After a spinal cord injury, people can experience many different types of pain. Pain can be caused by physical trauma, or it can come from changes that happen in your body after an injury. Pain can sometimes come and go without any clear cause. Pain can be felt above or below the level of SCI and can also be felt in areas of the body where there is either little or even no sensation at all!

Pain affects people in many ways. Pain can get in the way of going out with friends or exercising. It can make self-care more difficult and interfere with sleep. Pain can make it seem hard to return to work or study and pain can make you feel sad, tired, frustrated or angry.

It is important to learn about the different types of pain that can happen after spinal cord injury as this will help you to develop the best pain management strategies for your particular pain.

**Pain Types**

Pain after SCI can come from many different sources. Pain can be from:
- damage to the nerves in the spinal cord itself or the nerves nearby
- changes to the nervous system in the period after injury
- strain of muscles or joints from everyday activities or with ageing
- irritation of your body’s internal organs

There is a way of naming the different pains after spinal cord injury and this is called the International Spinal Cord Injury Pain Classification.

Pain can be from stimulation of specific pain nerves called nociceptors causing pains such as:
- **Musculoskeletal pain** (eg: shoulder pain)
- **Visceral pain** (eg: abdominal pain)
- **Other nociceptive pain** (eg: Autonomic Dysreflexia headache)

Pain can also be from irritation of or damage to the nerves themselves and this can lead to:
- **At-level neuropathic pain** (eg: band like pain at the level of your injury)
- **Below-level neuropathic pain** (eg: pins and needles or electric shocks in your legs)
- **Other neuropathic pain** (eg: carpal tunnel syndrome)
### THE SPINAL CORD INJURY PAIN QUESTIONNAIRE

For your pain, provide the following details:

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where is the pain located?</td>
<td></td>
</tr>
<tr>
<td>Is the pain above or below your level of SCI? **</td>
<td>Above, Below</td>
</tr>
<tr>
<td>Is the pain in a region of reduced sensation? **</td>
<td>Yes, No</td>
</tr>
<tr>
<td>When did the pain start? (Date of onset**)</td>
<td></td>
</tr>
<tr>
<td>Was there an event that triggered the pain?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>What words best describe your pain? ** (tick all that apply)</td>
<td>Aching, Burning</td>
</tr>
<tr>
<td></td>
<td>Dull, Icy cold</td>
</tr>
<tr>
<td></td>
<td>Cramping, Electric Shocks</td>
</tr>
<tr>
<td></td>
<td>Tender, Pns &amp; Needles</td>
</tr>
<tr>
<td></td>
<td>Squeezing, Tingling</td>
</tr>
<tr>
<td></td>
<td>Sharp, Other:</td>
</tr>
<tr>
<td>How does pain change over the course of the day?</td>
<td></td>
</tr>
<tr>
<td>What makes the pain feel worse? **</td>
<td>Personal care</td>
</tr>
<tr>
<td></td>
<td>Mobility - transfers</td>
</tr>
<tr>
<td></td>
<td>Mobility - wheelchair</td>
</tr>
<tr>
<td></td>
<td>Mobility - walking</td>
</tr>
<tr>
<td></td>
<td>Exercise recreation</td>
</tr>
<tr>
<td></td>
<td>Spasm</td>
</tr>
<tr>
<td></td>
<td>Other:</td>
</tr>
<tr>
<td>What makes the pain feel better? **</td>
<td>Rest</td>
</tr>
<tr>
<td></td>
<td>Position change</td>
</tr>
<tr>
<td></td>
<td>Activity pacing</td>
</tr>
<tr>
<td></td>
<td>Other:</td>
</tr>
<tr>
<td>What medications or treatments are used?</td>
<td></td>
</tr>
</tbody>
</table>


** Questions to help identify SCI Pain Type - International Spinal Cord Injury Pain Classification (Bryce et al 2012)
Musculoskeletal Pain

- **Pain location:** In an area of preserved sensation
- **Above or below SCI level:** Above or below level of SCI, but usually an area with sensation
- **Pain description:** Dull, sharp, tender, aching
- **Things that make pain worse:** Certain postures or movement, lifting bodyweight, transfers, driving, mobility, exercise or sport
- **Things that reduce the pain:** Rest, position change, some medications, equipment changes

Examples of musculoskeletal pain include: shoulder pain from tendonitis, wrist arthritis, back ache

Visceral Pain

- **Pain location:** Abdomen, chest or pelvis
- **Above or below SCI level:** Above, at or below level of SCI
- **Pain description:** Dull, cramping, aching, colicky, intermittent
- **Things that make pain worse:** Constipation, bladder infection, kidney stones, blocked catheter
- **Things that reduce the pain:** Achieve a bowel result, unblock catheter, antibiotics for infection

Examples of visceral pain include: bloating, constipation, cramping, bladder infection

Neuropathic Pain

- **Pain location:** May be in feet, legs, arms, hands, abdomen, buttocks or trunk depending of SCI level
- **Above or below SCI level:** *May be At-level of SCI* *May be Below-level of SCI* *May be Other neuropathic pain (eg: above-level carpal tunnel syndrome)*
- **Pain description:** Hot, burning/hot, sharp, electric shocks, icy/cold, squeezing or constriction, tingling or pins and needles
- **Things that make pain worse:** Stress, bladder infection, constipation, fatigue
- **Things that reduce the pain:** Medications, being distracted, gentle exercise

Examples of neuropathic pain include: Burning pain in the feet or electric shocks in the legs

**NOTE:** if you experience nerve pain above your SCI level – see your Doctor for assessment and advice

Do you know what type of pain do you have?

- [ ] Musculoskeletal
- [ ] At-level neuropathic
- [ ] Other nociceptive
- [ ] Visceral
- [ ] Below-level neuropathic
- [ ] Other neuropathic

Changes in Pain

It is normal for pain to fluctuate in intensity during the day or from day to day. You may have **good pain days** and **bad pain days**. Bad pain days are often called pain **flare ups**. These flare ups are normal day-to-day changes for chronic pain.

However, sometimes after a spinal cord injury, an **increase in your pain** or **change in your symptoms** can mean that something else is going on in your body.

If you experience pain that is related to **any of the following**, it is recommended that you see your doctor as soon as possible to discuss your symptoms.

Q: Do any of these apply to you? □ YES □ NO

*If the answer is yes – see your doctor as soon as possible*

"When I get abdominal pain, excruciating abdominal pain, like a burning sensation, it is usually a bladder infection – a UTI. This causes a lot of stinging, a lot of ache, and I spasm with that as well, because I can’t actually feel it fully, and so my body tells me there is something wrong, and all of a sudden that flares up and my blood pressure goes up – my body automatically goes into Autonomic Dysreflexia – AD"

Vito, C5/6 quadriplegia

**TOP TIP!** For more information please visit:

- Read Chapter 2 of *The Spinal Cord Injury Pain Book* by Siddall, McCabe & Murray (2014 HammondCare Media)