

Commonly encountered Head and Neck pain interactions

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Numerous studies have shown that nociceptive inflow to second-order neurones in the spinal cord and the trigeminocervical complex is subject to modulation by descending inhibitory projections from brainstem structures such as the periaqueductal grey (PAG), nucleus raphe magnus (NRM) and the rostroventral medulla (RVM). In particular, the ventrolateral division of the PAG has a pivotal role in trigeminal pain, as it selectively receives input from trigeminovascular afferents. These pain-modulating brainstem circuits are involved not only in antinociception but may also be involved in processes of central sensitization. The initiation and maintenance of sensitization process requires a sustained and somewhat continuous afferent barrage of peripheral noxious input, especially C-fibres to the second-order neurones in the central nervous system. In particular, stimulation of afferents from deep somatic tissues, such as muscle and joints, are more effective than cutaneous input in evoking such a central hyperexcitability.