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GUEST ARTICLE from Dr. Frank Livingstone on Myofascial Pain Syndrome

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GUEST ARTICLE

Myofascial Pain Syndrome

By E. Franklin Livingstone, MD, MRM, FAAPM&R, FAADEP

Myofascial pain syndrome is a very common problem in patients suffering from chronic pain. I have seen very few people with chronic pain syndromes of significance who did not have, at least as a part of their pain syndrome, myofascial pain. This condition is characterized as muscle pain, and it is very common in the upper back, neck, lower back, and pelvic region. Myofascial pain syndrome is often the result of an injury that never completely heals. It may also be caused by stress or sleeping in an awkward position at night, leaving you with a "kink" in your neck. If these minor muscle injuries are left untreated, they can worsen over time and cause significant pain and impairment.

One of the common patterns physicians (like myself) see is what used to be called the "levator scapulae syndrome," which is a syndrome that affects muscles that elevate the shoulders, primarily the upper trapezius and levator scapulae muscles. People learn to shunt stress energy from their brains into these shoulder elevator muscles, putting them under chronic tension patterns.

Now, it is important to understand how muscles work normally to appreciate the changes that chronic tension patterns put upon muscles. Your striated skeletal muscles, which are muscles that move your body, are designed to contract and relax, contract and relax. When they are doing this, they are pumping blood. When a muscle contracts, the increased tissue pressure causes the used blood in the muscle to be forced out. When the muscle relaxes by virtue of one-way valves, it basically sucks fresh blood into the muscle. When muscles are working normally, they pump a significant portion of the blood they need into surrounding areas.

Now, let's consider a muscle in a chronic tension pattern. The muscle is not contracting and relaxing cyclically. In fact, it is not contracting and relaxing at all; it's holding a tension pattern for prolonged periods of time. Our striated skeletal muscles were not designed to hold tension patterns for long periods of time. If a muscle is in a tension pattern, it is working constantly to maintain that tension, yet it is not contracting and relaxing. It is essentially holding that isometric contraction, so there is no pumping of blood by the muscle, and the muscle loses all of that blood flow.

In addition, the tissue tension also restricts the flow of blood to some degree, reducing the amount of blood that flows through the muscle. In short, myofascial pain results from too much muscle tension and not enough blood flow. This does not mean that the muscle is not getting any blood flow; it simply is not getting enough blood flow to keep itself healthy. Remember, the health of a tissue and its healing process is proportional to blood flow.

The muscles involved in myofascial pain syndrome are simply muscles that are starved of blood. That does not mean they are not getting any, it just means they're not getting enough to be healed and healthy; so, they remain unhealthy, tender, painful to stretch, and painful to use.

The problem is too much muscle tension and not enough blood flow; so, we need to design a treatment program that reduces muscle tension and increases blood flow. At the Tristate Pain Institute, there are several ways we can do this. First, we can develop a mindfulness program where we learn to recognize tension patterns and relax them normally. Other valuable ways to reduce muscle tension and increase blood flow are periodic stretching breaks, and if done appropriately, aerobic exercise (walking, bicycle riding, and swimming), and cold pack therapy. Now, there are two important concepts to understand when treating muscle pain. The most important of these is that for many people, putting heat on these muscles will aggravate the swelling and inflammation even though it feels really good, but you get a net negative gain every time you treat your muscles this way.

Myofascial pain syndrome is rehabilitative, but it takes some thought and effort. I hope this information has been helpful for you, at least in getting you to think on a deeper basis as to what is going on and why you are having this continued, chronic problem with muscular pain.

God bless you, and good luck!

Dr. "L"

CONTACT TRISTATE PAIN INSTITUTE

TriState Pain Institute provides convenient, comprehensive pain management to individuals living in the Mohave and La Paz counties in Arizona, and adjoining regions in Nevada and California. For more information, please call or request an appointment today!

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TriState Pain Institute Becomes EXCLUSIVE PROVIDER OF NEW SCS TECHNOLOGY

Prolonged back and leg pain are two common complaints reported in doctor offices, urgent care facilities, and pain clinics. While most pain resolves within six weeks, chronic pain continues beyond this timeframe. Once a specific diagnosis of chronic pain is made, many factors impact its management. At the TriState Pain Institute, treating chronic pain begins with a diagnosis, followed by a treatment plan that minimizes the risk of addiction.

Chronic back and leg pain are two of the most common examples of chronic pain. Some individuals with chronic back pain, leg pain alone, or both, may improve with surgery. If the patient can't, doesn't want to, or does not qualify for surgery, spinal cord stimulation (SCS) may be an option. Dr. Benjamin Venger has been performing this procedure for more than twenty-five years, and he has been among the first few physicians nationally to use uniquely-designed SCS systems, MRI compatible implants, and a new SCS system that dramatically lowers back and leg pain without any perceptible sensation. The pain just goes away!

Nevro Corp. received FDA approval to introduce the Senza® system in the United States, having launched HF10TM therapy a year ago. Intentionally, Nevro has asked select physicians experienced in this technology to gradually introduce these devices throughout the United States. Dr. Venger is the only physician in Northern Arizona and the TriState region who meets Nevro's qualifications. Furthermore, if you have had an unsuccessful spinal cord stimulator trial in the past, both Medicare and many other insurance carriers will generally cover a second repeat trial with Senza® technology.

Nevro is not for everyone. Many patients need to request a spinal cord stimulator system that allows MRI imaging or has a sensor system that can seamlessly adjust to positional



changes. No matter what system you choose, you don't have to commit to having it permanently implanted in your body to find out if it can help with pain. All patients undergo a trial placement procedure to preview how spinal cord stimulation affects their pain. The trial insertion can be performed with intravenous sedation at either TriState Pain Institute office, but the permanent procedure must be done in a hospital or surgery center.

If you are interested in learning more about these revolutionary technologies, or to determine if you could benefit from them, call the TriState Pain Institute. We now have two offices to serve you in Ft. Mohave and Lake Havasu City.

One number reaches both: 928-788-3333, or schedule an appointment through our patient portal on the website: www.tspain.com.

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