

## Chronic Pain as Integral Dysfunctionality of Body-Self

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**Abstract:** Dimensions of the neuromatrix appear to encompass a reality of integral representation of the pain phenomenon beyond the confines of the thalamus and cortex. It might prove significant that template modeling involves not only replication of events that represent receptivity but also a reconstitution of pathways of transfer dynamics borne out by plasticity of synaptic connectivity. Indeed, cortical reconstruction appears only to partly account for a phenomenon of integration that in turn only partly encompasses synaptic transmission. Synaptic connectivity accounts at least in part for a realization phenomenon that reduplicates the pain experience as a persistent evolution of experience. One might recognize dynamics of involution of peripheral somatic and visceral regions in terms of organ dysfunctionality beyond the compass of cortical representation. Indeed, there would evolve a series of representative steps as reproducible processes of integration within the neuromatrix in a manner that strictly redefines such neuromatrix in evolutionary terms. It is in the representation of terms of reference of the constitution of the neuromatrix that substantial representation of receptivity further evolves as persistent and chronic pain.

**Key words:** Chronic pain, dysfunctionality, thalamus, cortex

### INTRODUCTION

Readjustments in the perception of pain would underlie a series of powerful mechanisms that primarily self-trigger consequential processing of pain. Chronic pain, in particular, would cultivate a series of perceptual experiences that reproduce the development of pain. The cause of chronic pelvic pain is disputed and multifactorial<sup>[1,2]</sup>. In this sense, it might be significant to consider pain as an experimental experience in its own right that perceptually is reproduced in a serially amplifying manner. Patterns of involvement of a conceptual neuromatrix would undergo reproductive evolution in terms particularly of an extensive synaptic network<sup>[3]</sup>. In such a sense, chronic pain is sequentially reproduced in a manner that remodels in an extensive fashion patterned recognition of pain experience.

### SENSORY STIMULATION

It might be significant to reconsider sensory somatic stimulation as only a minor aspect of the pain experience that would redefine moments of pain as recollections of previous pain experience. Chronic abdominal visceral pain is of considerable clinical impact<sup>[4]</sup>. It would furthermore appear relevant to consider a neuromatrix that repeatedly

recasts the patterned pain experience. Patterned reconstruction of a painful episode is self-propagated as an experience of chronic pain evolution in its own right. The recollection of stressful and emotional correlates of painful experience represents and effectively constitutes the stimulation for a painful experience. Experimentally new reproduction of pain reconstitutes a new reality in the development and subsequent experience of chronic pain. One might view the reproduction of pain largely as a constitutive parametric function of the essential painful experience and of the pain episode itself as a pathophysiological entity in its own right.

### NETWORKS OF AWARENESS

Extensive networks of awareness simply would mirror the synaptic component that realizes the full panorama of events conducive to further development in pain experience. There would evolve a repetitively replicative model of the pain experience as an integral reproduction of the initial period of experience and of the experienced act. Phantom pain reproduces an awareness that stressfully replicates consequences of the pain phenomenon itself. One would memorize eventual reproduction of events as recharacterized formulation of replicative trends of experimental experience.

## **CHRONIC PAIN**

One might view chronic pain as an essential absence of experience of somatically elicited pain and a further remodification of patterns of evolution that fully recast the neuromatrix. There would evolve a new set of experimental values that functionally recharacterize evolution of the pain experience as a clinically persistent phenomenon. Perhaps there might be reconstituted a series of reproducing neural images of experience that conceptually redefine the phenomenon of experience as imprints of past episodes of stimulated somatic receptivity.

Patterned evolution of the chronic pain would be modeled in a "hard" cast that sets to reproduce the persistently chronic pain phenomenon. It is significant that evolution of the pain experience is an episodic phenomenon in its own right that justifiably reproduces attributes of the painful experience. Awareness of pain sensation constitutes the integral thesis for experience beyond simple reconstruction of afferent input or even of reproducible receptor stimulation.

It might be significant to reconsider the neuromatrix concept of the pain experience as an experimental reconstruction of events integrally modeled on a postulated reconstruction of previous episodes of pain experience.

## **RECONSTRUCTIVE APPROACH TO EXPERIENCE**

It is to be further realized that constructive series of events are in themselves a reconstructive approach to experience as neuromatrix reprocessing proceeds in repetitively persistent fashion. Patterned realization of forms and patterns are the endresult reproduction of a painful experience that subsequently is translated as reproduced replicas of previous associations to awareness and even experience.

Extensive remodeling of experience calls into operation an extensive network of associative awareness related to and arising from consequences of previous experience. One might view the awareness of pain as an integral representation of evolved forms of experience. Recapitulation would evolve in its own right in reconstituting experience as experimental reproduction of events of consequence. Posttherpetic pain is conceptualized as a purely sensory phenomenon<sup>[5]</sup>. The correlates of stress and of neuroendocrine dysfunction would reconstitute the onset of dynamic reproduction of forms of experience beyond concepts of initial receptivity or of stimulation.

In a manner modeled loosely on consequences of previous episodes of pain, subsequent reconstruction would represent an integral replacement of previous painful episodes by receptively experienced new painful episodes.

In terms therefore that are beyond new definition of pain experience there would evolve a reconstruction of sequential evolution borne out by previous experience that reproduces as experimental modes of new pain episodes.

The remodeling of cast neuromatrix refashions evolution of the disease process as a primary experimental experience in its own right, beyond even integral representation of evolved forms or patterns of previous experience. It might be significant to recognize forms of injury as associative imaging and reimaging events that fashion the awareness of experience and of consequence of such experience.

## **EXPERIENCE**

It is indeed in the reconstruction of events as experience that awareness is a consequential neural image of reconstructed patterns of evolving consequence. One might view realized definition of chronic pain largely in terms of imaged rather than of experienced consequences of evolution in their own right. One might further reevaluate events as painful, less painful, or more painful in consequence to reproduced and reconstructed episodes of consequence.

Only in realizing such events can one reproduce a cast or model of functional or dysfunctional attributes of pain experience. Dysfunctionality would self-produce events in consequence to evolving remanufacture of modeled experience, particularly in terms of cytokines and chemokines<sup>[6]</sup>. It might be significant to reconsider events largely in terms of a consequence of reproductive activity of the pain experience that subsequently evolves as persistent chronic pain.

## **REMODELING**

One might realize remodeling in terms that recapitulate events as initial stages of new experience that transform characterized attributes of subsequent consequence of action and reaction. The immune system is a critical determinant of visceral nociception<sup>[7]</sup>. Reactive phenomena might characterize events in terms of reproductive characterization beyond the imaged reconstruction of a correct or incorrect representation of the pain experience. Registered events would evolve consequent to neurally imaged reconstruction that recapitulate attributes as entities of consequence in the

pain experience. Consequential reproductions are integral entities of sequentially evolved reproductions of modeled experience. Sets or moulds of experience reproduce such episodes that further redefine the attributes of pain beyond the experienced event.

One might further reconstruct the dysfunctionality of pain experience in terms of consequential remodeling of such pain experience that is registered as awareness of the pain.

### **CHRONICITY**

Chronicity of experience is a form of potential painful reproduction that experimentally reproduces characterized forms of reconstituted consequence. In terms beyond simple redefinition of chronic pain, according to the neuromatrix concept there would be constituted an integral replacement of experience that arises primarily as the pain episode itself.

### **ABSTRACTION**

Abstraction of the pain experience reproduces a series of evolving consequences that integrally represent such pain experience. It appears consequential to the awareness process itself that transformation of such substituted abstraction of experience then develops as framed and reframed casts or models of dysfunctionality of a conceptual neuromatrix. It might prove significant that chronic pain as an experimental remodeling constitutes such transformation of evolving consequence. Indeed, a fully developed painful experience goes beyond specificity of receptor functionality somatically or viscerally.

In a real sense, one might further attribute the evolving process in terms of representations of such transforming attributes of an extensive neuromatrix. Abstraction might further materially recapitulate development and consequence of attributes of experience in the first instance and subsequent transformation as an awareness phenomenon.

### **ORIGINS**

The origins of a persistently chronic pain as a phenomenon beyond awareness of the pain experience represents a substitution of integral consequence that remodels neuromatrix synaptivity. Synapse dysfunctionality replaces consequences of a pain sensation that transform integrity of neuronal connectivity to one of endless reproduction of endless sequentiality. Reproducibility represents a replicative

model of synaptic transmission that is essentially a superimposition of events borne out by past events. The mitochondrial electron transport chain is implicated in neuropathic and some studies of inflammatory pain<sup>[8]</sup>. Phantom pain and causalgia are constitutive representations of a model of consequence that self-propagates within synaptic connectivity of the neuromatrix. A reliable representation of sequentially evolving consequences of dysfunctionality would prove an integral substrate for an awareness of the chronic pain experience.

### **RENEWAL EXPERIENCE**

Renewed pain sensation would contribute substantially to an evolving pattern that represents reflected consequence of viability of the neuronal circuit. One might realize the events that self-propagate as a body-self image. Indeed, chronic pain experience would constitute past episodes of sensation and receptivity of a body-self beyond simple reconstitution of neural images or representations. One might view consequences of chronic pain as a transformed representation or renewal model of dysfunctional body-self. It might be further realized that the development of pain constitutes a series of reflections of a body-self that modulates past experience as awareness phenomena.

### **PHANTOM PAIN**

Phantom pain goes beyond a receptivity phenomenon and would indicate an integrity violation that compromises consequences of any such receptivity. Indeed, one might speak of an abstraction of receptive phenomena that transcend awareness in terms of synaptic dysfunctionality of an extensive neuromatrix enveloping phenomena of sensation and of transferred modeling. Transferred modeling of receptivity might persistently transform receptive sensation that augments with template replication of the awareness phenomenon.

The external environment transfers modeled patterns of receptivity as an ongoing process of representation of events ranging from touch, pressure and temperature sensation to an overall phenomenon of sequential neuronal activation and firing and of synaptic transmission. Dysfunctionality of neuromatrix origin indicates transformed dynamics of a sensation as a modeled pattern of reproduction and of template replication bound intrinsically to awareness of the persistent pain experience.

## CONCLUSION

Evolving consequences of injury to organs and tissues constitute a form of potential irreversibility that might translate at times as chronic pain. Indeed, parameters of reproducibility go beyond principles of receptivity and implicate a serial pattern reconstruction of injurious events to tissues that progress as constitutive phenomena in their own right. Chronic pain is dissociated from an isolated receptivity in inducing further transformation of identifiable agents of reproduction of sensation. With improved function, pain often is reduced<sup>[9]</sup>. In this manner, modeling patterns are constructed in the face of an injury dimensioned in terms of tissue pathology but persistently chronic as pain experience. One might speak of ongoing transmission of painful stimuli from specific nociceptors only insofar as it is possible to identify such dimensions of tissue injury. Beyond a certain threshold or qualitative characterization of pain stimulation, a representation of events constitutes dimensional reconstruction of the neuromatrix that encompasses extensive reconstruction of the central nervous system pathways as neuronal circuits. One would further identify the realization of pain phenomena beyond strict receptor stimulation but in terms akin to replicative template reproduction of pain in ongoing dimensional expansion of neuromatrix and of neuromatrix synaptivity.

Readjustments of neurological integration as plasticity would constitute a dynamic reconstruction of pathways that expand a comprehensive neuromatrix that further compounds influence as synaptically transmitted impulses to various regions in the central nervous system. Modulation of pain impulses is an aspect that participates in inducing a reconstruction of a dynamic neuromatrix. Pain sensitivity would develop as both threshold and qualitative transformation of integrative processes of awareness and persistence of evolving pain experience.

Particular qualitative characterization of pain phenomena would expressively restructure modes of involvement of potentially modulating faculties in realizing a progression of the pain experience.

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