# The Problem of Pain: Medical, Mental, and Spiritual Aspects

Pain is central in medicine, pharmacy, and Christian faith. Much of medicine and drugs aims at alleviating pain. The cross of Christ, while accompanied by tremendous pain, is preached to contain the power and wisdom of God (1 Cor 1). One would think that this pain-related power is wielded successfully in apologetics. However, Christians regularly find themselves at the defensive end of a debate on the origin and meaning (is there any?) of pain. The talk will present the current medical pain model as a network reaction rather than the linear response to a trigger. The pain-relieving pharmacological mechanisms of analgesic substances will be explained. From there, the subjectiveness and qualia character of "pain" - which actually hamper the development of analgesic drugs - will be unfolded and finally be interpreted in Christian terms.

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I. Definition	of	Pain
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#### II. Historic Pain Models

#### III. The Current Scientific Model of Pain

#### IV. Coping with Pain Materially and Physiologically

- 1. Pain and Nociception, Neuronal and Chemical Transmission of Pain
- 2. Targets for Pain-Relieving Drugs
- 3. Quantification of Pain

### V. Coping with Pain Mentally ("looking inwards")

- 1. Pain and Consciousness
- 2. Pain: Subjective, "but" Real
- 3. Psychotherapeutic Pain Treatment

# VI. Coping with Pain Spiritually ("looking outwards")

- 1. Sociotherapeutic Pain Treatment
- 2. Palliative Pain Treatment
- 3. Faith in God and Coping with Pain

## Suggested Readings:

Book of Job

Gospel of Luke, esp. Chapters 22-24

Lewis, Clive S. The Problem of Pain, 1940

Descartes, René Traite de l'homme 1632/1662

Frankl, Viktor Ärztliche Seelsorge Wien 1982;

Albrecht, H.: http://www.zeit.de/2015/08/schmerzen-chronisch-therapie-theorie

Albrecht, H. "Schmerz. Eine Befreiungsgeschichte" Pattloch-Verlag München, 1. Aufl. 2015 Bernatzky, G. et al. (Hgg.), Schmerzbehandlung in der Palliativmedizin, Springer-Verlag, Wien 2012

Perl, E. R. Ideas about pain, a historical view. Nature Neuroscience 2007

doi:10:1938/nrn2042 Moore, A. et al., Expect analgesic failure; pursue analgesic success. *BMJ* 2013 doi: 10.1136/bmj.f2690

Murray SA, Grant E, Grant A, Kendall M. Dying from cancer in developed and developing countries: lessons from two qualitative interview studies of patients and their carers. *Brit. Med. Journal* 2003, 326, 368.