The Challenge of Chronic Pain Management by PM&R Specialist

According to the definition from international association for the study of pain (IASP), pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage. Besides, there are many term of unpleasant sensory that complaint by patient as a pain, such as allodynia, hyperalgesia, and hyperesthesia.

The pain is one of the most cases that came to seeking a doctor. The data from Indonesian National Health Insurance (JKN) from 2014-2017 have revealed that pain cases were the most frequent in Rehabilitation Medicine Services, i.e. low back pain, knee pain, and shoulder pain. The prevalence of pain is increasing along with ageing, sedentary life style, obesity and chronic diseases.

In fact, a pain is only a symptom, that subjectively described by patient. It must be concern that every pain has a dominant causative, added by several risk factors that increased the pain sensation. The cause of pain are varies widely, from cell to life style, and environment factor. Especially in chronic pain, we must concern about additional factors, such as iatrogenic, psychosomatic, behaviour, and the most important is aware about organ pathology (red flag), like carcinoma and infection. In this situation, a Physical Medicine and Rehabilitation (PMR) Specialist has a challenge to find the cause and risk factor in patient with chronic pain to prevent the disability and increasing the function.

Nowadays, there are so many specialists interested in pain management. This fact is reasonable according to the many causative of pain. This is a good opportunity for PMR specialist, to be able to collaborate with other specialists in pain management. To be a good part in collaboration, it is necessary to be defined our role in pain management.

The essential questions are; what are PMR specialist roles, when is the ideal time, and how to act? This questions, certainly is still debatable. This is too common to state that the management of pain based on the pathology. There must be something specific in PMR field.

As the Physical Medicine & Rehabilitation specialist, we has obligation to concern about function and quality of life, indeed based on the clinical diagnosed. The start of act is by determined the limitation of function in each individual as soon as possible. Besides, we have to consider about patients convenience, coping mechanism and other aspects, i.e. psychosocial, ergonomic, sport
activity and iatrogenic. It has proven that limitation of function can be increasing the pain, and vice-versa. The management of function limitation can combined by other procedure as patient needs, such as therapeutic exercise, invasive pain management, and other modalities using in Rehabilitation Medicine.

The description above illustrates that the management of pain in the field in Rehabilitation Medicine by PMR specialist requires a broader and sharp analysis, especially on the body function. Therefore, immediate repetitive invasive intervention without comprehensive assessment to several factors, i.e. clinical diagnose, body function, and other factors, may have get an unsatisfactory result, or even worsen the pain.

**DR.Dr. Maria Regina Rachmawati, SpKFR**
Research and Development Coordinator
Indonesian Association of Physical Medicine and Rehabilitation
Faculty of Medicine, University of Gunadarma