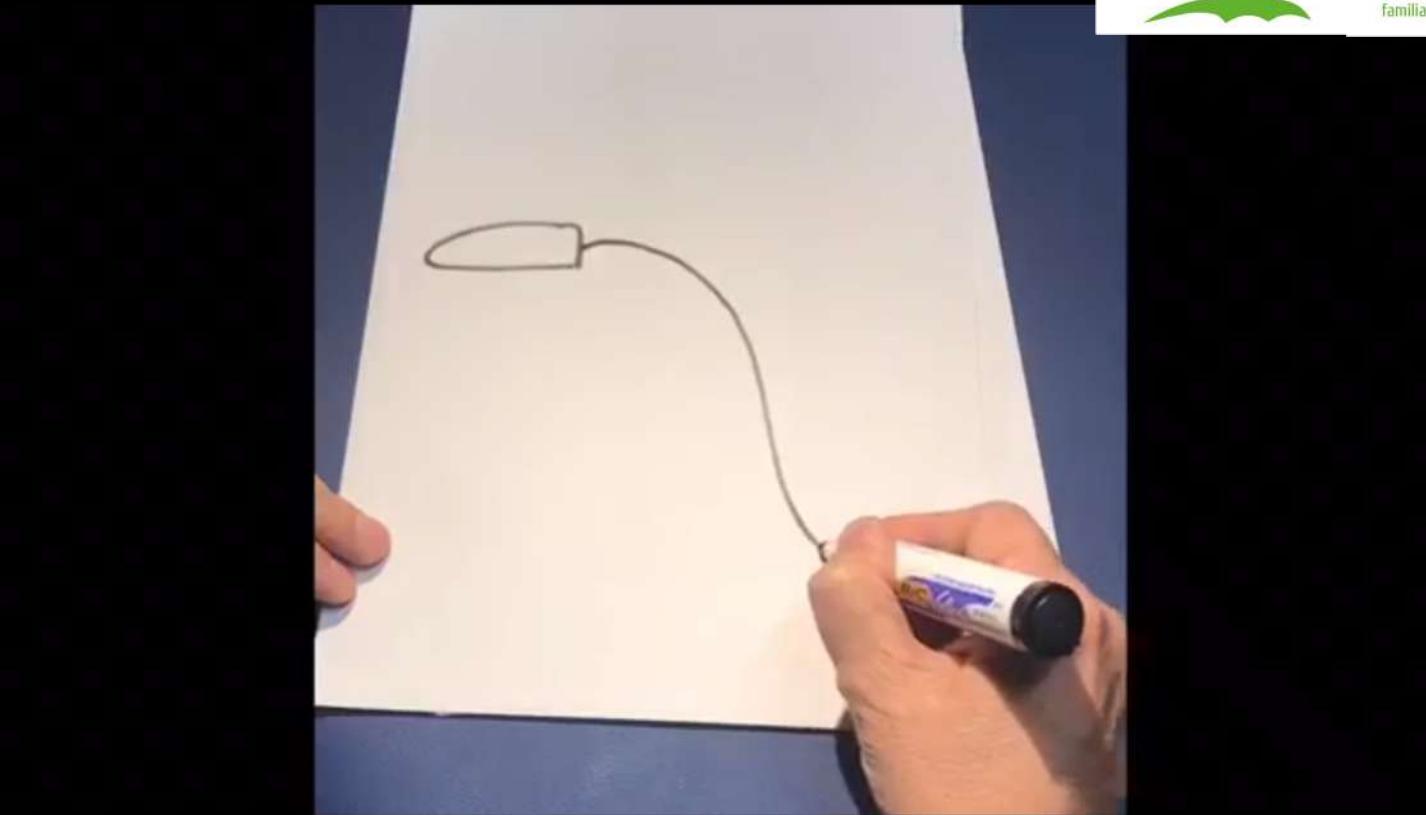
Arturo Goicoechea

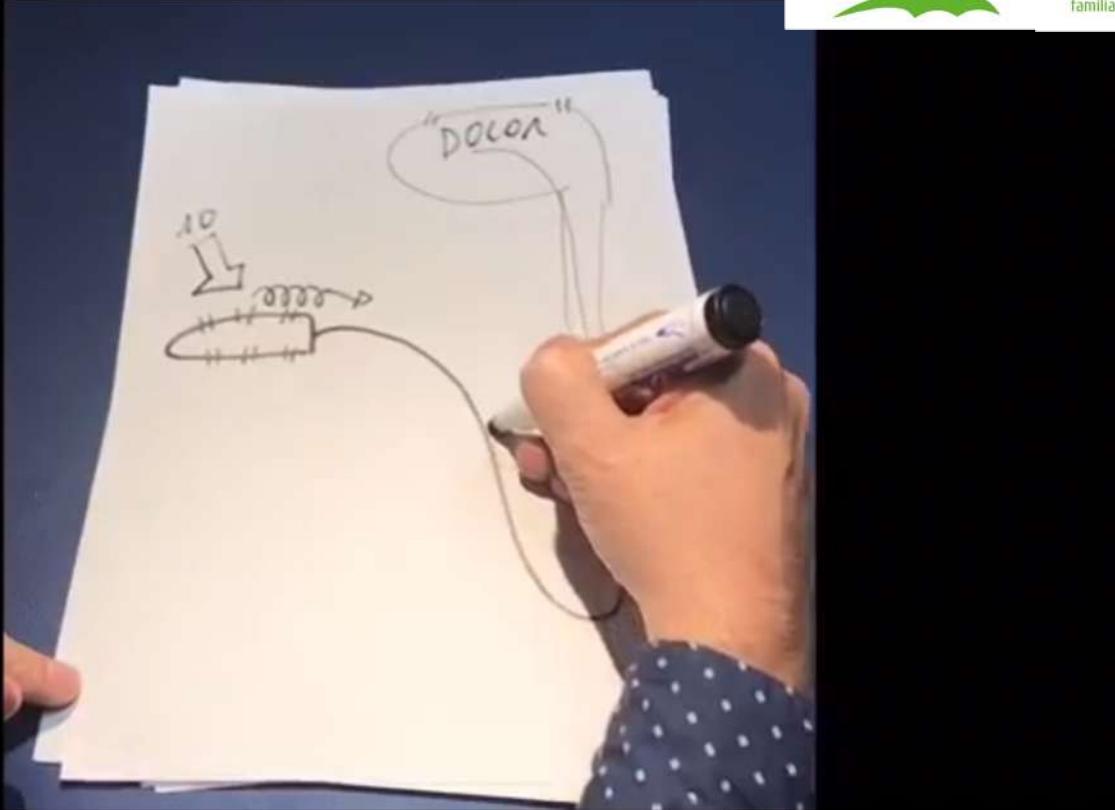


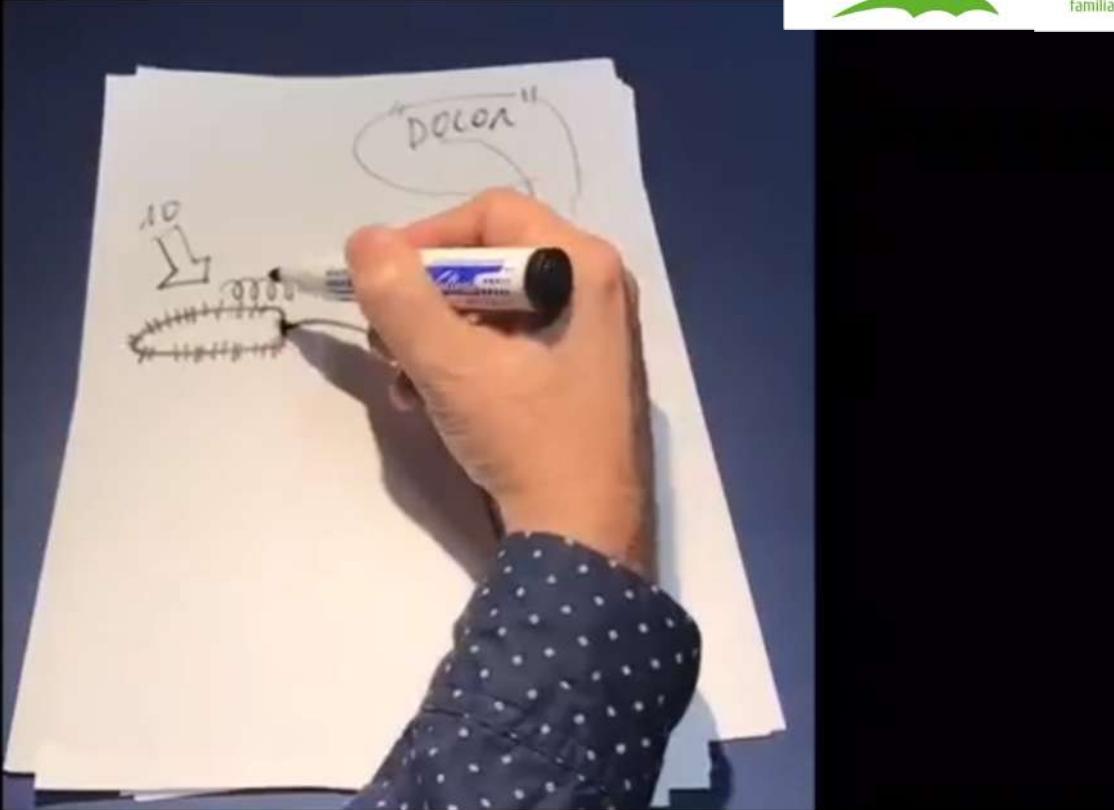


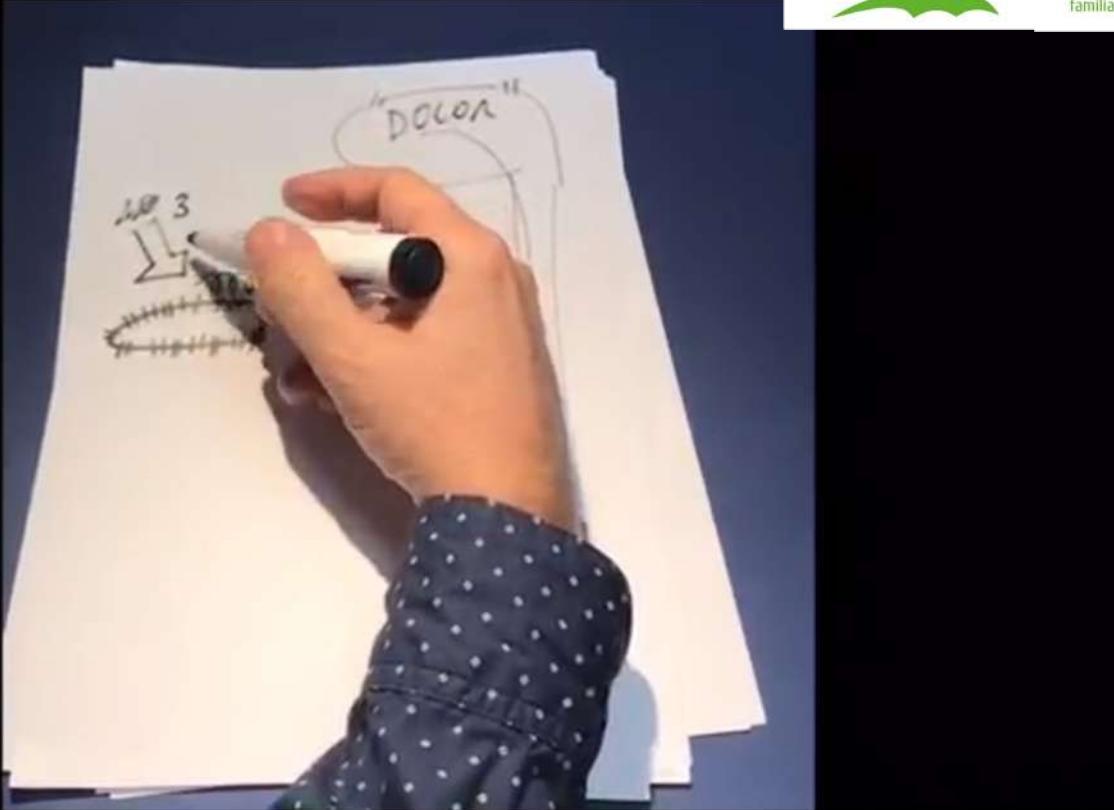








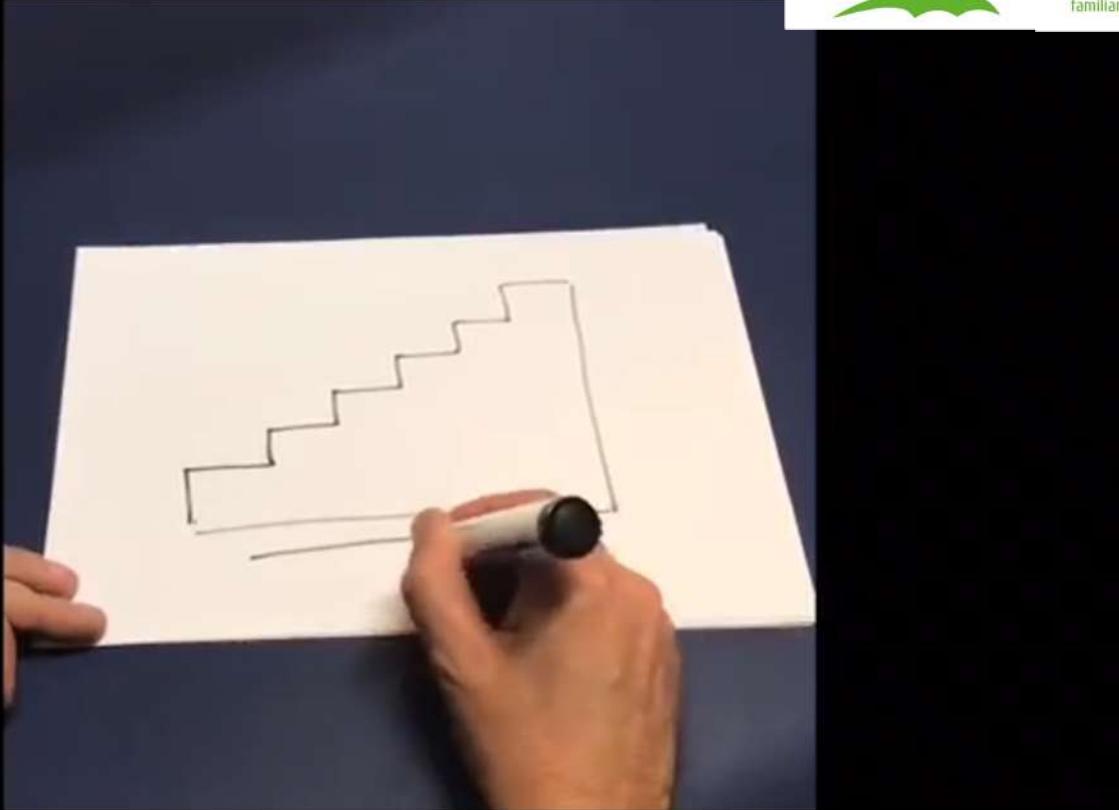


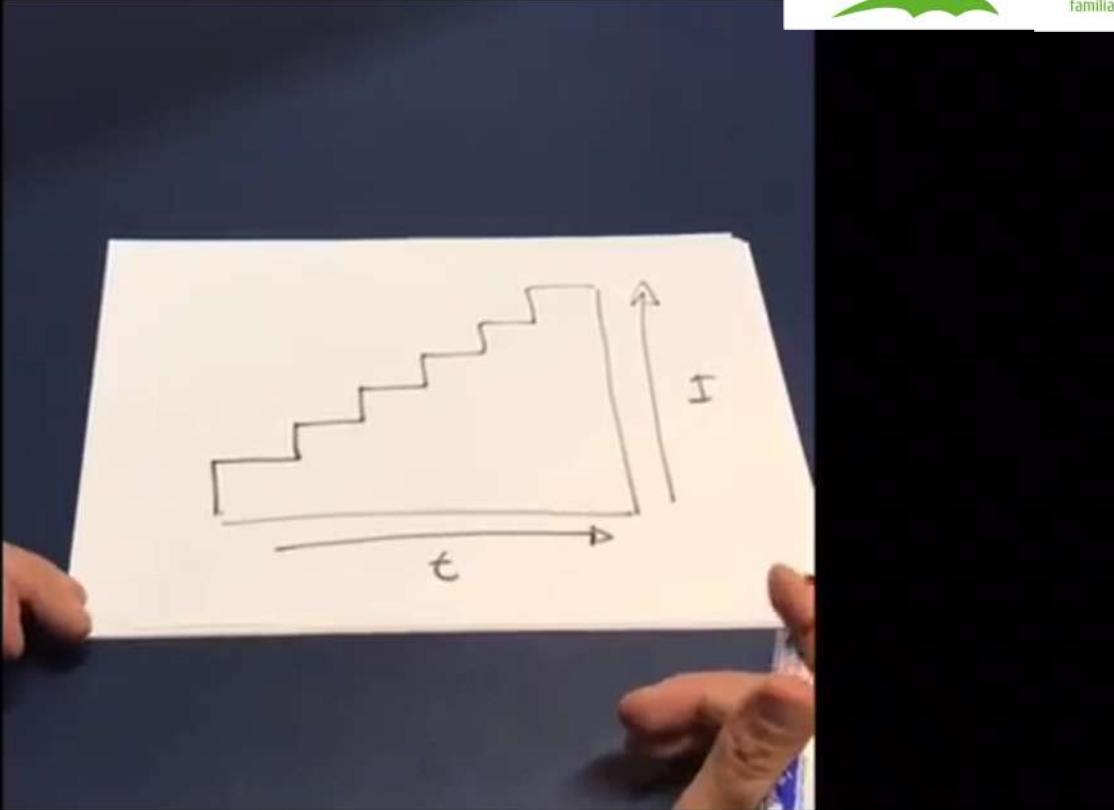


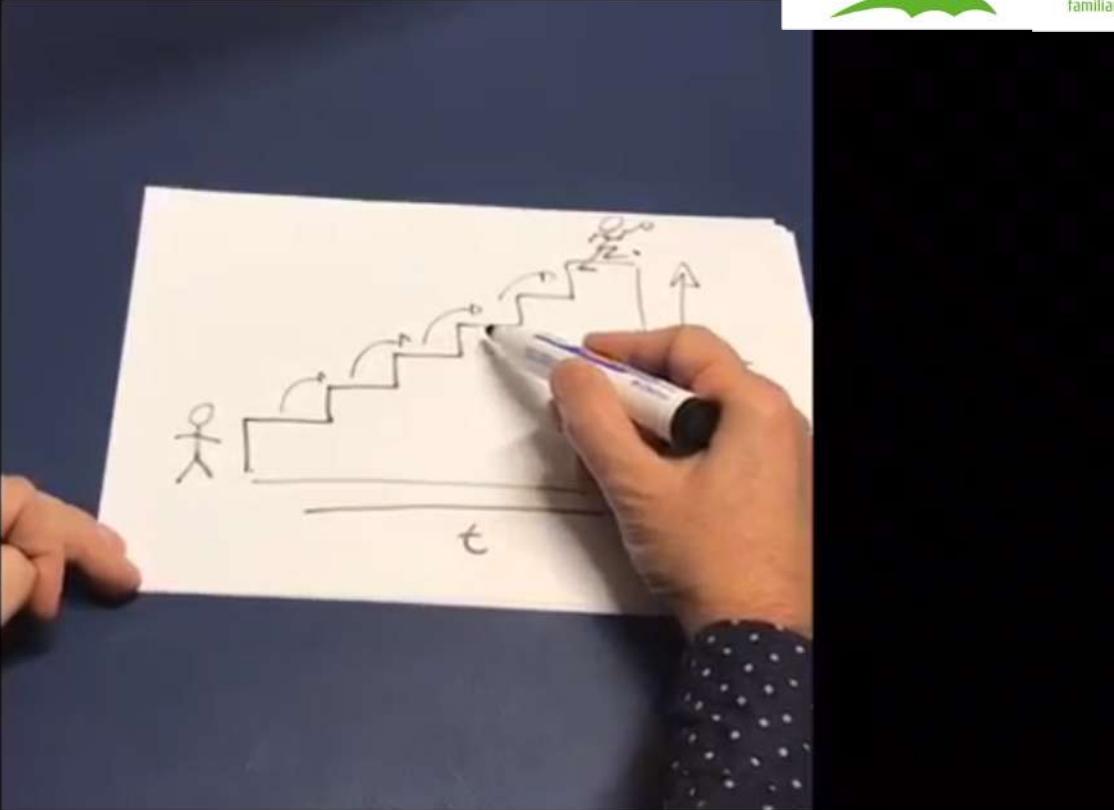




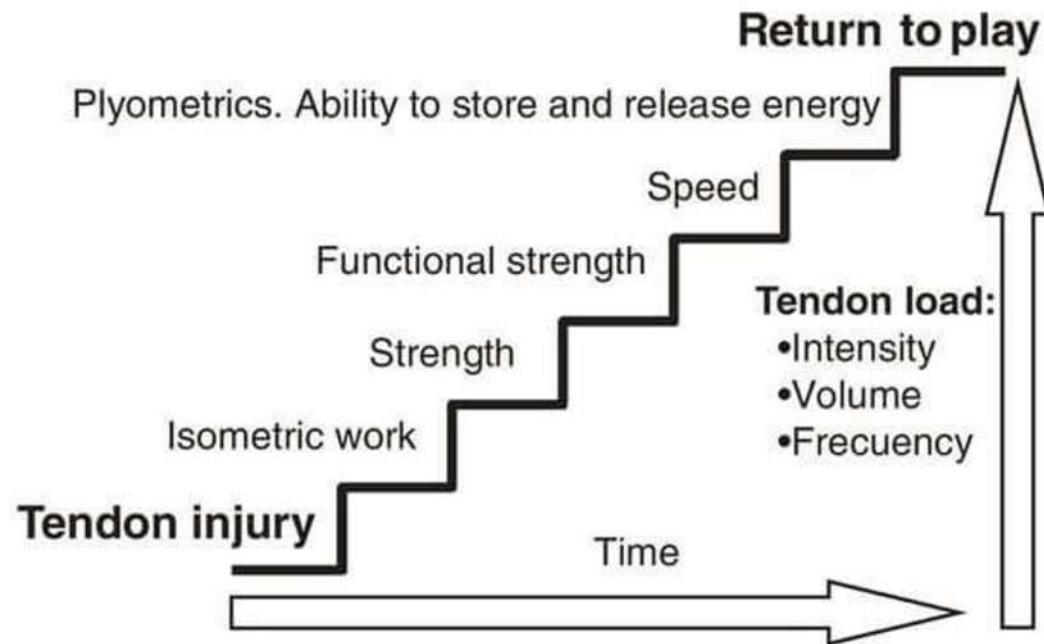
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# Individual graded running programme



Mascaró A, Cos MA, Morral A, Roig A, Purdam C, Cook J. Load management in tendinopathy: Clinical progression for Achilles and patellar tendinopathy. *Apunts Med Esport.* 2018; 53 (197):19-27

**KNOW PAIN KNOW GAIN**

# Moltes gràcies