

A Survey of the pain experienced and pain reliever from bench to bedsides

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Abstract: Pain is the most common symptom of most musculoskeletal disorders. Pain ranges from mild to severe and from acute and short-lived to chronic and of long duration and may be local or widespread (diffuse). Musculoskeletal pain can be caused by disorders of bones, joints, muscles, tendons, ligaments, bursa, or a combination. Injuries are the most common cause of pain. The Chronic pain is pain that persists for 6 months or more. It has a detrimental effect on the lives of those affected, impacting not just the sufferer, but also those that care for and interact with them. There are 134 million people living with chronic pain in India, 1 which is greater than the number of people living with diabetes (40 million), and it places a significant burden on the economy and society. In this paper a survey of the pain experienced and pain reliever in different types of treatments.

Keywords: Pain, Joint pain, long duration, Injuries, reliever and treatments.

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I. Introduction

The Painful Truth campaign aims to drive better understanding of chronic pain and highlight its impact on sufferers so that we can work towards a better outlook for people with chronic pain. It provides healthcare professionals with an opportunity to gain insights into their patients' perspective so they can evaluate the true challenge of chronic pain facing us all. This Indian survey has revealed that despite receiving several treatments and in some cases several surgeries, many patients continue to suffer with their severe chronic pain on a daily basis. So it need to see an improvement in the way people with chronic pain are managed.

Pain is your intimate enemy. You can't see it, smell it, describe it, measure it, MRI or X-ray it. If you talk too much about it, doctors throw up their hands, branding you an attention-seeker, while friends avoid you. In medical textbooks, it's an "unpleasant sensory and emotional experience". It trips your vital signs: temperature, pulse, respiration, blood pressure. It unleashes a cascade of negative hormones that target your immune system. And it triggers a storm of teeny-weeny molecules, cytokines that attack and inflame your body. You and your pain: it's all about winning the war within.

Also without. For, India is a nation in pain. According to the World Health Organization (WHO), one in six people and one in three families suffer from arthritis in India. That means, about 15 per cent to 17 per cent of the Indian population. There's more: chronic pain affects 30 per cent of the adult population, about 20 per cent to 25 per cent of which is from musculoskeletal disorders (MSD) affecting joints, muscles, tendons, ligaments and nerves. Back pain accounts for another 25 per cent to 30 per cent. Add to it fractures: 50 million Indians are believed to be vulnerable to fractures, reports the International Osteoporosis Foundation. Indians have 15 per cent lower bone mineral levels than Westerners, with fractures occurring 10 to 20 years earlier. About 440,000 Indians get hip fractures every year, a figure set to hit 600,000 in 2020. The epidemic of pain is the biggest health problem facing India today, much more than the burden of diabetes, heart disease and cancer combined.

The brief introduction is described in this section. The section 2 indicates that types of chronic pain and characteristics based on ages and flowed by the methodology for experimental study based on chronic pain in chapter 3 and 4 respectively. Finally the chapter 5 deals with the suggestion and conclusion based on the methodology and followed by the reference of this paper in last chapter.



II. Chronic Pain

Chronic pain is pain that persists for 6 months or more and its classified as head, shoulder, elbow, hips knees, heels, neck, back, wrist, lower back and ankles. It has a detrimental effect on the lives of those affected, impacting not just the sufferer, but also those that care for and interact with them. There are 50 million people living with chronic pain in India, 1which is greater than the number of people living with diabetes (40 million),and it places a significant burden on the economy and society. Perhaps because there are several causes of chronic pain, healthcare systems have struggled to appreciate the enormity and growing challenges that chronic pain presents. For many sufferers, conventional approaches with physical therapy, medication or surgery is not the answer and we need to be exploring the use of innovative and cost-effective technologies as they emerge. The Painful Truth campaign aims to drive better understanding of chronic pain and highlight its impact on sufferers so that we can work towards a better outlook for people with chronic pain. It provides healthcare professionals with an opportunity to gain insights into their patients' perspective so they can evaluate the true challenge of chronic pain facing us all.

This Indian survey has revealed that despite receiving several treatments and in some cases several surgeries, many patients continue to suffer with their severe chronic pain on a daily basis. We need to see an improvement in the way people with chronic pain are managed. I often see patients who for many years (on average 7 years) have been unsuccessfully managed with physical therapy, pharmacological treatment or surgery, despite the availability of non-medicinal options such as rechargeable spinal cord stimulation (SCS). The SCS may in the longer term not only improve the sufferer's pain, but may also reduce the burden on the health economy by getting the right treatment to the right individual at the right time. Unfortunately many sufferers have to see their doctor several times before they are referred to a specialist and unless sufferers see the right specialists, it is unlikely they will be informed of all the options available. I hope that this campaign will encourage people with chronic pain, their friends and family as well as healthcare professionals and policy makers, to look at chronic pain in a new way and be motivated to make a positive change to the process and resources of providing care.I am optimistic that this initiative will lead to improved awareness and understanding for people with chronic pain across Europe, facilitating a change in management.

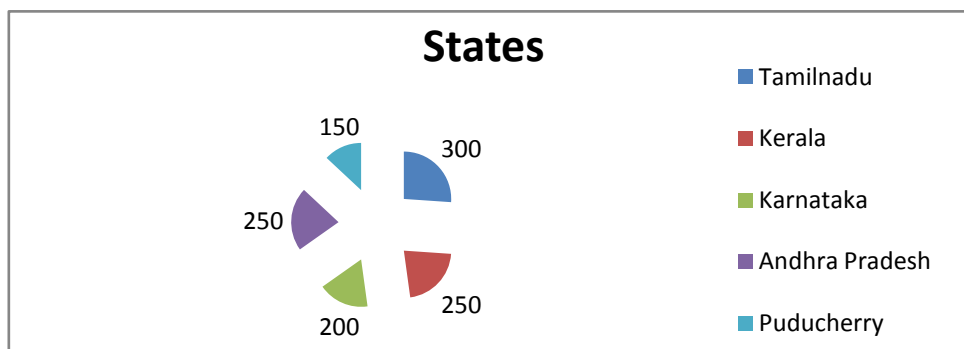
The Painful Truth campaign has been launched to build awareness of the issues facing people with chronic (non-cancer) pain to drive for an improvement in how people with chronic pain are diagnosed, and to enhance access to innovative and cost effective treatment options to those who would benefit.

III. Types of chronic pain

The Chronic pain can be caused by a variety of physical and psychological factors, however, the subjective and personal nature of pain makes it difficult to measure and define. It can occur when no obvious cause can be found and is thought to be due to changes in the nervous system.¹⁰Chronic pain is generally divided into two classifications; however some people may suffer from a combination of both types. The Nociceptive - associated with tissue damage, for example a cut, burn or broken bone or problems with the nervous system. It is often described as numbness, tingling or like an electric shock.⁸ While most people will experience nociceptive pain at some point, neuropathic pain is often under-diagnosed and under-treated. It is a debilitating condition commonly affecting the back and legs, which is associated with severe disability and psychological illness.

IV. Methodology

Random sample of 1,150 adults aged 18 to 64, who define themselves as chronic pain sufferers in based on 5 states (Tamilnadu, Kerala, Karnataka, Pondicherry and Andhra Pradesh). The respondents comprise 55% women and 45% men. An average of 120 interviews conducted online per State throughout August 2017.



The Painful Truth Survey found that 63% of survey respondents believe that their chronic pain cannot be cured while only 37% believe that their condition will improve with medication, highlighting the lack of hope for the future. The average of 70% of people suffered is still in pain for 12 hours.

Table 1: Indicate that the impact of chronic pain on daily activity.

Characteristic	Sleeping	Out of bed	Bathing	Dressing	Shopping	Cleaning	Driving	Long time sitting	Exercising
Impact of pain	5%	17%	7%	6%	16%	14%	15%	12%	8%

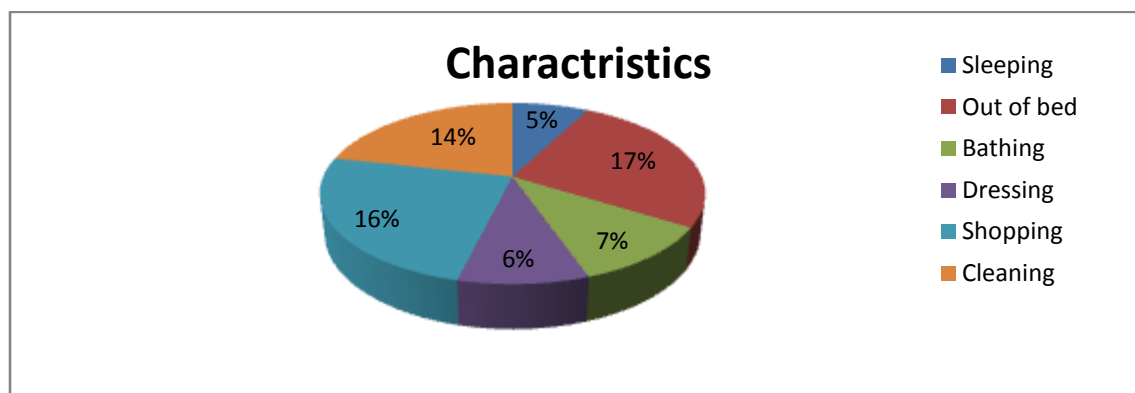


Figure 1: Indicate that the impact of chronic pain on daily activity.

4.1 Data analysis

Data were analyzed using the Statistical Package for the Social Sciences (SPSS) and Primer of Biostatistics. Demographic and clinical variables and questionnaire scores were summarized using descriptive statistics. χ^2 test for two-way tables was used to analyze categorical frequency data between males and females. Pain ratings associated with the experience of everyday pains and the various qualities or dimensions of chronic pain were analyzed by a two-way between-within ANOVA using sex as the between-subjects factor and pain experience as the within-subjects factor.

(a).Satisfaction levelof characteristics

In this study on the basic characteristics of pain reliever like Anti-bacterial, Low Irritant, Anti-Inflammatory and anti-fungal to be chi-square test statistics at 5% (0.05) level of significance.

Table 2: Analysis for satisfaction level of characteristics

Characteristics	Calculated Value	Table Value at 5% Level	Significant or Not
Painde and other products	118.754	35	Significant

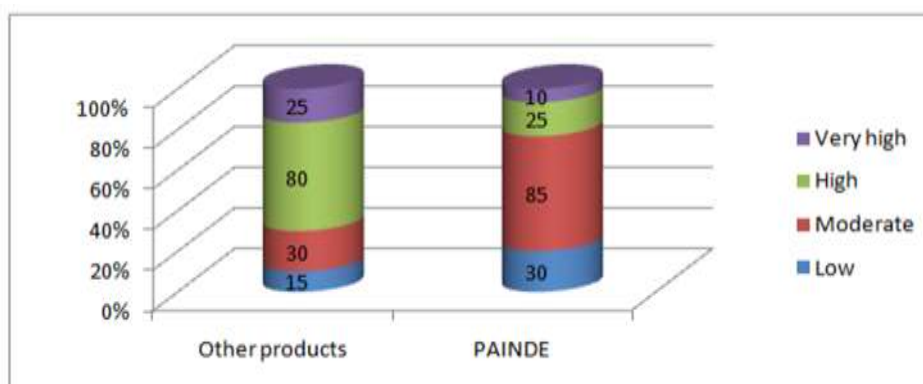


Figure 2: Analysis for satisfaction level of characteristics

Since the calculated value is greater than the table value the mentioned characteristics is significant. The null hypothesis is rejected. The result shows that the painde is satisfied all characteristics compare with other pain products.

(b).Satisfaction level of pain

In this table study on the satisfaction of pain reliever like Arthritis, Rheumatism, joint pains, cervical spondylitis, back pain and head ache to be chi-square test statistics at 5% (0.05) level of significance.

Table 3: Analysis for satisfaction level of pain

Characteristics	Calculated Value	Table Value at 5% Level	Significant or Not
Painde and other products	124.162	48	Significant

Since the calculated value is greater than the table value the mentioned pain is significant. The result shows that the painde is satisfied and give better result for after using painde products.

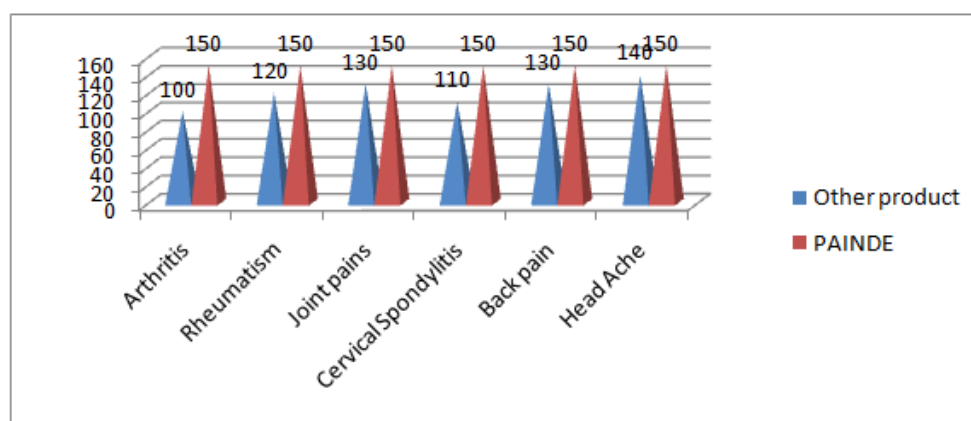


Figure 3: Analysis for satisfaction level of pain

(c)Level of pain classification

The pain level we are classified in four levels such as very high, high, moderate and low.

Table 4: Analysis for level of pain

	Calculated Value	Table Value at 5% Level	Significant or Not
Painde and other products	67.42	12.45	Significant

Since the calculated value is greater than the table value the mentioned pain is significant. The result shows that the painde is satisfied and give better result for different level of pain.

Figure 4: Analysis for level of pain

(d) Level of satisfaction

The satisfaction level to be gathered respondents information through the questionnaires. Based on this result to be used chi-square test at 5% level.

Table 5: Analysis for level of satisfaction after using Painde and other products

	Calculated Value	Table Value at 5% Level	Significant or Not
Paindeand other products	134	42	Significant

Since the calculated value is greater than the table value we reject the null hypothesis. It shows that the painde is good and satisfied after used painde product in different level of pains.

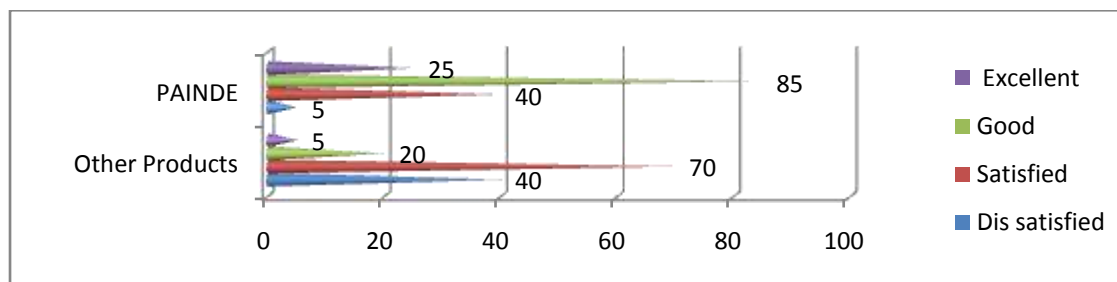


Figure 5: Analysis for level of satisfaction after using Painde and other products

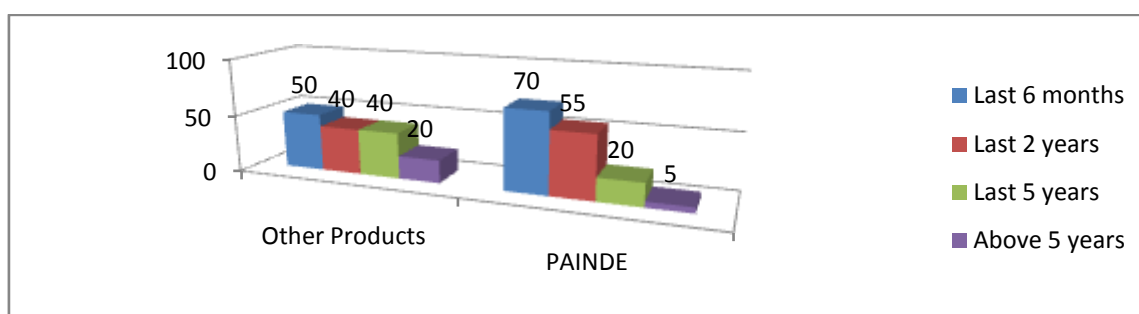


Figure 6: Comparison for using of Painde level of satisfaction after using Painde and other products

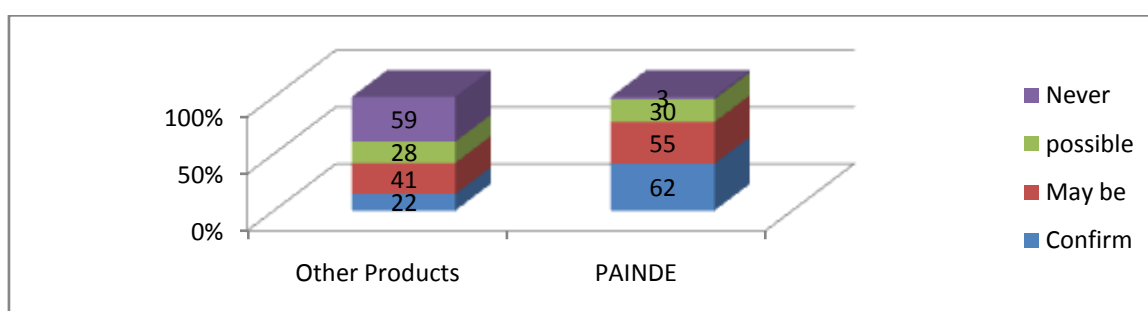


Figure 7: Comparison for using of Painde curing level after using Painde and other products

(e) Analysis of Variance (ANOVA) for two way classification

Table 6: classification table for sources of pain and tolerance limit

Source of pain Tolerance limit	Sleeping	Out of bed	Bathing	Dressing	Shopping	Cleaning	Driving	Long time siting	Exercising
Least	20	45	21	10	43	21	31	27	14
Average	10	60	30	29	55	50	65	41	30
Worst case	28	91	30	30	86	90	75	70	48

Table 6: ANOVA table for sources of pain and tolerance limit

Source of Variation	Sum of Squares (SS)	Degrees of freedom	Mean SS	F-Ration	F(0.05)= 5%	Significant or not
Tolerance limit	5577	2	278.5	11.88	3.63	Significant
Source of pain	5575	8	696.875	4.755	2.59	Significant
Error	52952	16	3309.5	-	-	-
Total	64104	26	-	-	-	-

The intensity of chronic pain experienced at its Sleeping, Out of bed, Bathing, Dressing, Shopping, Cleaning, Driving, Long time siting and Exercising was examined with a nine-point numeric rating scale. Transformation was applied to the worst and least data to normalize the data. A two-way ANOVA indicated a significant main effect of pain intensity. Chronic pain intensity differed significantly among the Sleeping, Out of bed, Bathing, dressing, Shopping, Cleaning, Driving, Long time siting and Exercising. The intensity of sex interaction and main effect for sex were significant. Thus, there were significant differences between males and females in least, average and worst experiences of choric pain intensity. Age was significantly and negatively correlated with choric pain at its worst for males but not for females.

V. Summary and Conclusion

The results of the present study are at odds with the conception of male and females as asymptomatic disease carriers and, instead, contribute to the growing body of research showing that females with chronic pain report significant pain intensity, unpleasantness and disability. Female participants appeared to be joint pain by Chronic pain, more so than traditionally conceptualized, because they were diagnosed at a later age, implying a delay in the receipt of potentially life-saving medical treatment; experienced the same intensity, interference and unpleasantness of Chronic pain as males; and did not exhibit a lessening of pain symptoms over time. Thus, female chronic pain patients may be triply disadvantaged by the health care system because of disease rarity,

devalued carrier status and sex. Given the methodological limitations and potential sampling bias in the present study, further research is required to evaluate the extent to which this conclusion applies to the general population of female chronic pain patients.

Several factors allow PAINDE to effectively penetrate the skin. PAINDE is a rich source of essential fatty acids, Omega-3, 6, and 9. The fatty acid properties of PAINDE are very similar to that of humans. In addition, the monounsaturated fatty acid, Oleic acid is the major fatty acid found in PAINDE. Oleic acid enhances the delivery of the other herbal ingredients found in PAINDE. The benefits of the fatty acids found in PAINDE are not limited to its deep penetrating ability alone. Oleic acid is known to serve as a local anti-inflammatory. Additionally, linoleic acid, the second most abundant fatty acid in PAINDE, has been shown to ease muscle and joint pain. Among PAINDE's top properties that have been investigated include its ability to penetrate the skin, will not clog pores, and is composed of essential fatty acids or those basic building blocks that are needed to make repairs of damaged tissues.

PAINDE has been proven through many Medical and Research studies for the way it can reduce inflammation of the joints. Good for Arthritis and Rheumatism sufferers.

PAINDE's natural large amounts of Linoleic and Oleic acid are known to ease joint pain and be an anti-inflammatory. Its benefits to humans are outstanding.

PAINDE has been proven to be hypo- allergenic which means, it is suitable for all ages. PAINDE relieves the pain and inflammation of cuts and scrapes without stinging or burning plus aids in the healing process. Finally this paper shows the Painde product need not be massage it's enough for only apply. The product of painde is give smooth and better results after using this product compare to the other products.

Acknowledgement and about the Product

The authors thank for RRM Academy for statistical works (rrmacademy@gmail.com), Namakkal, Tamilnadu, India also Painde Company Support & Inform that participated in this research and also convey the sincere thanks the company of Painde product. The Painde product deal with any Kind of Pain (Muscular, Joints & Bone) Wash affected area with a mild soap, and wipe with a clean dry cloth. Apply gently on the affected region with a sufficient quantity of PAINDE Oil and wait for 20 – 30 minutes before resuming your regular routine. Apply three times a day for faster cure and relief.

The Product Salient Features:

- Y 90-95% oil penetrates the skin within 7-10 minutes.
- Y Helps to reach all the herbal properties to the affected region.
- Y Removes free radicals and rejuvenates new cells.
- Y Accelerate the bone growth.



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