

# Pain

Are you in a lot of pain every day? Have you had doctors tell you that “it’s all in your head” or “it’s just nerves”? If so, you’re not alone. Pain is often undertreated in women. The good news is that there are different ways to explain your pain so that you can get the help you need. There are also many things you can do to manage your pain and feel better.

## The truth about pain

Pain is a regular, if unwelcome, reality for many women, perhaps even more than it is for men. Most women have pain with menstruation at some point in their lives, and childbirth can be painful. Some common disorders of the female reproductive tract are painful. Also, painful autoimmune (aw-toh-ih-MYOON) diseases are much more common in women. To cope with their pain, women tend to use more approaches than men, such as learning about their condition, turning to others for support, and finding ways to relax more and manage stress.

Still, it can be hard for a woman to get help for her pain. Some doctors are less likely to give women painkillers because they think that women overstate the amount of pain they feel. Studies have shown that given the same amount of pain, men are less likely to report it than women. Men might feel they need to “tough it out.” But this doesn’t mean that the pain women are reporting isn’t real.

## Chronic pain

Women are more likely to have chronic pain conditions. Pain is chronic if it lasts



more than 3 months. Chronic pain can sometimes last years or even decades. Sometimes, pain is caused by injury or disease. In such cases lab tests show definite signs of injury or disease in an organ or other body part. In other chronic pain conditions, the pain can’t be traced to any specific disease or injury. The exact cause of the pain is unknown. In these cases, the chronic pain is the disease.

Whatever its cause, chronic pain can interfere with all aspects of your life. It can:

- make it difficult to work and interact with family and friends
- make you feel irritable and depressed
- make it hard to sleep
- make you lose interest in food and sex
- make you less inclined to get physical activity (as a result, you may gain weight, which can make some chronic pain problems worse)
- lead to dependency on narcotic painkillers or alcohol as a way of coping with chronic pain
- cause you to have the burden of many doctor bills that come from trying to treat it

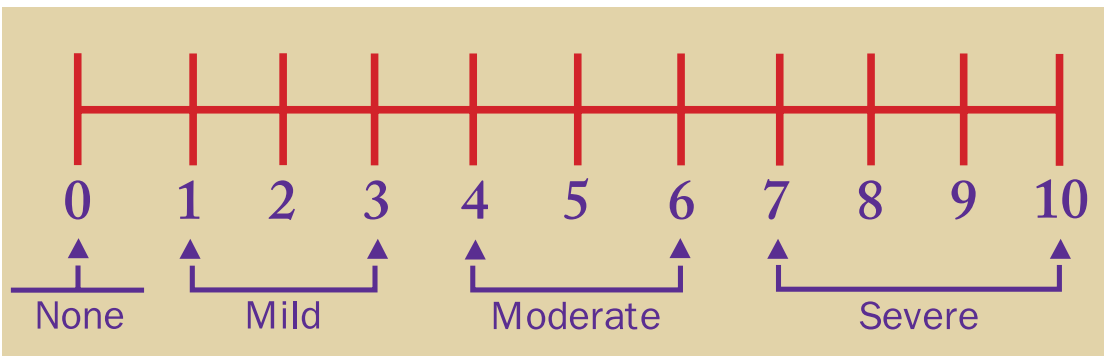
Chronic pain is different from acute pain, which is pain that lasts less than 3 months. Acute pain, such as pain from a cut, is closely linked to an injury, infection, or inflammation. Inflammation is the body's response to injury or irritation, signaled by pain, swelling, redness, and heat. When the cause of the acute pain goes away, so does the pain.

### Getting diagnosed

The first step in treating your pain is a diagnosis. During your first visit, your doctor will ask you questions about:

- when your pain started
- location of your pain
- how your pain feels (for instance, does it feel like a sharp stabbing pain, a steady burning, or a dull ache?)
- what makes your pain better or worse
- how the pain affects your activities of daily living (for instance, bathing, dressing, and eating)
- all of the medicines that you have ever used to treat your pain (both those that were prescribed by a doctor and those that you bought over the counter)
- any side effects you may have from these medicines

The doctor may also ask you questions to find out if you are depressed. Being depressed is quite common among patients with chronic pain. For some patients, though, the depression comes first. The chronic pain may be caused by or be part



YOUR DOCTOR MAY SHOW YOU A PAIN INTENSITY SCALE, SUCH AS THIS NUMERIC RATING SCALE, AND ASK YOU TO RATE YOUR PAIN ON A SCALE FROM 0 TO 10.

of the depression. In fact, many people who are depressed complain about pain problems, such as frequent headaches, back pain, or stomach pain, rather than depression. The only way your doctor can find out and treat your real problem is for you to answer your doctor's questions honestly.

### Managing your pain

Treatments for pain include:

- medicines
- physical therapies
- psychological and behavioral therapies
- complementary and alternative therapies
- surgery

To get a treatment plan involving a variety of approaches, you may want to try a pain clinic. These clinics have a team of therapists, including:

- doctors
- psychologists
- physical therapists
- complementary and alternative therapists (such as acupuncturists or massage therapists)

Together, the team will put together a pain management plan for you, often involving a combination of different treatments. If you do not have a pain clinic where you live, ask your doctor for referrals to therapists near you.

Because everyone is different, a treatment that works for one patient may not work for others. You may have to try a variety of treatments before you find one or more that work for you.

### Medicines

Medicines that reduce pain are called analgesics (an-uhl-GEE-ziks). They block the pain signals carried by nerves but do not cure the problem that is causing the pain. When an analgesic wears off, the pain often returns.

### Nonsteroidal anti-inflammatory drugs

Nonsteroidal anti-inflammatory drugs (NSAIDs) are a class of analgesics. They reduce pain and also reduce fever and inflammation. Common ones include:

- aspirin
- ibuprofen
- naproxen

When used once in a while, these drugs cause few side effects. But long-term use can irritate the stomach and intestines. NSAIDs other than aspirin also may increase the risk of heart attacks and stroke. Some of the NSAIDs may cause liver or kidney disease as well.

### Acetaminophen

Acetaminophen (uh-see-tuh-MIN-uh-fuhn) works in much the same way as NSAIDs but doesn't reduce inflammation.

Acetaminophen is less likely to bother the stomach than NSAIDs. But taking too high a dose of acetaminophen can damage your liver, especially if you drink a lot of alcohol.

### Opioids

Opioids (OH-pee-oids), or narcotics, are the most powerful pain medicines. Opioids commonly prescribed include morphine, methadone (METH-uh-dohn), and oxycodone (OKS-ih-KOH-duhn).

Opioid side effects include:

- nausea
- vomiting
- feeling drowsy
- difficulty having a bowel movement

If you take an opioid drug for more than a week or two (and, for some people, as little as a few days), you can become physically dependent on the drug. This means that you will have withdrawal symptoms when you stop taking the drug. Withdrawal symptoms include nervousness, diarrhea, and tremor, or shaking. Physical dependence on opioids is a normal response to taking the drugs and not something to be overly concerned about. Physical dependence is not the same as addiction.

Addiction to opioids means that you crave opioid drugs and feel driven to take them for reasons other than easing your pain. You spend a lot of time finding and taking the drugs and neglect your family, job, and other responsibilities. You may buy the drugs illegally and get into trouble with the law.

When taken properly, the chances of becoming addicted to opioids are low. But many doctors and patients are overly concerned about the risk of opioid addiction. As a result, patients are sometimes not given high enough doses of opioids and suffer pain needlessly.

Early research suggests that women's pain responds better than men's to a class of opioids called kappa opioids. This suggests that male and female brains handle pain signals in different ways. It also suggests that kappa opioids might

## Serious Side Effects of Methadone

Women are more likely than men to have serious side effects with methadone use. Call 911 or go to the nearest emergency room if you are taking methadone and get one or more of these symptoms:

- rapid, irregular pulse
- sensation of feeling the heart beat
- light-headedness or dizziness
- fainting
- shortness of breath
- chest discomfort or pain

be an option for women in pain who do not respond well to typical opioids. More research is needed in this area.

Researchers are also working on developing opioid medicines that hopefully will not be addictive and will have fewer side effects. Some of these are showing promise in research on animals. But none are yet available for use in humans.

### Antidepressants and anticonvulsants

Some medicines used to treat depression can treat some painful conditions, including migraine and tension headaches. In a way, this is not surprising, because we know that the part of the brain where pain is processed is also involved in depression.

Other medicines that can be used for treating certain types of pain are anticonvulsants. These medicines were developed to treat epilepsy. But they are sometimes useful for treating painful conditions caused by damage to the nervous system.

## Other therapies for pain

Your therapists may suggest nondrug treatments instead of or along with taking medicines. Not only do women use more nondrug therapies than men, women are more likely to respond well to them.

### Physical therapy

Many patients with chronic pain move as little as possible, thinking that physical activity will harm them. In fact, the opposite is true. When you get out of shape, your pain may become worse. If you have a chronic pain problem, a physical therapist can help you find a physical activity program that is gentle, moderate, and right for you. You should follow the program, even if you feel some pain during physical activity. In this case, the pain does not mean that you are harming your body.



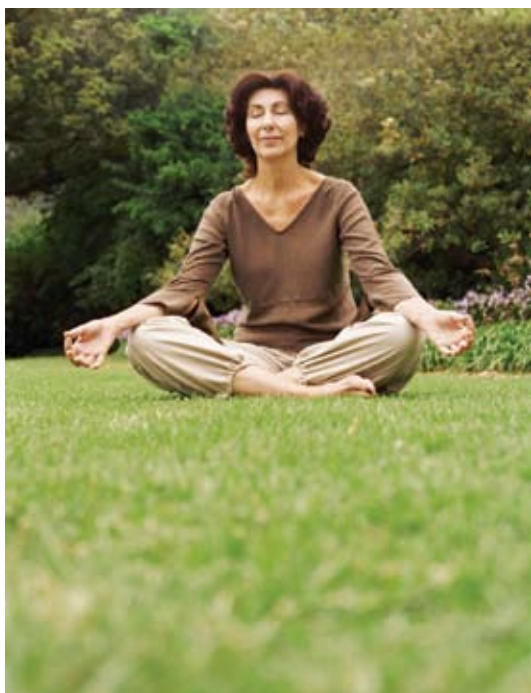
Types of physical therapy that may help your pain include:

- heat treatment—hot water baths, heating pads, high-frequency sound waves to produce gentle heat deep in your tissues
- cold treatment—ice packs, ice baths, ice massage
- gentle stretching
- muscle-strengthening physical activities
- massage—applying pressure to specific points on the body
- vibration therapy—a probe is applied to a part of your body with moderate pressure and vibrated several thousand times per second

### Nerve stimulation therapies

These therapies involve the use of low electrical currents and/or fine needles that are placed in specific parts of the body. Acupuncture is one example. These therapies seem to interfere with the sending of pain signals to the brain. They may also cause the body to release natural painkillers, called endorphins.





- **progressive muscle relaxation**—tensing and then relaxing muscles helps to ease muscle tension that may be adding to your pain
- **deep breathing exercises**—helps you to relax
- **guided imagery**—imagining a pleasant scene takes your mind off your pain
- **biofeedback**—electronic equipment tells you about your muscle tension, skin temperature, and other body functions, so you can learn to control these functions and reduce your pain

Pain can make depression worse, and depression can make your pain worse. So if you are in pain and also are depressed, you need to treat depression and pain at the same time.

### Psychological and behavioral therapies

Therapies that help you relax or change your thinking patterns can sometimes help you cope with pain. Examples of these therapies include:

- **cognitive therapy**—helps you to gain control over your pain by teaching you to recognize and change emotions that can make pain worse, such as anxiety, anger, and sadness

### Chronic pain disorders

Many chronic pain disorders common among women have no known cause. To diagnose your pain, your doctor will need to rule out other possible causes. This might take a long time. Once your pain is diagnosed, you can explore your treatment options with your doctor. Symptoms of some common disorders and their treatments can be found in this table.

Tension headache	
<b>Symptoms</b>	<ul style="list-style-type: none"> <li>• Tight band of pain around head</li> <li>• Tense muscles in back and neck</li> <li>• Often occur at times of high stress</li> <li>• Often go along with depression</li> </ul>
<b>Treatment</b>	<ul style="list-style-type: none"> <li>• Relaxation—taking a break from what you're doing and resting in bed</li> <li>• Biofeedback</li> <li>• Analgesics (usually NSAIDs)</li> <li>• Antidepressants</li> <li>• Stress management</li> </ul>

<b>Migraine headache</b>	
<b>Symptoms</b>	<ul style="list-style-type: none"> <li>• Throbbing pain that usually starts on one side of your head and then spreads</li> <li>• Light, sound, and physical activity can make pain worse</li> <li>• Nausea and vomiting</li> <li>• Aura (jagged, shimmering, or flashing lights or a blind spot with flickering edges) about 1 hour before the migraine begins</li> <li>• Tingling, balance problems, weakness in an arm or leg, problems talking</li> <li>• Sometimes goes along with depression</li> </ul>
<b>Treatment</b>	<ul style="list-style-type: none"> <li>• Avoiding migraine triggers</li> <li>• Medicines called triptans are good at stopping a migraine from progressing if taken when it is just beginning. (In very rare cases, triptans have caused heart attacks and death in healthy young women.)</li> <li>• Other over-the-counter and prescription medicines to provide pain relief or prevent migraines</li> <li>• Medicines to help nausea and vomiting</li> <li>• Biofeedback; relaxation training</li> </ul>

## Tracking Your Migraines

Migraine attacks often are brought on by triggers. Common triggers include:

- lack of food or sleep
- menstruation-related hormone changes
- stress and anxiety
- foods, such as chocolate, red wine, or aged cheese
- food additives, such as MSG (monosodium glutamate) or nitrates

Keeping a headache diary can help you to pinpoint any triggers you might have. You might be able to prevent future migraines by avoiding these triggers.

### Headache Diary

Date: \_\_\_\_\_

Pain location and type: \_\_\_\_\_

Other symptoms (aura, nausea, etc.): \_\_\_\_\_

Number of days into your menstrual cycle (Day 1 is the first day of your period.): \_\_\_\_\_

What was I doing when the migraine started? \_\_\_\_\_

Possible triggers: \_\_\_\_\_



A sudden, severe headache could be a sign of a stroke. For more information, see the *Stroke* chapter on page 37.

### Temporomandibular (TEM-puh-roh-man-DIB-yuh-lur) joint disorders (TMJ)

<b>Symptoms</b>	<ul style="list-style-type: none"><li>• Pain in the chewing muscles or temporomandibular joint(s), which connects your lower jaw to the bones on the side of your head</li><li>• Clicking, popping, or grating sounds in the joint when you open or close your mouth</li><li>• Limited movement or locking of the jaw</li><li>• Pain in the face or neck</li></ul>
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<b>Treatment</b>	<ul style="list-style-type: none"><li>• Eating soft foods</li><li>• Massaging painful muscles</li><li>• Moist heat or cold packs on the face</li><li>• Relaxation techniques</li><li>• NSAIDs or muscle relaxants</li><li>• Reducing stress</li></ul>
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### Complex regional pain syndrome

<b>Symptoms</b>	<ul style="list-style-type: none"><li>• Burning pain that often starts after an injury to a muscle, nerve, or other tissue</li><li>• Pain worsens over time even though injury has healed</li><li>• Pain spreads, often affecting an entire arm, leg, hand, or foot</li><li>• Affected area might also have:<ul style="list-style-type: none"><li>• changes in skin temperature and color</li><li>• changes in nail and hair growth patterns</li><li>• sweating</li><li>• swelling</li></ul></li></ul>
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<b>Treatment</b>	Treatment is aimed at relieving symptoms. Therapies include: <ul style="list-style-type: none"><li>• Physical therapy</li><li>• Psychotherapy</li><li>• Medicines, including antidepressants, opioids, and analgesics applied to the skin</li><li>• Injecting a drug that blocks the nerves thought to play a role in causing the pain</li></ul>
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### Chronic fatigue syndrome

<b>Symptoms</b>	<ul style="list-style-type: none"><li>• Long-lasting fatigue that doesn't get better with rest</li><li>• Flu-like symptoms, headache, sore throat, muscle and joint aches, and fever</li></ul>
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<b>Treatment</b>	<ul style="list-style-type: none"><li>• NSAIDs for the fever, headache, and body pain</li><li>• Antidepressants to improve sleep and mood</li><li>• Moderate physical activity</li><li>• Cognitive therapy to help you keep a positive outlook</li></ul>
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**Fibromyalgia (feye-broh-meye-AL-juh)**

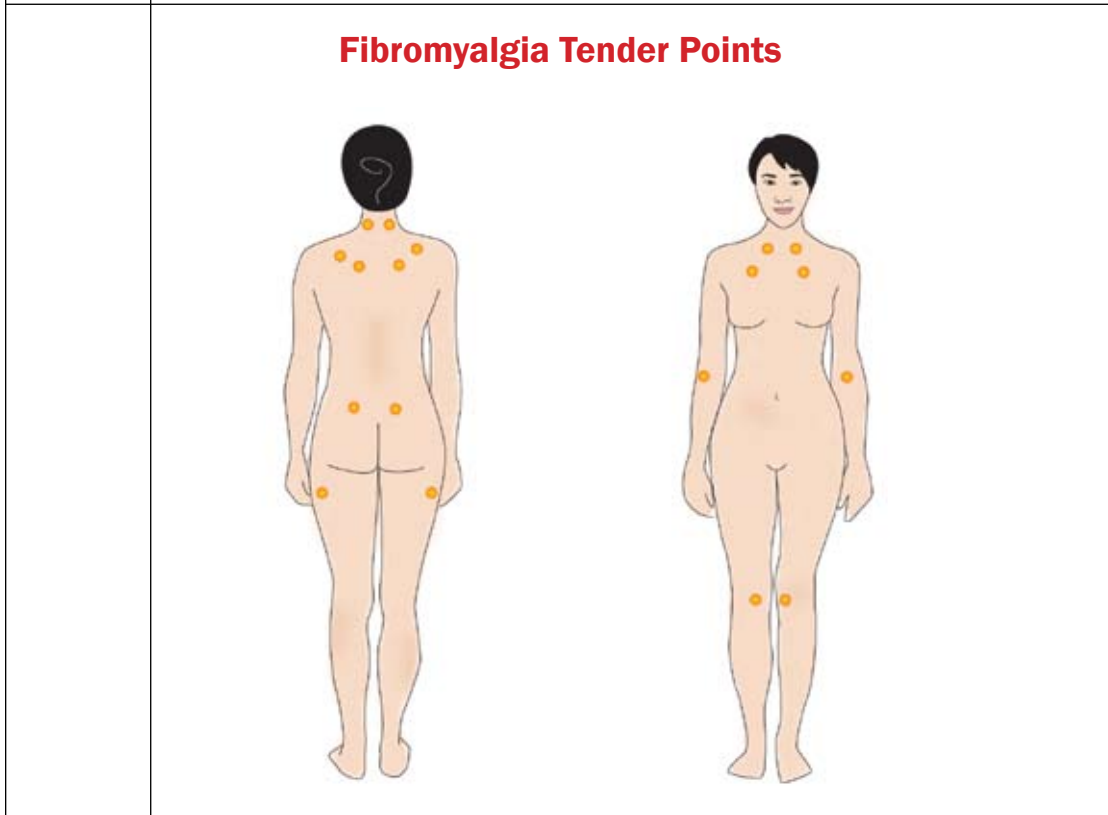
**Symptoms**

Main symptoms:

- Pain felt all over the body
- Tenderness or pain in at least 11 of 18 “tender points,” specific spots on the neck, shoulders, back, hips, arms, and legs

Other symptoms:

- Fatigue
- Trouble sleeping
- Morning stiffness



**Treatment**

- Pregabalin (pre-GAB-uh-lin) and other anticonvulsant medicines
- Sleeping longer and better by changing bedtime and sleep habits or using medicines to help you sleep
- Low-impact physical activity, such as walking or swimming
- Reducing stress
- Massage

If you have pain in your chest, this could be a sign of angina (an-JEYE-nuh) or a heart attack. For more information, see the *Heart Disease* chapter on page 15.

<b>Symptoms</b>	<ul style="list-style-type: none"> <li>• Pain and swelling in joints</li> <li>• Limited joint motion</li> <li>• Might be able to hear the sound of grinding bones</li> </ul>
<b>Treatment</b>	<ul style="list-style-type: none"> <li>• NSAIDs to reduce pain and swelling</li> <li>• Opioids</li> <li>• Moderate physical activity, such as swimming</li> <li>• Heat and cold treatments</li> <li>• Surgery to repair or replace damaged joints</li> <li>• Weight control</li> </ul>
<b>Symptoms</b>	<p>Symptoms begin gradually, starting with:</p> <ul style="list-style-type: none"> <li>• Numb or tingling sensation in first 3 fingers</li> </ul> <p>Over time, you might feel:</p> <ul style="list-style-type: none"> <li>• Burning, aching feeling in these fingers</li> <li>• Painful numbness in your palm</li> <li>• Shooting pain from your wrist into the forearm or fingers</li> <li>• Trouble moving your fingers</li> </ul>
<b>Treatment</b>	<ul style="list-style-type: none"> <li>• Wearing a splint to keep your wrist from bending</li> <li>• NSAIDs to reduce pain and swelling</li> <li>• Surgery</li> </ul>

### Injury-related pain

If you have experienced a serious injury, such as a bone fracture or severe bleeding, consult a doctor as soon as possible. Also, consult a doctor if you have received a blow to your head that causes you to have one or more of the following:

- blurred vision
- slurred speech
- loss of memory
- loss of consciousness

If you have a minor injury, such as a sprained ankle, you can often treat the problem yourself with the classic RICE treatment:

- **R (rest).** Reduce or stop using the injured area for at least 48 hours. This will minimize bleeding and swelling.
- **I (ice).** Put an ice pack on the injured area for 10 minutes and then remove



it for 10 minutes. Keep this up for at least an hour and then repeat for as long as swelling and bruising continue.

- **C (compression).** Gently compress, or squeeze, the injured area with an elastic bandage. Don't wrap the area so tightly that you cut off blood flow.
- **E (elevate).** Keep the injured area raised above the level of the heart to help decrease swelling. Use a pillow to prop up an injured arm or leg.

If RICE treatment does not help your injury, be sure to see a doctor.

### **Why do women have more pain disorders?**

Scientists don't know why women get more chronic pain disorders than men. But they have some theories:

#### **Women may be more sensitive to pain.**

In one research study, scientists looked at the pain responses of newborn babies. When nurses pricked their heels to get blood for a lab test, girl babies showed more pain on their faces than boy babies. This suggests that females may be more sensitive to pain than males right from birth.

In research studies with adults that look at normal pain responses, women usually report more pain than men. Women also have more sensitive pain reflexes. For instance, women pull their leg up sooner than men when increasingly greater electric shocks are applied to a nerve in the foot.

Research has shown that women become more sensitive to pain after repeated ex-

posure to painful stimuli than do men. Some think that a lifetime of painful experiences, such as painful periods, may make a woman's nervous system more sensitive to pain. As a result, sensations that normally would not be felt as painful are in some women. This might explain disorders such as fibromyalgia, in which pain is felt all over the body.

#### **Female sex hormones may help cause pain disorders.**

Pain disorders seem to be related to sex hormone levels in many women. For instance, after puberty, when sex hormone levels rise, girls start to have more migraines than boys. But other painful conditions, such as joint pain, don't become more common in women until after menopause, when sex hormone levels drop. It's not clear yet which hormones affect pain and, if they do, how they affect pain.



### If you're in pain

No matter why women have more painful disorders than men, the fact is that they do. If you're in pain and you're not getting the help you need from your doctor, feel free to switch doctors. If your health plan doesn't allow you to switch doctors or you live in an area where there aren't any other doctors, then you need to speak up for yourself to get the treatment you need.

No woman should be told that her pain isn't real or not severe enough for treatment. You deserve to live your life as pain-free as possible. ■



Other disorders involving pain are discussed throughout the book:

<b>Disorder</b>	<b>Chapter</b>
Irritable bowel syndrome .....	Digestive Health
Interstitial cystitis .....	Urologic and Kidney Health
Lupus .....	Autoimmune Diseases
Multiple sclerosis .....	Autoimmune Diseases
Scleroderma .....	Autoimmune Diseases
Rheumatoid arthritis .....	Autoimmune Diseases
Painful reproductive disorders, including vulvodinia, endometriosis, and uterine fibroids .....	Reproductive Health

# One Woman's Story

**I**n 1996, I accepted a position as the transportation planning manager for the City of Alexandria, Virginia. Living and working in the Washington, DC, area was a dream I had held dear for many years.

Most of my life I had suffered with migraine headaches, often going to the emergency room for treatment. My headaches became worse, and I found myself struggling to keep up the pace. The doctors I consulted gave me a variety of reasons for my pain, from allergies to the pollution to a lung infection. After a year, I realized I had to make a change to improve my health, and I left my dream job for a rural area without pollution.

The next few years I struggled not only with fatigue, but widespread pain, stiffness, and noticeable cognitive issues.

I finally had to move back to my home in Shreveport, Louisiana. After spending three months in bed, I was diagnosed with fibromyalgia in January 2001. I was barely able to get up for meal preparation and necessary household duties. Obviously, I was no longer able to work.

It took years of navigating the insurance issues and multiple therapies before I found a doctor whose eyes did not glaze over when I mentioned fibromyalgia. He believed the symptoms of fibromyalgia were real, and he even conducted research to help his patients.

Since 2004 I have been taking a medicine that has lessened my pain levels and diminished the fatigue to a point that I have a quality lifestyle. I also now understand what is happening to my body to cause the many symptoms caused by fibromyalgia.

*Berenda*

**Shreveport, Louisiana**

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**The doctors I  
consulted gave me  
a variety of reasons  
for my pain...**

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## For More Information...

### **Office on Women's Health, HHS**

200 Independence Ave SW, Room 712E  
Washington, DC 20201

Web site: [www.womenshealth.gov/faq/carpal.htm](http://www.womenshealth.gov/faq/carpal.htm)

[www.womenshealth.gov/faq/migraine.htm](http://www.womenshealth.gov/faq/migraine.htm)

Phone number: (800) 994-9662,  
(888) 220-5446 TDD

### **National Institute of Arthritis and Musculoskeletal and Skin Diseases, Information Clearinghouse, NIH**

1 AMS Circle

Bethesda, MD 20892-3675

Web site: [www.niams.nih.gov](http://www.niams.nih.gov)

Phone number: (877) 226-4267,  
(301) 565-2966 TTY

### **National Institute of Neurological Disorders and Stroke, NIH**

PO Box 5801

Bethesda, MD 20824

Web site: [www.ninds.nih.gov](http://www.ninds.nih.gov)

Phone number: (800) 352-9424,  
(301) 468-5981 TTY

### **NIH Pain Consortium**

Bethesda, MD 20892

Web site: [http://painconsortium.nih.gov/pain\\_index.html](http://painconsortium.nih.gov/pain_index.html)

### **American Chronic Pain Association**

PO Box 850

Rocklin, CA 95677

Web site: [www.theacpa.org](http://www.theacpa.org)

Phone number: (800) 533-3231

### **American Pain Foundation**

201 North Charles St, Suite 710  
Baltimore, MD 21201-4111

Web site: [www.painfoundation.org](http://www.painfoundation.org)

Phone number: (888) 615-7246

### **The Chronic Fatigue and Immune Dysfunction Syndrome Association of America**

PO Box 220398

Charlotte, NC 28222-0398

Web site: [www.cfids.org](http://www.cfids.org)

### **Fibromyalgia Network**

PO Box 31750

Tucson, AZ 85751-1750

Web site: [www.fmnetnews.com](http://www.fmnetnews.com)

Phone number: (800) 853-2929

### **National Headache Foundation**

820 N Orleans, Suite 217

Chicago, IL 60610

Web site: [www.headaches.org](http://www.headaches.org)

Phone number: (888) 643-5552

### **National Pain Foundation**

300 E Hampden Ave, Suite 100

Englewood, CO 80113

Web site: [www.nationalpainfoundation.org](http://www.nationalpainfoundation.org)