

Pain Relief: The Designer Dose

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Author's Note: Each patient education article in this column is written to your patients and potential patients. It draws on research documented in *Somatovisceral Aspects of Chiropractic: An Evidence-Based Approach*, co-edited by Marion Todres-Masarsky, DC. Whenever possible, I have updated the material from the textbook with more recent research findings.

Many articles have been written warning of the side effects of painkilling drugs. In my opinion, more has to be written about the primary effects of these drugs. The following patient education article is an attempt to do just that. Please feel free to use it on your bulletin board, for lay lectures and in your practice newsletter.

Most patients come to us initially for pain relief, even though chiropractic care does not include the prescription of painkilling drugs. In fact, doctors of chiropractic generally recognize that pain as such is not a pathological condition. Pain is nature's way of elevating your awareness of an at-risk body part, so you can avoid injuring it or worsening an injury that's already there.

Of course, once your pain is sufficient to remind you to protect the body part at risk, further pain can only cause you suffering. It has long been theorized that such unreasonable pain indicates something has thwarted the body's natural defenses. An ancient Greek philosophical teaching holds that Nature normally keeps pain within reasonable limits: "Pain does not dwell continuously in the flesh. Extreme pain is present but a very brief time."¹ Modern research has confirmed that the body has a complex array of natural defenses against unreasonable pain.

When the nervous system is working to its optimal degree, a collection of natural painkillers is deployed to suppress pain to just the right degree to enable you to function without totally shutting off the pain "alarm" that protects you from further injury. Some of these internal painkillers are chemically similar to opium; they are called endogenous opiates.² These internal painkillers include enkephalins and endorphin. These opiates are stored within tiny packets in certain specialized nerve cells (neurons). They might be released into the blood circulation, or they might be released directly onto a pain-generating neuron. The ability of your body to raise or lower the opiate dose in microscopic increments allows for exquisitely fine moment-to-moment control of your pain levels - just enough pain to prevent further harm, and just enough relief to reduce your suffering to tolerable levels.

In addition to the opiates, other compounds play certain roles in your pain management circuitry (including serotonin, norepinephrine, gamma aminobutyric acid and glycine). Like the opiates, these compounds are stored in microscopic packets within specialized neurons, allowing for a fine-tuned "designer dose" of pain relief.

Unfortunately, the same spinal misalignments or restrictions (subluxations) that can cause back pain, neck pain, headaches and the other ailments which bring most patients to a doctor of chiropractic also can create neurological disturbance. In other words, the same subluxation that

generates pain also might disturb the circuitry capable of relieving that pain.

While the chiropractic adjustment primarily is intended to speed up the healing of a subluxation, thereby correcting the cause of the pain, there also can be a more immediate effect. Patients sometimes notice a reduction in their pain levels immediately after an adjustment. Injured tissue cannot heal that quickly; therefore, this immediate effect would seem to represent improved function of the patient's pain-control circuitry. Indeed, there is preliminary research evidence indicating possible enhanced function of the endorphin pain-control system following a chiropractic adjustment.^{3,4}

Of course, many people believe that if a little pain relief is good, more pain relief is better. Now that many drug stores offer 24/7 convenience, it's no surprise people are attracted to the use of painkilling medication. You barely have to skip a beat in your daily schedule. However, killing your pain is like silencing your smoke alarm. Inadequate levels of pain allow you to unwittingly injure yourself. This can lead to increased dependence on pain-killing drugs, in turn leading to further injury. A vicious cycle can be established. This is one of the many reasons why it's a good idea to heed the directions on the labels on most painkilling drugs; directions that usually instruct you not to take them for more than 10 days without medical supervision.

Pain, like any sensation, has a normal level between extremes. A person in constant pain is unable to function normally. On the other hand, a person rendered insensitive to pain is vulnerable to injury. Too much or too little sensory function is abnormal.

While painkilling medication is convenient, and the temporary relief provided by such drugs is often welcome, it can never offer the safety of the designer dose of pain relief offered by your own body. The chiropractic adjustment does not shut off pain. It simply removes interference, so your nervous system can take care of pain relief, tissue repair and all the other jobs it was designed to do.

References

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