

## All Pain Is Not The Same

Women experience chronic pain longer, more intensely and more often than men, according to a psychologist who works with both men and women dealing with diseases and conditions that leave them suffering. "Chronic pain affects a higher proportion of women than men around the world," said Jennifer Kelly, PhD, of the Atlanta Center for Behavioral Medicine.

Speaking at the 118th Annual Convention of the American Psychological Association, Kelly said the latest research offers interesting insights into how physicians and mental health providers can better treat women with chronic pain.

Pain is considered chronic when it lasts six months or longer and most medical treatment options have been exhausted. Chronic pain conditions that are more prevalent in women than in men include fibromyalgia, irritable bowel syndrome, rheumatoid arthritis and migraines, said Kelly, referencing the International Association for the Study of Pain's 2007-2008 report on pain in women.

Women are also more likely than men to experience multiple painful conditions simultaneously, which can lead to greater psychological distress and greater likelihood of disability, according to the report. Hormones may be to blame for these differences, said Kelly, who added that estrogen clearly plays a role in conditions such as migraines.

Rates of other painful conditions increase for girls as they pass through puberty, whereas rates for adolescent boys are stable or rise less steeply. "Pain perception does vary according to the menstrual cycle phases in women with chronic pain," said Kelly. "For example, temporomandibular [jaw] pain, or TMJ, is highest in the pre-menstrual period and during menses."

As for treating pain, studies have shown men and women experience different side effects of analgesic medications. There have also been studies into whether men respond better to opioid medications, but the findings are ambiguous at best, she said. However, research has shown that there are numerous factors involved in response to pain medications. "Genetic and hormonal differences may be the main reason for any differences, but it's becoming increasingly clear that social and psychological factors are also important," said Kelly.

In her practice, Kelly treats the social and psychological factors in dealing with patients with chronic pain. She has made many observations of how women handle pain differently than men. "Women tend to focus on the emotional aspects of pain," she said. "Men tend to focus on the physical sensations they experience. Women who concentrate on the emotional aspects of their pain may actually experience more pain as a result, possibly because the emotions associated with pain are negative."

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Kelly offered these tips for better treatment of patients with chronic pain, especially women:

- Encourage patients to take an active role in their treatment and in caring for themselves, such as eating well and getting exercise.
- Provide psychological support.
- Explore cognitive coping strategies.
- Offer relaxation and biofeedback training.

Depressed patients may also benefit from psychotropic medications, she said, but antidepressants should not serve as a replacement for psychological intervention. She advocated for cognitive coping strategies that work on changing the thoughts associated with the pain. "If women can see the pain as something that can be managed and something that they can work with, then they can make more positive modifications in their life and become more functional," she said.