

Understanding Back Pain

Pain Patterns

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There are different types of pain patterns associated with spine disorders. These patterns can be generally classified as regional pain, referred pain and radiating pain. All three patterns of pain can occur at the same time from a single cause.

Regional Pain

Regional pain tends to be a more intense form of pain localized to a small area. It is usually associated with inflammation and stimulation of nerve endings within the compromised tissue. The patient is usually able to describe the precise location of the pain. They are also able to point to the area, which assists the attending physician in his or her evaluation. One of the most common causes for regional pain in the back is facet syndrome. This syndrome can occur secondary to inflammation of one or more spinal joints. There is a pair of spinal joints along the posterior aspect of each spinal level.

Referred Pain

Referred pain is a type of pain perceived in an area distant from the area of primary tissue compromise or inflammation. This occurs due to the way the nervous system develops. The tissues in the area of referred pain are often not comprised. There are many conditions, which can refer pain to the spine. Disorders or diseases, which afflict the organs of the abdomen or pelvis typically, refer discomfort or pain to the back. This type of back pain can occur absence of any spine disease. For example, a symptomatic kidney stone will usually refer pain to an area near the low back.

A careful and thorough history and physical examination will help the attending physician determine the source of neck or back pain. Back pain can also refer pain to an area distant from the back such as the abdomen. A back problem could therefore mimic a problem elsewhere.

Radiating Pain

Radiating pain refers to pain which travels from one point to another with the pain being experienced throughout the entire extremity. It is characterized by a continuous pattern or jolting pattern of pain. This abnormal pain sensation is a type of neuropathic pain. The most common cause is nerve root compromise. For example, a spinal nerve in the low back, which is compressed and inflamed, often leads to a pattern of referred pain into the thigh or leg on the side of involvement. The more severe the nerve compromise, the more severe the pain intensity and the greater the distribution of radiation of the pain. Spinal nerve compromise may also be associated with other forms of sensory complaints such as numbness or tingling.

There are two primary types of CRPS, Type I, and Type II. Type I was previously known as reflex sympathetic dystrophy syndrome. This type occurs after an illness or injury, which did not result in direct nerve compromise, whereas Type II occurs secondary to direct nerve compromise or injury. The signs and symptoms of CRPS I and II vary widely in their presentations. The diagnosis is often one established after a thorough exclusion of other causes.

The reason CRPS develops cannot always be determined. It is mediated by the sympathetic nervous system. This is the part of the nervous system, which controls blood flow and regulates the sweat glands. Many cases of CRPS occur after a severe trauma to an extremity. The presence of a spine problem with nerve compromise may contribute to the development of CRPS in a limb that suffers a separate and distinct injury.