Lancet Commentary

Encountering Pain

For Encountering Pain see http://www.ucl.ac.uk/encountering-pain

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Artist Deborah Padfield and facial pain consultant Joanna Zakrzewska co-organized a unique international conference, Encountering Pain, at UCL in July 2016 which brought together those who live with, treat, research and/or represent pain.

Unremitting pain is, I believe, our contemporary central dilemma (Charon 2016)

Pain, in particular chronic pain, is common and remains difficult to communicate or capture in the verbal or numerical scales commonly used in clinical practice (1-2). Recognised as a major cause of disability globally, chronic pain affects 20% of the adult European population with 28 million sufferers in the UK alone (3-4). In addition to its physical and emotional burden chronic pain results in significant financial cost to the individual as well as society, estimated at more than e200 billion in Europe and $150 billion per annum in the USA (4).

The burden of pain is substantial as are the challenges surrounding its communication. Some academics have argued that pain resists description in
language (5) while others claim it generates language (6-7). Those in pain are driven to seek ways of expressing it not only linguistically but through bodily movements, emotional reactions, and artistic expressions (8). For this reason, the Encountering Pain International conference last year at University College London brought together leading thinkers from a wide range of disciplines within narrative medicine, academia and the health professions as well as patients (whose voices were central) and practitioners from the visual arts, poetry, dance and music. At the conference poet Sharon Morris performed her poem Water Glass, using poignant and evocative language to remind us of our own vulnerability and resilience. Pain affects us all. The three Art of Medicine essays that begin this week in The Lancet arose from some of the questions explored at the conference. How do we respond when we encounter the pain of another? What happens when our own bodies encounter pain? What tools do people use when attempting to communicate pain? What contribution do non-linguistic expressions of pain play in its communication? How can we respond more productively when encountering bodies-in-pain?

The conference grew out of a three-year interdisciplinary project at UCL – entitled Pain: speaking the threshold (PSTT) – which assessed the value of images and image-making processes to the management of chronic pain. PSTT brought together a multidisciplinary team to analyse material generated during face2face. Face2face was a collaboration between artist Deborah Padfield and pain medicine consultant Joanna Zakrzewska, staff and patients at UCLH. Pain sufferers worked with Padfield at three different points in their management journey through the facial pain unit (before, during and after) to co-create images of pain which were subsequently piloted as a pack of PAIN CARDS by other patients in pain clinics (9-11). Patients
were given the images about 20 mins before their consultation and asked to use them as triggers to dialogue if and when they wanted to. The consultations were filmed and post-consultation questionnaires completed (12).

These Lancet essays explore the impact of the PAIN CARDS on clinician-patient interaction, asking what approaches are available to navigate the threshold between patients’ experience and clinicians’ understanding of pain. Elena Semino, Joanna Zakrzewska and Amanda Williams examine ways in which the PAIN CARDS, used in pain consultations impacted on verbal and non-verbal interaction. The theme of emotional disclosure is taken up by Deborah Padfield, Tom Chadwick and Helen Omand as they explore the types of narratives that emerged from encounters with the images. Joanna Bourke asks how people with chronic pain have attempted to ‘make sense’ of their affliction? She explores the changing ways people-in-pain and their medical caregivers communicated their suffering to others and how the different metaphors they use reveal the influence of culture on the body.

Taken together, these essays suggest there could be value in using pain related images in medical pain consultations. They reinforce the value of integrating the methodologies of the arts and humanities with those of medicine. Rita Charon (13) in her keynote lecture at the conference expressed a wish for all doctors to be given an ‘intravenous bolus of doubt’ (14). Visual images hold multiple meanings, encouraging clinicians and patient to work with and tolerate ambiguity and doubt, bringing about a more negotiated approach to unraveling meaning and thus helping to democratize the consultation.
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References:


Charon R (Encountering Pain keynote presentation) 2016

See: [http://www.ucl.ac.uk/encountering-pain/speakers-and-contributors/#charon](http://www.ucl.ac.uk/encountering-pain/speakers-and-contributors/#charon)

Legends:

**Fig 1** Deborah Padfield with Linda Williams from the series *face2face*, 2008 – 2013, Digital Archival Print

© Deborah Padfield

**Fig 2** *Water Glass*

© Sharon Morris

Fig 1 is an image of a shadow and hand which I am attaching to this essay but will also send as a high res image – you do not currently have this one. Fig 2 (the poem) used to be fig 3 but is now 2. None of the other images I sent you are being used for this commentary.