

Insights into Pain: What's it Really Trying to Tell You?

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Pain is our inherent bodyguard, protecting our bodies and alerting us when something is wrong. As one of our most primitive mechanisms, the sensation we seek most to avoid is, in fact, one of the most essential for our survival. Indeed, some pains can even be a sign of recovery or healing.

The International Association for the Study of Pain describes pain as "an unpleasant sensory and emotional experience associated with actual or potential tissue damage". Therefore, the strength and unpleasantness of pain is not simply, or directly, related to the extent of tissue damage.

Pain is a complex perception that varies in strength, location and duration. While real pain can be caused by a multitude of stimuli, it is often emotionally enhanced. In fact, the more emotionally the brain reacts to an injury, the more likely it is that the pain will persist once the injury has healed.

There are many types of pain, and it is important that they are classified correctly. While some pain can be described as a stabbing ache in the lower back, it can also be the strain the body feels after a workout. While both are forms of pain, they are a sign of different issues – one, a likely result of a musculoskeletal condition, the other a symptom of healing.

The ability to identify what pain is actually signifying can help decipher the cause and the correct treatment to cure it. Basil Mouasher, founder the Kanetica™ Method, aids his patients in determining what type of pain they are experiencing, and learning to identify between 'good' and 'bad' pain to aid with the necessary form of treatment.

To use an example to illustrate this differentiation of pain, one of Kanetica's oldest clients, 89 year old Iris, suffered from musculoskeletal conditions, placing her in often debilitating pain. After her first Kanetica™ treatment she felt considerably less pain the day after. Iris's second treatment involved more reparative work with Kanetica™, achieving further results in terms of freeing up her structural rigidity and increasing fluids (to nerves, joints, muscle, ligaments bones, discs), but Iris awoke the next morning with some aches and pains. Iris was expecting these aches and pains, because this pain was simply residual. After a few days, the aches and pains were gone, and Iris felt much freer in her body, and much better for having the treatment.

When a patient receives a reparative treatment, the focus is on freeing and healing the musculoskeletal structure. This can result in the tissue can become a little tender (like the lactic acid we produce in our muscles when we have had a good, hard workout in the gym). In the process of rebalancing the body, every physique, and therefore every treatment, is different, and each level of breakdown allows the practitioner to further the repair.

Thus, it is important to remember that the reparative therapy depends on how problematic the original circumstances and physiology are. These reparative treatments are essential to aid patients and ensure that aches and pains do not become a lifelong problem.

Learning to understand and identify pain correctly is imperative in determining the causes and necessary treatments for the symptoms being experienced. Residual pain should be welcomed – remember it is a sign of recovery, of repair, not a symptom of damage!