

pain 9:63:Ib - Britannica -

major ref. in Nerves and Nervous Systems

neurophysiological bases:

analysis. diagnosis. burns. digestive system disorders.

endorphins. headache. human sensory reception.

joint injury. muscular exertion. relief during childbirth.

stimulation of pain spots. treatment. acupuncture.

drugs and drug action. neurosurgery. therapeutic agents.

philosophical aspects. Epicureanism. masochism. sadism.

Utilitarianism. view of Bentham. Socrates.

relation to torture.

for a list of related subjects see: Section 432

also: nociception

pain au chocolat - Wikipedia -

Viennoiserie pastry, cuboid of yeast-leavened laminated dough,
with one or two pieces of dark chocolate.

Note: these topics may or may not be related.

Shall we begin?

I. Invisible paint

There are very few experiences as universal as pain. Aside extreme cases, whether it is complete nociception absence, or all-consuming pain like Creta Kano's from one of Murakami's books, the pain, normal, regular kind of pain, is something the majority of us can understand.

The topic is well-researched, and is a basis of multiple very profitable enterprises. So,

why do I think I will be able to say something new

about pain?

The answer is simple. There are things I feel I absolutely have to say about pain, and I never ever heard people saying them.

In the first place, I wouldn't even start writing anything if a text like this one was among those I used for my personal research.

This is, of course, highly personal story. You might not find it relatable or relevant. But in this case, I hope you at least will find it eye-opening; the invisible paint of chronic pain just might get a tangible colour for you.

2. Intensity

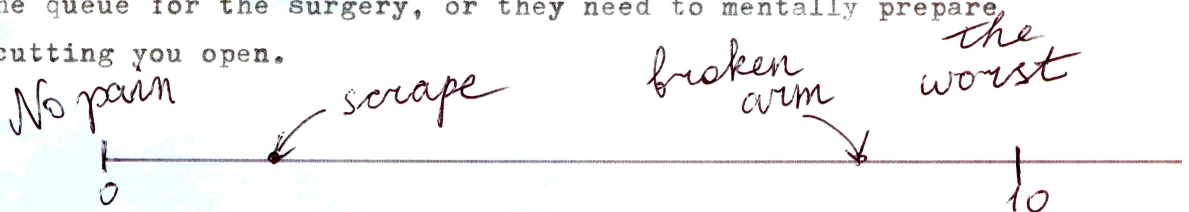
Pain, as an experience associated with damage to the body, can be described in terms of its magnitude. Being a subjective experience, it allows for two types of measuring scales: functional and relative.

A functional scale is helpful when you want to decide how urgently you need help.

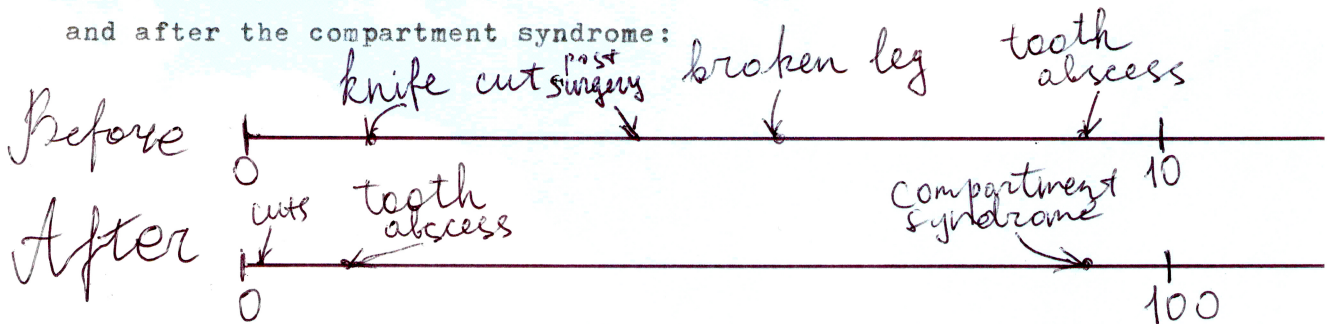


Anything beyond a "meh" face means your plans are going to be ruined. Hm, not a very helpful scale.

A relative scale takes your previous experience with pain into account, so **your doctor** can decide whether they can hold you in the queue for the surgery, or they need to mentally prepare for cutting you open.



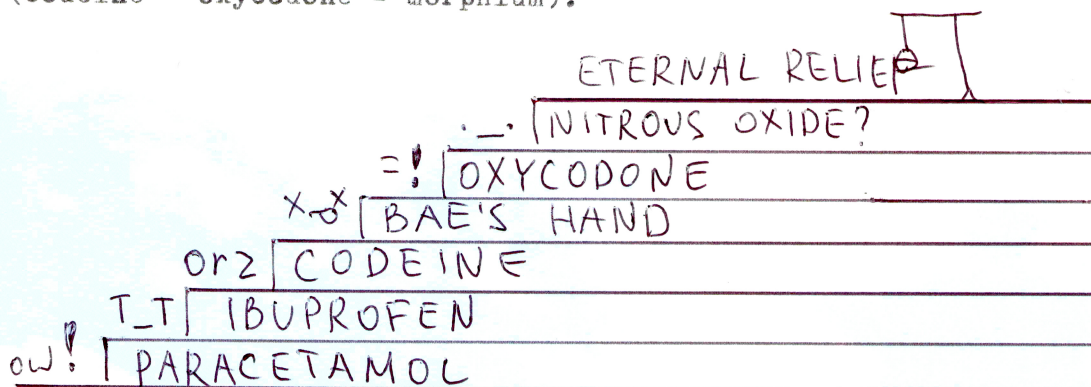
The relative scale is not without problems. Whether you are lucky or not defines your relative scale. Here is mine before and after the compartment syndrome:



3. Pain ladder

From a more practical point of view, pain can be measured by the measures taken against it. Anaesthesiologists call this "a pain ladder" - how many layers of pain-killers they need to bring a smile on their patient's face. Well, if not smile, then at least some sort of relief.

"Pain ladder" usually starts with a cheap common painkiller. Paracetamol, ibuprofen, aspirin are all surprisingly effective, and the one less likely to kill you is usually chosen first. When paracetamol alone is not enough, the next step is usually to add ibuprofen on top (or the other way around; again, providing that you have no counter-indications). When two regular painkillers are not enough, more and more painkillers are added on top of the "ladder" as next steps. When painkillers are of the same group, one gets replaced by a stronger version, if needed (codeine - oxycodone - morphium).



Walking up the ladder not only brings more relief, but also puts your life in more danger due to possible side-effects and medication interactions. A pretty sweet deal, eh?



4. Experience of pain

— One interesting aspect of pain that I hinted at a few times already is that it is an **experience**. Something that we **feel**. There is, undoubtedly, a huge neurophysiological component at play, but the fact that your bae holding your hand can offer as much relief as adding a bit of codeine on top of paracetamol surely makes one think, no?

It makes even more sense when you consider that many high-step painkillers are not actually reducing the pain. Consider this: some say that opioids for severe pain are like hot soup when you're cold. Consider this: a common dissociative anesthetic ketamine will do nothing about your pain, but you will be tripping so hard the pain will feel like it happens to someone else.

Consider this: if your meditation skills are advanced, you can learn to ignore the pain. Consider also this: a new sharp but less intense overall pain can overshadow dull but more intense pain.

Finally, consider this: the longer you live with pain, the more emotionally numb to it you will be.

The experience isn't limited to the pain one experiences in the moment, though. Our past experience with pain **also** affects our current experience. Humans commonly report that abrupt relief from pain is less desirable than prolonged but gradual. Funny, right?

and with a view to the two connected cases

the Court has decided to hear the cases

jointly and to give judgment on the merits

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will be able to give a satisfactory

and complete answer to the questions

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I can wait a little if it will get me two candies instead of one. I am not a bratty kid anymore, no. I am a highly functioning adult working a 9 to 5 from a rented apartment remotely like it's April 2020. And what's better, I have incredible self-control that helped me to avoid trouble oh so many many times. This is how I keep on top of the things, my many projects and hundreds of books I am reading simultaneously. Only this hyperfocus can make my dreams a hard withdrawable cash of reality. I am good at it, much better than most.

A bright galaxy of light emitting semiconductors entrances me to stick to my guns every morning. But even if it sounds like a coffee addiction of sorts, there is no need to worry. It is just a healthy routine of sorts. To keep on this hyperfocus on, to have at least a chance of reading those five books a day I planned for only today, I got to check out the latest toots, tweets and shorts, real quick. It is fine, it doesn't take that much time anyways. Maybe 4 or 5 hours a day - not a big deal, not an addiction, you can see. I can stop scrolling at ANY TIME and get back to my unfinished projects. All while having fun with IRL friends and simultaneously TOUCHING THE GRASS. See?

I am not a miserable addict because an addict can't stop these urges, and I can, if I want. Besides, my online life is full of meaningful interactions that gives a piece of calm to my overworked brain in this collapsing world that has no meaning to me anymore. Oh, whazzat, a cute kitten? I NEED IT. An overused ancient meme? I take it. Wait, a prophet says we all should fold? LOL HARD PASS! Nah, just send me More MeMeS, and I can keep going. I am not addicted, but this stream of shitposting is my daily fuel. With it I can keep my hyperfocus on What is important antantantanta.