

## **The Pain Comes First!**

Fortunately, the pain most often is the only manifestation of the nerve injury. If it is accompanied with the sensitive disturbances, the luck would be of a less amplitude. However, the motor deficiencies for sure are the most sounding and the worst components of the symptomatology of nerve injury.

### **The Pain Comes First!!**

The pain is conducted by two groups of neural fibers; the myelinated group type Delta and the unmyelinated group type C. The neural fibers of the both are of a smaller diameter, a thinner neural sheath, and a lower internal osmotic pressure than the other sensory and motor neural fibers. Par consequence, they are the neural fibers the most vulnerable to whatsoever aggressivity of the surrounding environment.

The least compression on the nerve itself will early have its negative impact on the neural fibers that conduct the feeling of pain. Thus, the pain comes first.

Fortunately, this is the situation. Otherwise, many pathologies could unperceptibly install, and get force even before the patient gets attention of their presence.

### **The Condemnable Cohabitation!!**

By time, the compressive factor may augment its amplitude, and the harmful impact may then affect the other neural fibers. Henceforth, the patient starts complaining of the different sorts of sensitive and motor disturbances consequently. In such a way, the pain condemnably coexists with the sensitive and maybe with the motor deficiencies.

### **The bad and the Worse!!**

Furthermore, the increasing dose of compression could completely block the neural conduction in the feeblest neural fibers that conduct the pain itself. Hence, the pain may withdraw and leave the place to the more serious sensitive and motor deficiencies. In this sense, the presence of the pain for sure is the bad, however its absence certainly is the worse.

### **The Worst of all!!**

Unfortunately, the pathologic factor might persist and may resist against the time, then the sensory and motor neural fibers could in turn get weakened and let invaded by the harm.

In fact, the motor neural fibers (such as the fibers group alpha) are well protected against the harm. By their thick myelin sheath, they could tolerate more than the other neural fibers the external compression and the aggressivity of the surrounding as well.

However, the negligence could cause the destruction of all the defensive barriers of the neural fibers, and then announce the functional death of the nerve. Which is the worst of all.

## Conclusion

The pain certainly is a terrible experience, which we all do the best to avoid. However, fortunately it exists. Moreover, for our more luck it comes first. Hence, we find ourselves enforced to seek a medical advice.









In nerve injuries, whatsoever they are, there is always a specific chronology to follow. The pain may come first and alone. Then, the pain might coexist with the other sensitive and motor disturbances. Then, the pain may disappear, while the sensitive and the motor deficiencies deeply engrave. Finally, all the signs of life could disappear announcing the functional death of the nerve itself.

According to the pathology itself and to its energy, the second, the third, or the ultimate sequential phase could come first. For example, in the case of a complete section of the nerve, the final phase, i.e. the functional death of the nerve, could be announced at once.

Finally, listen attentively to the patient's pain. It is a faithful indicator to the nerve injury. Its pain could be the only complaint and the starter of a serious neural pathology to come. Repeat your neural examination every two weeks. Do not hesitate to open and explore the integrity of the concerned nerve. Even, before the famous electromyography could detect any trace of the nerve suffering. The insufficiency of the electromyography is quite present and will be the subject of a separate article.

---

### *In the same context, one could read:*

- [\*Neural Conduction, Personal View vs. International View \(Innovated\)\*](#)
-  [\*Neural Conduction, Action Pressure Waves \(Innovated\)\*](#)
-  [\*Neural Conduction, Action Potentials \(Innovated\)\*](#)
-  [\*Neural Conduction, Action Electrical Currents \(Innovated\)\*](#)
-  [\*The Function of Action Potentials \(Innovated\)\*](#)
-  [\*The Three Phases of Neural Conduction\*](#)
-  [\*Neural Conduction in the Synapse \(Innovated\)\*](#)
-  [\*Sensory Receptors\*](#)
- [\*Nodes of Ranvier, the Equalizers \(Innovated\)\*](#)
-  [\*Nodes of Ranvier, the Functions \(Innovated\)\*](#)

-  [\*Nodes of Ranvier, Function N1 \(Innovated\)\*](#)
-  [\*Nodes of Ranvier, Function N2 \(Innovated\)\*](#)
-  [\*Nodes of Ranvier, Function N3 \(Innovated\)\*](#)
- [\*The Philosophy of Pain, Pain Comes First! \(Innovated\)\*](#)
- [\*The Philosophy of Form \(Innovated\)\*](#)
- [\*Spinal Injury, pathology of Spinal Shock, Pathology of Hyperreflexia\*](#)
-  [\*Spinal Shock \(Innovated\)\*](#)
-  [\*The Clonus \(Innovated\)\*](#)
-  [\*Hyperactivity Hyperreflexia \(Innovated\)\*](#)
-  [\*Hyperreflexia, Extended Sector of Reflex\*](#)
-  [\*Hyperreflexia, Bilateral Responses\*](#)
-  [\*Hyperreflexia, Multiple Responses\*](#)
- [\*Nerve Conduction Study, Wrong Hypothesis is the Origin of Misinterpretation \(Innovated\)\*](#)
-  [\*Wallerian Degeneration \(Innovated\)\*](#)
-  [\*Neural Regeneration \(Innovated\)\*](#)
- [\*Wallerian Degeneration Attacks Motor Axons, While Avoids Sensory Axons\*](#)
-  [\*Barr Body, the Whole Story \(Innovated\)\*](#)
-  [\*Boy or Girl, Mother Decides!\*](#)
-  [\*Adam's Rib and Adam's Apple, Two Faces of one Sin\*](#)
-  [\*The Black Hole is a \(the\) Falling Star?\*](#)
-  [\*Adam's Rib, could be the Original Sin?\*](#)

12/9/2018