



# Pain

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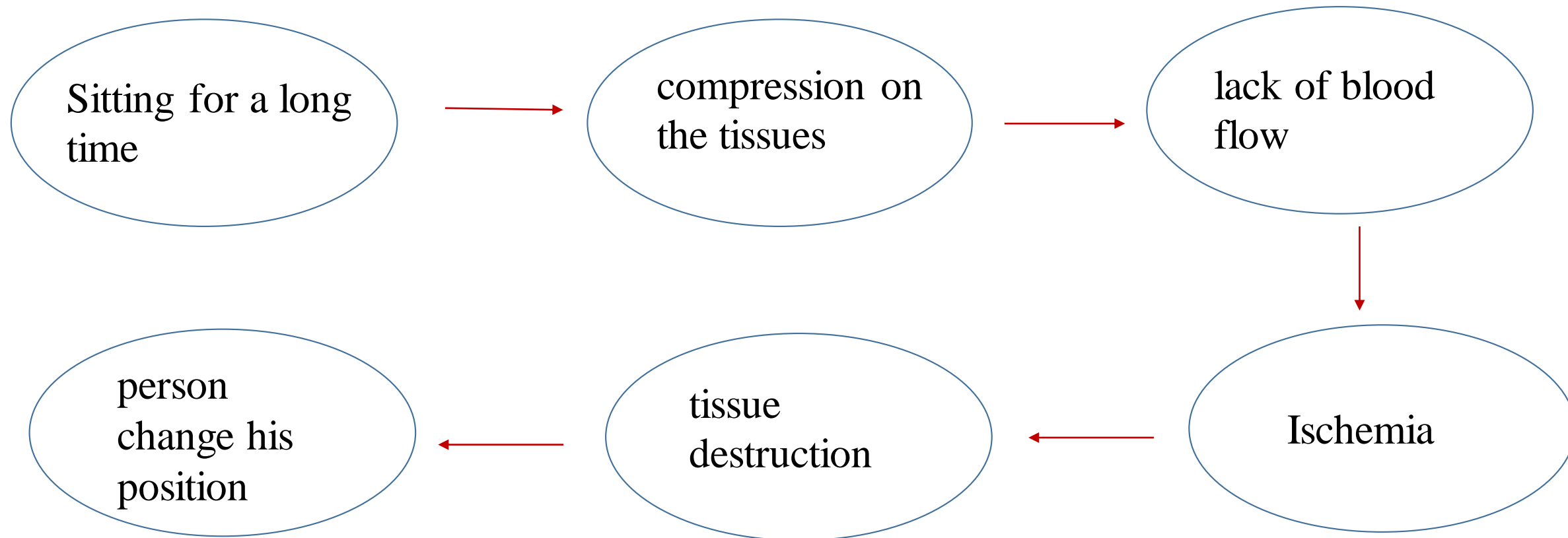
# Objectives

1. What is pain?
2. Types of painful stimuli.
3. Pain receptors
4. Nerve fibers that transmit pain signals.
5. Classification of pain
6. Pain analgesia system

Pain is a protective mechanism which occurs when tissues being damaged.

In response to:

1. Painful stimuli
2. Even by simple activation , like sitting , in sitting in the same position for a long time.



# Painful stimuli

## 3 Types of Stimuli

- . Mechanical
- . Thermal
- . Chemical

## How these Stimuli Produce pain??



pain receptors

Are all free nerve endings  
They are widespread in the  
superficial layers of the skin  
as well as in certain internal  
tissues

# Three Types of pain receptors

## 1. Mechanical nociceptors

Strong pressure (e.g from a sharp object)

## 2. Thermal nociceptors

Skin temperatures above 45c

Severe cold

## 3. Chemically sensitive nociceptors

Various agents like bradykinin , histamine, high acidity and environmental irritant.

# Classification of pain

## **Fast pain :**

**Bright, sharp localized pain.**

Plays an important rule in making the person react immediately to remove himself or herself from the stimulus.

## **Slow pain :**

Painful stimuli followed by a dull intense, diffuse, and unpleasant feeling ( slow (chronic) pain)

Tends to become greater overtime and makes the person keep trying to relieve the cause of the pain .



## Fast pain

- Mechanical, thermal nociceptors
- Type A $\delta$  fibers
- Neurotransmitter: Glutamate.

## Slow pain

- Mechanical, thermal, chemical
- Type C fibers
- Neurotransmitter is : substance p

### Nerve fiber types in mammalian nerve.<sup>a</sup>

Fiber Type	Function	Fiber Diameter ( $\mu\text{m}$ )	Conduction Velocity (m/s)
<b>A</b>			
$\alpha$	Proprioception; somatic motor	12–20	70–120
$\beta$	Touch, pressure	5–12	30–70
$\gamma$	Motor to muscle spindles	3–6	15–30
$\delta$	Pain, cold, touch	2–5	12–30
<b>B</b>	Preganglionic autonomic	<3	3–15
<b>C</b>			
Dorsal root	Pain, temperature, some mechano-reception	0.4–1.2	0.5–2
Sympathetic	Postganglionic sympathetic	0.3–1.3	0.7–2.3

<sup>a</sup>A and B fibers are myelinated; C fibers are unmyelinated.

# Pain also classified in to

- Superficial pain
- Visceral pain
- Deep pain

# Deep pain

- Come from deep tissues like fascia, muscles and bones
- There is little rapid , bright pain , because of relative deficiency of A delta nerve fibers in deep structures.
- Deep and visceral pain are poorly localized , nauseating, and frequently associated with sweating and changes in blood pressure

# Visceral pain

- Come from the viscera of the body
- Poorly localized unpleasant and associated with nausea and autonomic symptoms
- Visceral pain often radiates or is referred to other areas.
- Highly **localized** types of damage to the viscera seldom cause severe pain.(surgeon can cut the gut entirely)
- Conversely, any stimulus that causes **diffuse** stimulation of pain nerve endings throughout a viscous causes severe pain e.g ischemia.

# Nociceptors

- a. Can be activated by strong pressure, severe cold, severe heat and chemicals
- b. Are specialized structures located in the skin and joints only.
- c. Are innervated by Type B nerve fibers
- d. All of the above

# Referred pain

A person feels pain in a part of the body that is fairly remote from the tissue.

- Best known examples:
  1. Referred of cardiac pain to the inner aspect of the left arm
  2. Pain in the tip of shoulder caused by irritation of the central portion of the diaphragm

# Mechanism of referred pain

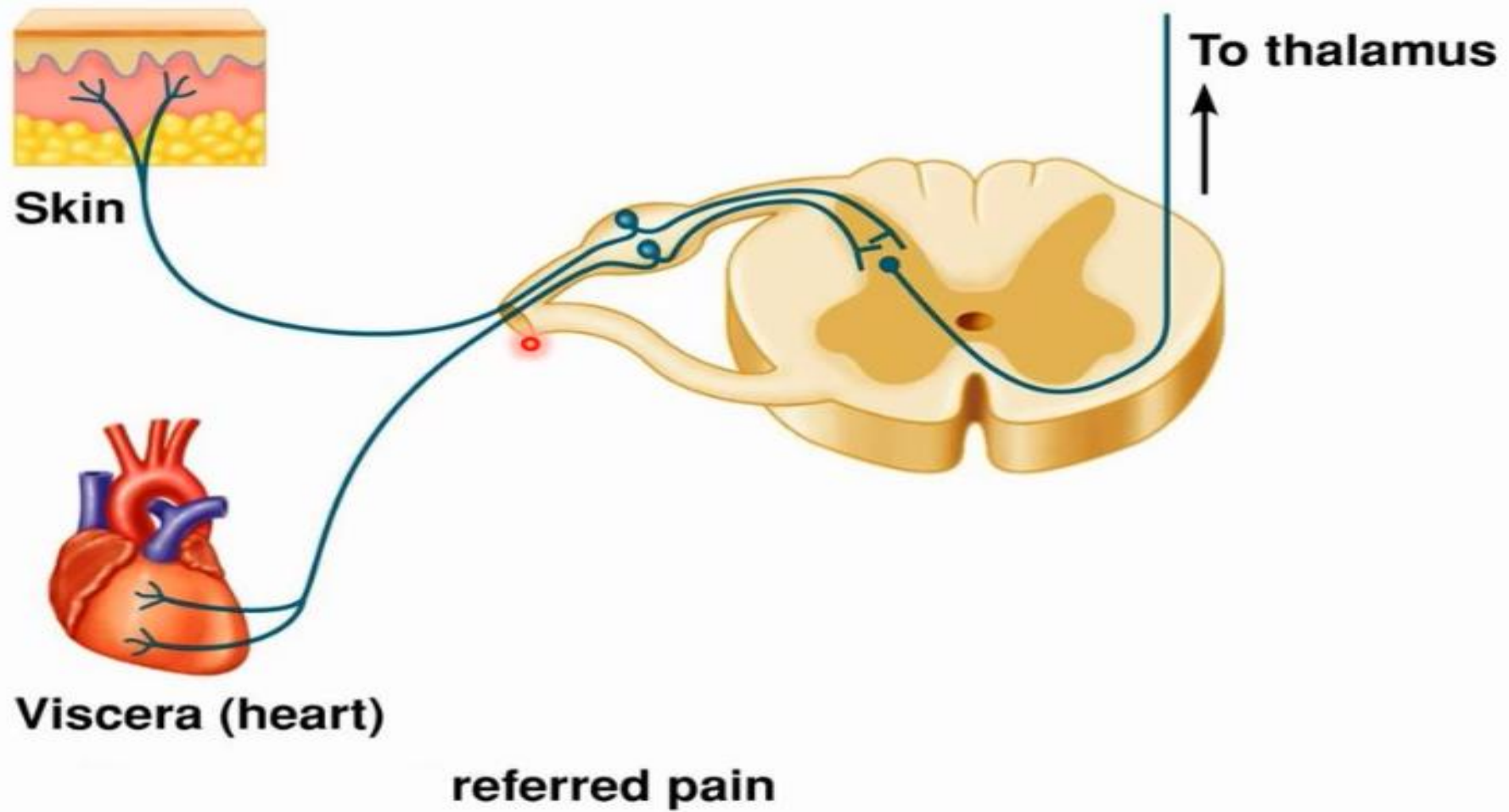
The Dermatomal rule:

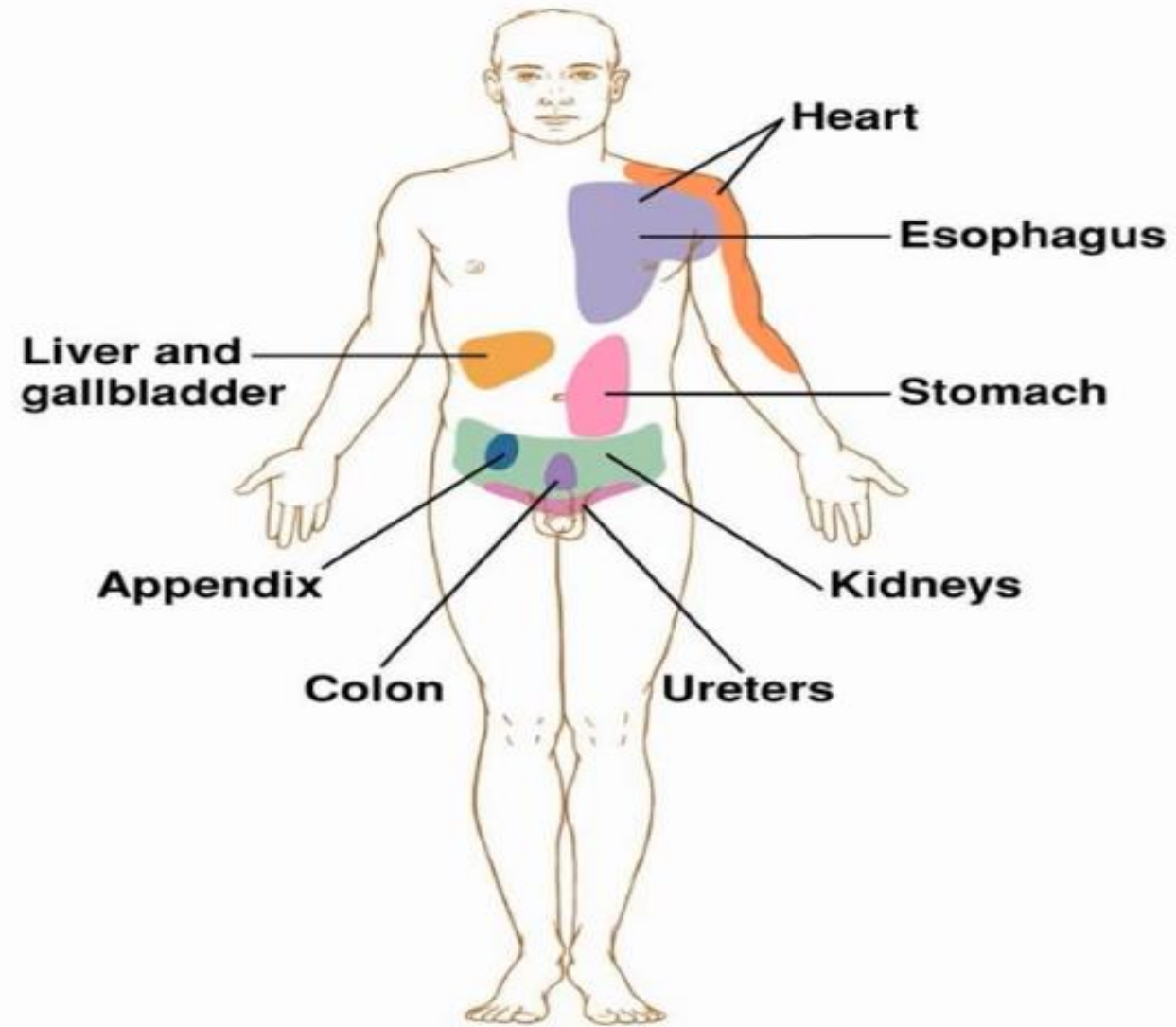
Pain is referred to structures that developed from the same embryonic segment or dermatome.

Convergence\_ projection theory:

Convergence of somatic and visceral pain fibers on the same second order neurons.



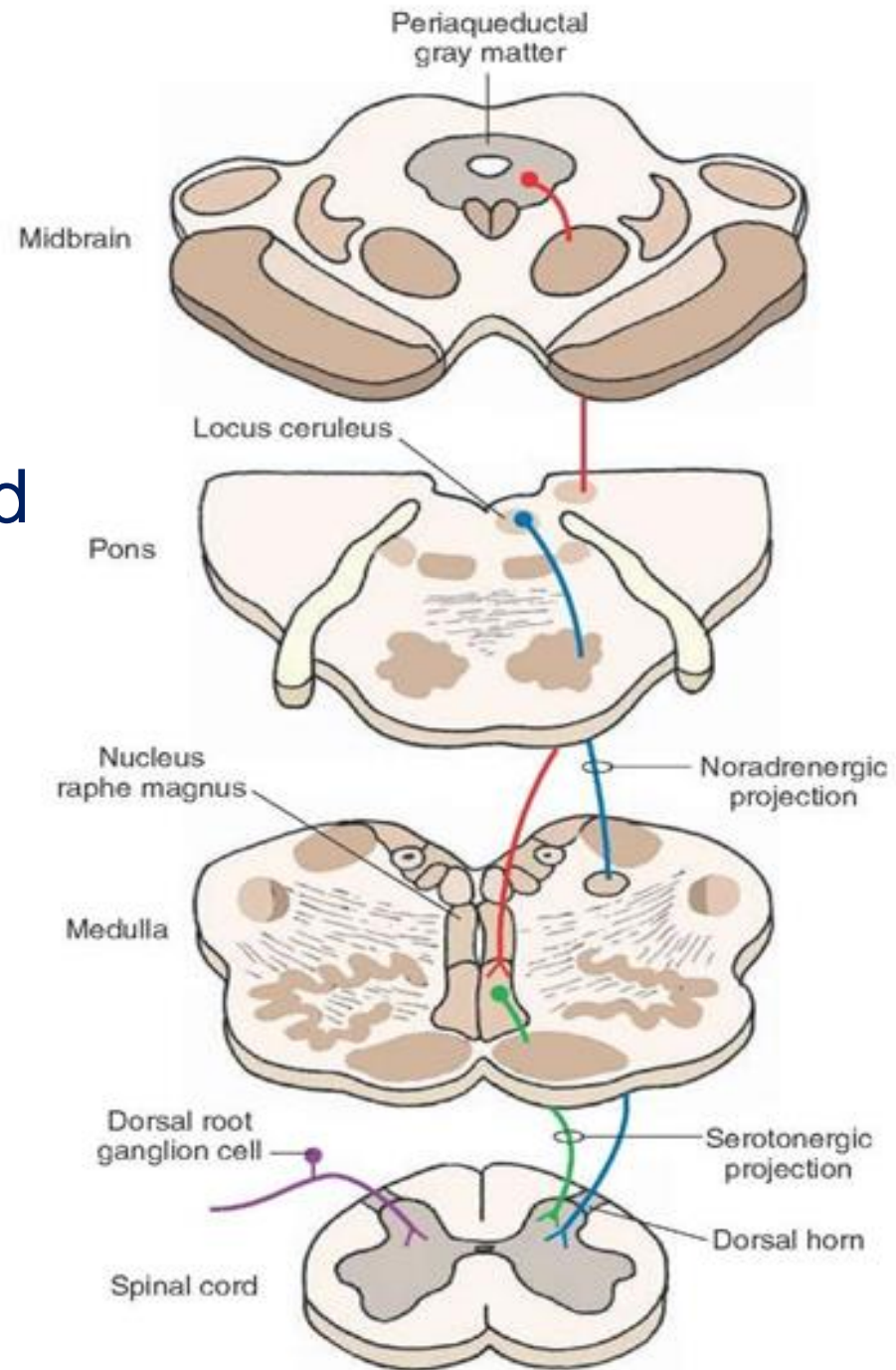




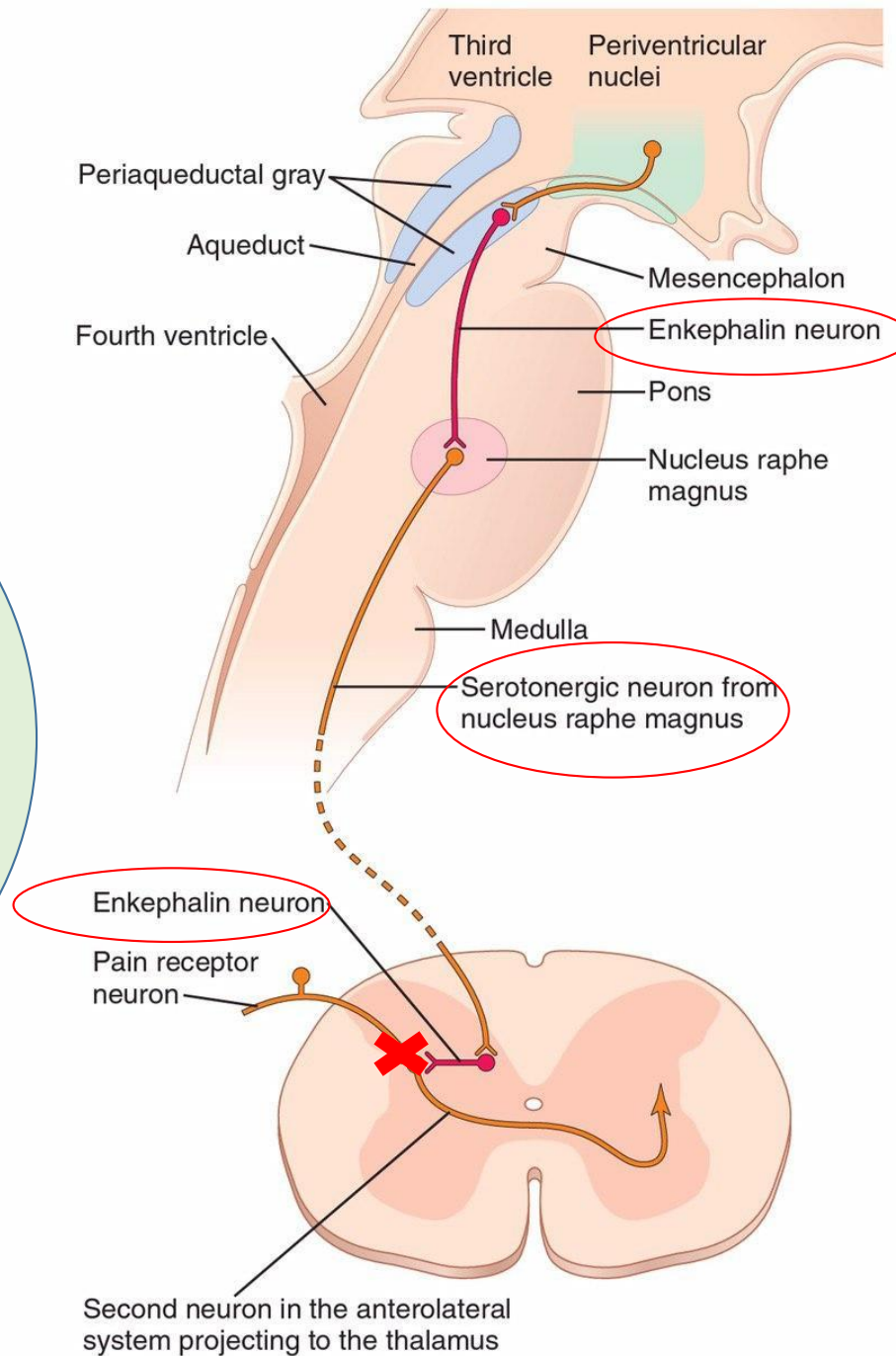
**Clinical map of referred pain**

# Analgesia System

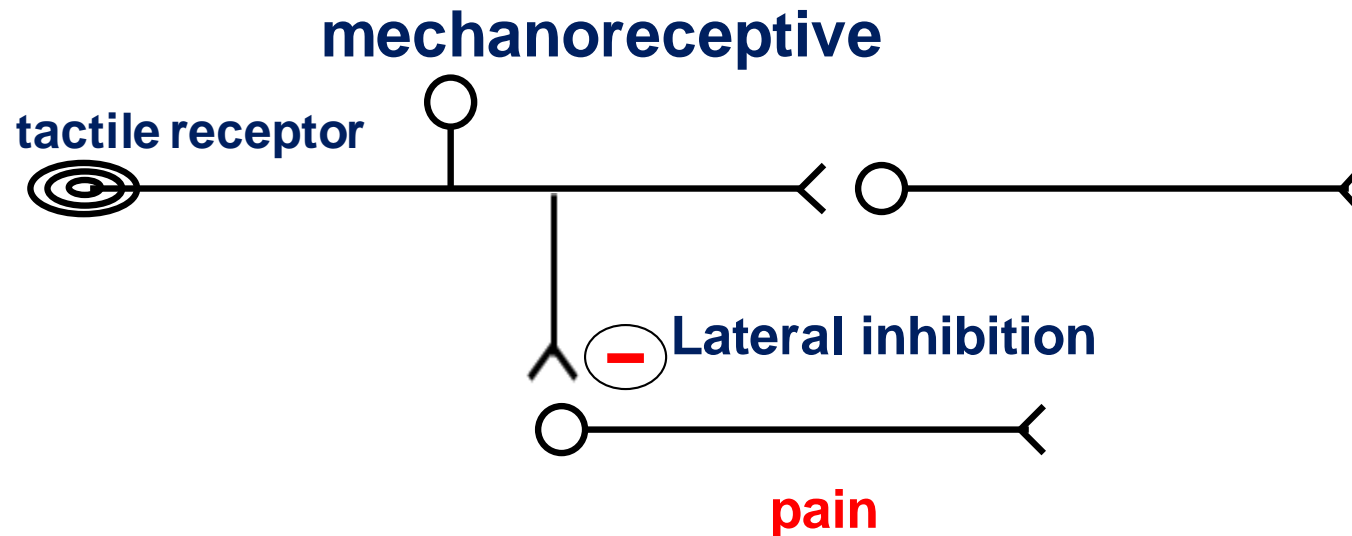
1. Periaqueductal gray and periventricular areas
2. Raphe Magnus nucleus and nucleus reticularis paragigantocellularis
3. Pain inhibitory complex



**Enkephalin  
cause inhibition  
of incoming  
type C and type  
A  $\delta$  pain fibers**



# Inhibition of Pain Transmission by Simultaneous Tactile stimulation



# Some Clinical Abnormalities

## Hyperalgesia

an exaggerated response to a noxious stimulus

## Allodynia

a sensation of pain in response to a stimulus, that dose not normally elicit pain.

Thank You