

Recovery After Stroke: Dealing with Pain

Some survivors have to deal with pain caused by their strokes. In most people, pain is a sign that the body is being harmed in some way. With stroke, that is not always the case. Sometimes stroke damage to the brain can make even normal touch feel painful. In other cases, pain is felt as a result of muscle tightness or weakness.

You may experience one type of pain or several kinds. The key is to figure out what is causing the pain so that you can treat it.

Types of Pain After Stroke

Pain after stroke can be:

- mild, moderate or severe.
- constant or on-and-off.
- on part or all of the side of your body affected by the stroke.
- felt in your face, arm, leg or torso (trunk).
- aching, burning, sharp, stabbing or itching.

Local pain after stroke is felt in the joints. Often, it comes from the unusual positioning of a joint

due to spasticity, a muscle tightness or stiffness common to stroke survivors. Mostly it is seen in the shoulder.

Central pain is constant, moderate or severe, and worsened by touch, movement, emotions and changes in temperature.

The pain tends to be felt in one part of the body, usually an arm or a leg. It is always on the side of the body affected by the stroke. You may not feel central pain in your body until weeks or months after a stroke.

Central pain is produced within the brain as a result of the stroke. It does not stem from damaged nerve endings. Rather, the body sends normal messages to the brain in response to touch, warmth, cold and other stimuli. But, the brain does not understand these signals correctly. Instead, it registers even slight sensations in the skin as painful.

Stroke survivors with central pain may:

- feel nothing when a sharp pin, warmth or cold is applied to their skin.
- experience normal touch as unpleasant and painful.
- feel more pain with emotional stress, cold or movement.

Chronic central pain can cause you to:

- stop using the parts of your body where you feel pain.
- allow muscles to weaken.
- misuse drugs, suffer from depression, and increase dependency on family members.

Treating Your Pain

To find relief, you need to figure out the source of your pain. Pay attention to when it occurs and in what part of your body. Note whether it seems to be caused by something or someone touching you. Report your symptoms to your doctor. Together, you can determine the best treatment.

Some **fairly simple solutions** you can try at home include:

- Avoid things that can cause pain, such as hot baths, tight or easily bunched clothing, and pressure on

the side of your body affected by the stroke.

- Position or splint weakened or paralyzed arms or legs to reduce discomfort.
- Use heat packs or simple exercises prescribed by your physical therapist.
- While sitting or lying down, support your paralyzed arm on an armrest or pillow to relieve shoulder pain from the arm's weight.
- Support your weakened or paralyzed arm with a sling while walking to reduce shoulder pain.

Standard treatments to control chronic pain have limited success in stroke survivors. Over-the-counter pain medicines – aspirin, acetaminophen (Tylenol®), ibuprofen (Advil®) – have not been effective in relieving stroke-related pain. Nor have prescription pain relief drugs. Surgery has not provided much relief, although research continues in this area.

However, these treatments may help:

- Antidepressant, anti-seizure and anti-spasticity drugs.
- Treatment with a physical therapist.
- Injections of cortisone (steroid shots).

- Heat and stretching exercises (for shoulder pain).
- Electrical nerve stimulation, or the application of electrical currents to the skin, may stimulate nerves and muscle fibers and improve muscle tone and strength. This may reduce pain.

Luckily, some stroke survivors with chronic pain have spontaneous remission. That is, one day the pain just goes away.

What Can Help

- Ask your doctor about the best treatments for your symptoms.
- Focus on thoughts or activities that you enjoy. You can still be active, productive and have a good quality of life.
- Get information on stroke recovery from National Stroke Association. Visit www.stroke.org or call 1-800-STROKES (1-800-787-6537).
- Contact your local stroke association.
- Join a stroke support group. Other survivors will understand, validate your issues, and offer

encouragement and ideas for pain relief.

- Try relaxation, meditation or hypnosis to manage your pain.
- Don't let pain keep you from being active. Not using your muscles can lead to muscle spasms and/or loss of muscle.
- Depression is common among those who suffer from chronic pain. Seek help if you are depressed. Counseling and/or antidepressant medicine can help.
- Speak honestly with your caregivers about your pain issues. They'll be glad you did, and, together, you can often work out the best solution.

Professionals Who Can Help

- A general physician or doctor.
- Neurologist – specializes in prevention, diagnosis and treatment of stroke and other diseases of the brain and spinal cord.
- Physiatrist – specializes in rehabilitation following injuries, accidents or illness.

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- Physical therapist – figures out and treats problems with movement, balance and coordination.
- Psychologist – specializes in the study of the mind and behavior.

Rehabilitation is a lifetime commitment and an important part of recovering from a stroke.

Through rehabilitation, you relearn basic skills such as talking, eating, dressing and walking.

Rehabilitation can also improve your strength, flexibility and endurance. The goal is to regain as much independence as possible.

**Remember to ask your doctor,
“Where am I on my stroke
recovery journey?”**

Note: This fact sheet is compiled from general, publicly available medical information and should not be considered recommended treatment for any particular individual. Stroke survivors should consult their doctors about any personal medical concerns.

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