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Abstract

Published 09/04/2024

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## Neuropathic Pain and Fibromyalgia: A Case Study

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**Categories:** Pain Management

**Keywords:** neuropathic pain

**How to cite this abstract**

Ascione A, Alfano V, Cuccurullo P (September 04, 2024) Neuropathic Pain and Fibromyalgia: A Case Study. Cureus 16(9): a1294

### Abstract

#### Introduction

The AA present a clinical case of a young man suffering from fibromyalgia and suffering from neuropathic pain, highlighting his characteristics and clinical evolution.

#### Methods

"Chronic pain in people who suffer from it must be distinguished into primary ones such as fibromyalgia; and secondary such as post-traumatic neuropathic pain, due to the different characteristics, but above all, the pain can be distinguished into two fundamental components: the sensory system that carries the impulse from the periphery to the brain and the perceptual system that processes the impulse and allows you to feel the pain. This perceptual system is made up of cognitive, psychological, social phenomena and memories" (Bonezzi). In this case - a 26-year-old young man, a medical student - a multidisciplinary and multi-professional evaluation approach was used: internal medicine, psychiatric and psychotherapeutic medicine. The patient came to our attention presenting symptoms of widespread pain in the body, confusional state with dissociative aspects, depression, anxiety, tremor in the arms and especially in the hands. The internist noted neuropathic pain and fibromyalgia; after psychiatric evaluation he was subjected to pharmacological therapy with an antidepressant and in an initial phase also with an antipsychotic; finally sent to weekly psychotherapy.

#### Results

The psychotherapeutic treatment - has been going on for about a year and is ongoing. Thanks to therapeutic work it was possible to gradually eliminate the antipsychotic. The patient became more aware of his medical history and the origins of his pain.

Seganti, a psychiatrist, investigated the sensory memories of pain in particular subjects: pain in this case represents a constant mark on the body of the violence suffered by the alcoholic father and also experienced indirectly by him on the mother. The pain prevents the young man from living and "having the physical strength that would lead me to be violent or worse like my father", he claims. He seems to move from states of neuropathic suffering (due to possible damage induced by the physical trauma suffered) to levels where fibromyalgic pain ("nociplastic" due to alteration of the perception itself) seems to narrate the suffering suffered. Fibromyalgia pain would therefore represent an indelible sensory memory, a psychic defense system that the subject would inflict on himself to avoid becoming violent: if I have pain, I cannot cause it.

#### Conclusions

In this case it is highlighted that the subject who suffers from neuropathic pain and fibromyalgia pain seems unable to interpret it physically and emotionally, reporting that he perceives a threshold of suffering that is probably higher than what could be hypothesized. This state of pain affects the subject's quality of life and stimulates areas connected to depression, anxiety and fear, resulting in suicidal risks. The clinical case leads us to delve deeper into the life condition of the suffering subject, not only current, but linked to the family history of origin of which the pain becomes an unconscious narration.

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