

The Relationship between Spiritual Consciousness and Pain

¹Aik Teng Heng, ¹May Ho Leong

¹Faculty of Health and Life Sciences, INTI International University, Persiaran Perdana BBN,
71800, Nilai, Negeri Sembilan, Malaysia

***Email:** ¹aikteng.heng@newinti.edu.my, ²mayho.leong@newinti.edu.my

Abstract

According to the book Yellow Emperor's Internal Classic (Huang Di Nei Jing) of Traditional Chinese Medicine record that sensation is related to spiritual consciousness. Pain is also a kind of sensation, which can be transferred or alleviated by regulating mental consciousness, thus providing clinical guidance for the treatment of painful diseases. Various research data are cited to support this point. According to the discussion, if more people around the patient participate in calming the patient, it may have a better effect.

Keywords

Pain, spiritual consciousness, Traditional Chinese Medicine

Introduction

The definition of pain by International Association for the Study of Pain (IASP): “An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue” (Williams & Craig, 2016). This suggests that pain is a subjective feeling and difficult to evaluate objectively. Pain over a long period of time call chronic pain, can cause insomnia, anxiety, depression and even loss of hope in life (Yang 2015). Significant positive associations were found between chronic pain and individual 12-month mood and anxiety disorders (McWilliams LA, 2009), it is found that the prolonged period of pain can affect emotion. The research team of Hokkaido University has identified the brain mechanism of chronic pain causing depression (Takahashi D, 2019), make it clear that the brain is where pain and emotions are generated. Therefore, anxiety may be an important concomitant symptom in the development of chronic pain, which may lead to increased pain level and affect the development of patients' condition worsened.



Classification of Pain

Pain is generally classified based on pathophysiological, aetiological, anatomical and duration of pain. (WHO guidelines, 2012)

Pathophysiological classification	manifestation
Nociceptive	Nociceptive pain consists of somatic and visceral pain; it arises when tissue injury activates nociceptors, which are sensitive to noxious stimuli such as heat, cold, vibration, stretch stimulation, tissue disruption and inflammation.
Neuropathic	Neuropathic pain is caused by structural damage and nerve cell dysfunction in the nervous system. In addition, nerve compression or persistent abnormal pain signals lead to neuropathic pain.
Nociceptive pain	Pain that arises from actual or threatened damage to non-neural tissue due to the activation of nociceptors.
Visceral pain	Ailments such as gallstones, acute pancreatitis, acute appendicitis, and diverticulitis are the most common reasons for visits to outpatient and inpatient gastrointestinal (GI) clinics, but visceral pain may also include chronic chest pain, bladder pain, gynaecological pain, and pelvic pain. Pain can also be classified based on duration of pain: acute or chronic and cancer or non-cancer.
Neuropathic Pain	Pain that arises as a direct consequence of a lesion or diseases affecting the somatosensory system.

Discussion

Chronic pain is one of the clinical diseases, with a wide range of ages. It is often caused by persistent pain or recurrent episodes that cause anxiety, depression and other emotions. According to the TCM book Huangdi Neijing, All pains, itches, sores, all belong to the heart. In Traditional Chinese medicine theory, the heart represents the highest command of spiritual consciousness. Optimistic and stable emotions have a certain relationship with pain. Many studies have shown that pain and bad emotions are related to the mind. There is a coexistence relationship between the two. According to the theory of Chinese medicine, pain can be effectively relieved by reducing the influence of bad emotions.

After a long period of pain, because the patient's physical activities was not affected, the patient who complained of pain for countless times could not be understood by his family. The patient is pessimistic because it is not understood by family member. Relieving pain can help improve the patient's negative emotions. Assist the patient's mental awareness to maintain a positive status, which can maintain a more positive emotional to reduce pain.

Conclusions

Good communication is one of the ways to improve anxiety. By understanding the patient's pain, the patient can increase their trust in the doctor, thereby relaxing their emotions and improving anxiety. Explain and respond to the patient's description, so as to gain the patient's approval and perform treatment. Adequate communication can also improve patient compliance and improve clinical efficacy. The clinical challenge is TCM doctor insufficient time to calm the mental consciousness of patients, such as one hour or more on individual patients.

References:

- Williams, Amanda C. de C.; Craig, Kenneth D. (2016)Updating the definition of pain. *PAIN*, 157(11), 2420-2423.
- Yang Hailong, Xiang Xiaoping, Cao Qiuyun.(2015) Investigation and intervention on the quality of life of patients with chronic pain. *Jiangsu Medicine*, 41(23): 2887-2889.
- WHO guidelines on the pharmacological treatment of persisting pain in children with medical illness. (2012).
- Schrader SL, Nelson ML, Eidsness LM. (2009)“South Dakota’s dying to know”: A state wide survey about end of life. *Journal of Palliative Medicine*. ; 12(8):695–705.
- McWilliams LA, Cox BJ, Enns MW.(2003)Mood and anxiety disorders associated with chronic pain: an examination in a nationally representative sample. *Pain*. ;106:127–133.
- Takahashi D., Asaoka Y., Kimura K. et al.,(2019) Tonic suppression of the mesolimbic dopaminergic system by enhanced corticotropin-releasing factor signaling within the bed nucleus of the stria terminalis in chronic pain model rats. *The Journal of Neuroscience*, 39(42):8376–8385