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FACT SHEET

An Overview of the Role of Psychological and Social Factors in Neuropathic Pain

- **Whitney Scott, PhD (Clinical Psychology),** INPUT Pain Unit, Guy's & St Thomas' NHS Foundation Trust, London, United Kingdom; Health Psychology Section, King's College London, London, United Kingdom.
- **Robin Bekrater-Bodmann, PhD,** Department of Psychiatry, Psychotherapy and Psychosomatics, Uniklinik RWTH Aachen, Aachen, Germany
- **Andrea Fuenzalida Palma, MD,** MSc, Hospital Clínico Mutual de Seguridad, Santiago, Chile
- **Bipin Ghimire, MPT,** Lecturer/Physiotherapist at Kathmandu University School of Medical Sciences/Dhulikhel Hospital, Dhulikhel, Nepal
- **Mukesh Pokharel, MPT, BPT,** Department of Physiotherapy, Gandhi Tulasi Manohara Community Hospital, Kathmandu, Nepal.

What are psychological and social factors?

Neuropathic pain is influenced by biological, psychological, and social factors. Biological factors include a person's genes and how their nerves function. Psychological factors include thoughts, feelings, beliefs, and behaviors. Social factors include relationships with family, friends, clinicians, employers, and the wider community.

What research has been done?

There is a lot of research on psychological and social factors for other types of pain, like back pain. However, research on neuropathic pain has focused more on biological factors. There is less research on psychological and social aspects of neuropathic pain,[1] although this is starting to change. This means that we need to be cautious about the conclusions we draw about how these factors affect neuropathic pain and its management.

How are psychological and social factors connected to neuropathic pain?

There is likely a "two-way street" between psychological and social factors and neuropathic pain.[2,3] This means that neuropathic pain can affect a person's psychological and social well-being,[4] but it may also be true that psychological and social factors can influence neuropathic pain.[3] This does not mean that neuropathic pain is "in a person's head," or is in any way a psychological problem. All neuropathic pain is very real. It is shaped by a complex puzzle of biological, psychological, and social factors.

Our beliefs about pain and what we can do to deal with it are shaped by our culture.[5,6] For example, a person's religion and where they live can influence what pain means to them, how they manage it, and who they go to for support. What people around us believe about pain can also shape our own experiences. This means that there are many ways that people think about and deal with neuropathic pain. This is a very big topic, and only a few brief examples of psychological and social factors are given in this fact sheet.

When a person has neuropathic pain, it is very common for them to feel worried about it.[3,7] People's perception of their body may also change.[8] People may avoid certain activities or movements for fear of increasing the pain or harming their bodies. This can be counterproductive as it can actually increase the impact of pain, causing people to withdraw from everyday activities, from relationships, and to develop feelings of distress. On the other hand, people may "push through" their activities despite the pain. This can also worsen pain.[9]

People may also have feelings of sadness, loss, frustration, or anger about how neuropathic pain affects their lives. This can lead to symptoms of depression and anxiety.[4] Depression and anxiety can lead to a "vicious cycle" that can worsen the pain and its impact.[10]

Because pain is invisible, others may question whether it is real or serious. This can leave people with pain feeling misunderstood or unfairly treated. This stigma can make it difficult to talk about pain with other people, including healthcare providers.[10] All of this can add to the burden of dealing with neuropathic pain.[11]

What psychological and social strategies can help manage neuropathic pain?

People have many strengths they can use to manage neuropathic pain. When we are willing to accept pain as it is (rather than being focused on getting rid of it), this can reduce the impact of pain.[12] Spirituality, which can include connecting with a personal faith or, more generally, a sense of purpose in life, may also support well-being among people with pain.[13] Support from other people, including clear communication with clinicians, and care and support from family and friends, can help lessen the impact of pain.[14]

Cognitive-behavioral therapies (CBT) are psychological treatments that help people to become more aware of thoughts, feelings, and behaviors connected to pain. CBT helps people to learn strategies to change unhelpful "vicious cycles" between thoughts, feelings, and behavior. CBTs also help people to reflect on what they care about in life. This can help people to do things that are important to them alongside the challenges that come with pain. This type of treatment is not a cure for neuropathic pain. Instead, it can help to reduce the impact of pain on a person's life. For some practical tips about how to do this, see the links provided in the "What is Neuropathic Pain? A Guide for Patients" Global Year fact sheet (https://www.iasp-pain.org/resources/fact-sheets/what-is-neuropathic-pain-a-guide-for-patients/). There is evidence that this type of treatment can lead to modest improvements in daily functioning and well-being for people with other types of persistent pain.[15,16] While this is promising for neuropathic pain as well, more research is needed.

Living with neuropathic pain can feel lonely. Supporting people to make meaningful social connections in their communities is crucial to managing their pain. We also need to keep working to improve understanding of neuropathic pain so that people living with it are treated more kindly by others.

Taken together, psychological and social factors are important in the experience of neuropathic pain. Understanding and addressing these factors in the management of neuropathic pain is therefore crucial.

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