

Are We Shifting Towards an Era of Chronic Orofacial Pain?

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Editorial

One of the common reasons for a patient's visit to the doctor is pain. It has been rightly quoted by Sir Welden Bells that "Pain is far more than a simple sensation; it is an experience" [1]. As it is not just the physical causes which results in the activation of nociceptive impulses, there are emotional causes too which results in pain.

Dealing with acute pain is easy as the etiology of pain is clearly identifiable. But the same doesn't hold true for chronic orofacial pain. As the patient with chronic pain reports with pain in the structures that appear normal making diagnosis and management much more difficult.

Moreover, Chronic Orofacial Pain (COFP) disorders involve dysfunction in multiple systems: Musculoskeletal e.g. Temporomandibular Joint Disorders, Vascular e.g. Giant cell arteritis, Neurovascular e.g. Migraine, Neuropathic e.g. Trigeminal neuralgia, Eagle syndrome, Idiopathic e.g. Burning Mouth Syndrome and Psychogenic. Hence even a single COFP disorder can present with a range of clinical features, which makes it difficult for the clinician to determine the exact cause of pain [2].

It has been found that the prevalence of chronic orofacial pain is increasing day by day. The four basic reasons for which a dentist is responsible for this chronic nature of pain are [3]:

1. Improper diagnosis.
2. Improper treatment.
3. Excessive use of investigations.
4. Excessive use of medication.

Diagnosis is considered to be the key for successful management. Dentist must have accurate knowledge of pain problems arising from sources that are not oral or masticatory. Failing to give an appropriate diagnosis to the patient further increases its severity of pain.

Most of the times the patients complain are overlooked by the dentists when they can't determine the exact cause of pain, and they merely add that it is just psychological cause. Saying this is very easy but it has a dreadful effect on patients mind and thoughts. This being one of the chief reason for patient's chronic nature of pain.

"We should always try to understand patient's perspective of pain."

The treatment in most of the cases we provide is a supportive one, not a definitive one. That is, we just try to alleviate the patients pain by medications or so, rather than focusing on the cause of pain. Inappropriate treatment leads to no improvement in patient's condition and hence worsens the scenario.

As failing to get a clinical diagnosis, doctor uses multiple investigations rather than the indicative one which causes an added economic burden to the patient besides the concern of knowing the pain.

"Investigation should always follow the clinical diagnosis."

Use of medications to an extent is advisable, but excessive use of analgesics, antibiotics and other drugs without knowing the exact diagnosis is inappropriate. As the pain of the patient won't resolve and

moreover the systemic complications caused by these drugs, will have an additive effect on patient's concern about his/her pain.

*"Prevent the patient from getting affected by medication induced headache."*¹⁰

All these factors result in awful psychological impact on the patient. Not getting a diagnosis and relief from pain leads to thought of a having a terminal illness in the mind of the patient. Further trying to figure out the reason for their nature of pain makes them irresistible, stressed and depressed which further add to their severity and chronicity of pain.

Hence certain steps need to be taken to prevent us from entering the era of chronic orofacial pain:

- Referral to the concerned specialist for appropriate diagnosis and management.
- Focusing on the psychological thinking of the patient.
- Proper counselling of the patient regarding the disorder and probable outcome.
- Not to provide false beliefs to the patient.
- Avoidance of excessive use of medications.

Finally, to conclude "Some say Focus on 'Management rather than Diagnosis', many say focus on 'Diagnosis rather than Management', what I believe is focus on 'Etiology' rest all will be taken care by itself!"

References

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