

Types of Pain

Pain

Nociceptive

Mixed

Neuropathic

Nociceptive/neuropathic

Somatic

Visceral

Neuralgic

Dysesthetic

(shooting, lancinating, electric pain, lasting seconds at a time, worst immediately at onset)

(Burning, gnawing, aching consistent/persistent pain)

(poorly localized, crampy, diffuse, deep pain)
→ From organ/cavity lining

Hyperpathic:

1st line tx:
carbamazepine (tegretol)

→ **Allodynia** (sustained pain due to constant non-painful stimulus)
→ **Hyperalgesia** (exaggerated pain due to normally non-painful stimulus)

1st line tx:
TCA's
(centrally modify how the pain is perceived)

Monitor regularly:
CBC + liver panel

If pt has all 3 kinds of neuropathic pain:
Give combination therapy: TCA's (for dysesthesia, Tegretol for neuralgia)

DDx of neuropathic pain

CNS:

→ Deafferentation: phantom limb, post-stroke, spinal injury
→ Complex regional pain syndrome

PNS:

→ Post-herpetic neuralgia
→ Trigeminal neuralgia
→ Neuroma
→ Neuropathy (diabetes, VitB12 deficiency, alcohol, toxins produced when in ICU or organ failure)

Deep
(focal but less well localized, dull, longer duration)

Superficial
(Well-localized, sharp, short duration)