Abdominal Pain

Chronic abdominal pain can be frustrating for the patient and challenging for the doctor. There are a variety of contributing factors that must be determined and in many cases the cause of the pain is unknown.



Pain management doctors try to manage the pain and provide relief in some capacity for the afflicted patient. When the cause of pain is not known, the doctor may try to find the source of pain in order to effectively treat the problem.

What are the causes of chronic abdominal pain?

The causes of abdominal pain vary, from menstrual cramps in women that are so severe that daily activities and work are disrupted for weeks at a time, to chronic constipation resulting in painful bloating and discomfort. Chronic abdominal pain is identified as any stomach pain that continues for more than six months without relief. The pain may come and go over the course, but is recurrent and remains for periods of time.

The most common cause of chronic abdominal pain in men and women is chronic constipation. While everyone gets constipated from time to time, chronic constipation lasts more than two to three weeks and generally accompanies other symptoms such as bloating, vomiting, nausea, bloody stools and a distended abdomen.

Women are seen more than men for chronic constipation and studies are being conducted on why this is the case. Women report constipation twice as much as men, according to the *New England Journal of Medicine* (2009).

Reproductive issues are also common among women resulting in chronic abdominal pain. Menstrual abdominal cramping and ectopic pregnancies both cause significant pain in women. If you suspect a pregnancy and are experiencing severe cramping and discomfort, seek medical attention right away.

Additional causes of abdominal pain include Crohn's disease, Inflammatory Bowel Disease, gallstones and pelvic inflammatory disease.

What are the common symptoms of chronic abdominal pain?

Chronic, when referring to abdominal pain, is any pain in the stomach that lasts for a prolonged period of time. If you experience abdominal pain that lasts for six months or longer, this is considered to be chronic.

The symptoms of chronic pain in the abdomen may vary, from bloating and cramping to nausea and vomiting. If you have a combination of problems, including severe cramping, nausea, vomiting, bloody stool and other issues, you should see your doctor right away for a medical evaluation.

The pain may radiate into the back and up into the chest cavity. If you experience chest pain that is not heartburn related, it is important to have the problem checked out right away. Bloody stool accompanied by vomiting, diarrhea and pain that lasts for days and weeks, should also be checked out by a medical professional.

A pain management doctor can help diagnose the cause or find the source of the pain in order to set up the best possible treatment plan. There is no reason for you to suffer from chronic abdominal pain.

A complete medical history accompanied by a medical examination will help you be on your way to relief. Your doctor may request diagnostic testing be done, including x-rays and an ultrasound to help identify the source of pain. Once determined, your pain specialist can establish a relief program that helps you to get back to normal life, pain-free.

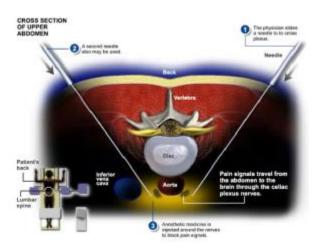
Is there treatment for unidentified abdominal pain?

In some cases there is no identifiable factor for abdominal pain. When a pain doctor cannot find the cause for the pain, it is referred to as unidentified abdominal pain. If your primary doctor cannot figure out the pain's source or it's not a surgical condition, a doctor may refer the patient to a pain management clinic to treat the symptoms and relieve the pain. There is treatment for unidentified abdominal pain; however, some degree of trial-and-error may be required.

Abdominal pain generally arises from one of three different sources: somatosensory, central or visceral. The somatosensory source involves the wall of the abdomen and the associated nerves that are found in the muscle of this area.

Visceral pain is associated with the organs in the abdomen and is often one of the most challenging to treat. Central pain is usually the most common source related to chronic pain because it has existed for prolonged periods of time and may result from the abdominal nervous system. In normal cases where the cause is identified, treatment follows along a predicted pattern. Medications to relieve pain are generally administered and injections may be given to help provide some relief from the pain. This may involve narcotic pain medications as well as non-narcotic ones.

The preferred injection for chronic abdominal pain is a celiac plexus block. These injections have been shown to provide two to four months of pain relief in 75% of patients (Rykowski et al, Anesthesiology 2000). In addition, the need for pain medications has been shown to decrease.



Celiac plexus blocks help 75% of patients for 2 to 4 months.

In some cases of source-identified abdominal pain, although reserved for the most severe causes, surgery may be required. Surgery may involve gallbladder removal or laparoscopy. When the cause remains unknown, the doctor attempts to at least identify the source of pain, as described above. If the doctor can determine the source of pain, then treatment and pain management can be effective. Treatment may help relieve pain and improve functionality, while allowing the patient to get on with life.