

The pain chronicles: *Cures, myths, mysteries, prayers, diaries, brain scans, healing, and the science of suffering*

Robert B. Raffa, Frank Porreca

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Book Review

“The time has come,” the Walrus said, “To talk of many things: Of shoes — and ships — and sealing-wax — Of cabbages — and kings — And why the sea is boiling hot — And whether pigs have wings.” (1) In *The Pain Chronicles*, Melanie Thernstrom echoes Lewis Carroll by creatively, entertainingly, and provocatively uniting a collection of facts, questions, and musings into an extraordinarily accomplished opus. This book, like chronic pain itself, is a tapestry woven from threads of biology, individual experiences of sensation and perception, genetics, psychology, belief systems, and the healing arts and their practitioners. The woven tapestry reveals, informs, and captivates in a way that the individual scattered threads do not. Two words sit alone on the first page. At first enigmatic, then entrapping, ultimately terrifying: Dolor dictat. Chronic pain is not simply a temporal extension of our everyday experience of acute pain. As this book so effectively explains, it is fundamentally and profoundly different, the product of unique biology and perception. Pain dominates, it commands, it dictates. Furthermore, chronic pain is a world foreign to those who do not live in it. Luckily, in this work we have Melanie Thernstrom — our Alice — to clearly and insightfully describe the view through her looking glass and what she found there. Pain is examined in [...]

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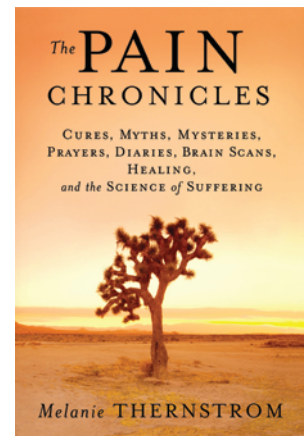
Melanie Thernstrom

Farrar, Straus and Giroux. New York, New York, USA. 2010.
384 pp. \$27.00. ISBN: 978-0-865-47681-3 (hardcover).

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Pain is examined in this book from five equally intriguing and relevant perspectives: as metaphor, history, disease, narrative, and perception. If you think that your background, training, or situation (as a patient, clinician, or researcher) would limit your appreciation of each of

these perspectives, you would be wrong. In “Pain as Metaphor,” the reader learns not only the anatomical pain pathways, accurately and readably described with helpful analogies, but also about how the human “condition” of pain has been contemplated in sources as diverse and interesting as Sanskrit Hindu scripture, writings by Susan Sontag, Emily Dickinson, and Franz Kafka, and the work of modern neuroscientists. In “Pain as History,” readers will find a succinct and informative description of the discovery and use of anesthesia, but also, provocatively, how this “. . . new ability to dispel the pain of saints and sinners alike disenchant pain of its ancient meanings” and, even more remarkably, how the French and American revolutions and the Romantic movement impacted views on the treatment of pain. In “Pain as Disease,” Thernstrom offers a clearly described, accurate, and up-to-date summary of basic research, explaining descending modulation, *COMT* polymorphism, Wall and Melzack’s gate-control theory, peripheral and central sensitization, brain scans, and many other subjects. In “Pain as Narrative,” there are poignant stories of the frustration that is experienced by patients and those dedicated to treating them. One is haunted by the seemingly insurmountable challenge, reminiscent of Carroll’s verse: “If seven maids with seven mops Swept it for half a year, Do you suppose,” the Walrus said, “That they could get it clear?” “I doubt it,” said the Carpenter, And shed a bitter tear” (1).

Finally, in “Pain as Perception,” we are introduced to both optimistic and pessimistic views of the future. Thernstrom proposes that one day research will reveal the physiology of chronic pain and that the

current inadequate state of treatment will be viewed as almost amusing for its naiveté, like the now antiquated treatments of “consumptives” in isolated mountain sanatoriums before the cause of tuberculosis was understood. This hopefulness is balanced by the acknowledgment that not much real progress has been made thus far and that pain will never (perhaps can never) be completely understood or treated.

The discussion of views of pain (of one’s own and of others’) in various cultures is a valuable inclusion in the book, and a real highlight is the subtle way that the author’s own experiences are woven into the story. Rather than distracting from the main purpose of the book, Thernstrom’s personal tale engages the reader, and helps her text read like a novel. The medical description of the author’s own case does not appear until about a third of the way into the book and is introduced using a writing technique nothing short of genius. Less valuable to the reader are the negative impressions given of certain clinicians based on personal style or perceived personality from the perspective of understandably nonobjective patients, who unfortunately can miss the other strengths of these physicians, such as long-standing advocacy on behalf of pain patients.

This is a special book. It is both intellectual and emotional. It does not dumb down the science, but neither does it present it dryly or forget about the person within the body. But these are just samplings, portions of the tapestry examined up close. This book has an artistry to be enjoyed in its entirety: step back and behold.

1. Carroll L. The walrus and the carpenter. In: *Through the Looking-Glass and What Alice Found There*. London, United Kingdom: Macmillan and Co.; 1872.