

is valuable as an aid to diagnosis, for experience teaches us that certain conditions are associated with certain qualities of pain. For example, throbbing pain is characteristic of acute suppuration; the pain associated with uterine displacements is dragging; gnawing best describes the pain of chronic gastric ulcer; prickly pains are often complained of, in neurasthenia; catching pain is felt in pleurisy during respiratory movement; and in locomotor ataxia there are what are called lightning pains, which shoot down the legs, so called from their lightning-like coming and going, which are quite characteristic of the disease.

ONSET AND DEPARTURE.—The manner in which the pain starts and ceases is also of importance. It may come on gradually, suddenly, insidiously, or violently. It may slowly die away, or abruptly cease; it may be constant or spasmodic.

In a case of peritonitis it is advisable to ascertain, if possible, the origin before operating. Many things may give rise to peritonitis; for example, local inflammation, as in appendicitis, or perhaps perforation of some viscus, say, the stomach. Now, if there was a sudden onset of violent epigastric pain which compelled the patient at once to adopt a rigid attitude for fear of exaggerating it, a perforation would be suggested, and further enquiry might disclose a history of gastric ulcer. On the other hand a more or less gradual onset with increasing pain would point to inflammatory origin, and one would enquire for previous attacks of appendicitis.

In a jaundiced patient the history that the jaundice followed a sudden severe spasmodic pain would indicate gallstones; whereas the pain being of a dull constant type will make one think rather of catarrhal inflammation of the bile duct.

Again, in the later months of pregnancy, the onset of abdominal pains may raise the suspicion that delivery is at hand. Then if the pain comes on gripingly and irregularly, and is felt in front only, there is a probability that it is merely flatulence, and a gentle purge or an enema may give relief. But if there is a regularly recurring onset, with increasing intensity, and it is felt at the back, it is more likely uterine and there is likelihood that it is the commencement of labour.

TIME OF OCCURENCE AND EXCITING CAUSE.—The time when pain comes on, and what produces it furnish valuable information. It sometimes recurs at certain definite periods, or is associated with certain special conditions or actions. Common instances of each are respectively, menstrual pain, the pains of chronic rheumatism which so commonly presage bad weather, and the pain on drawing breath which characterises pleurisy. In regard to menstrual pain some information may be gleaned as to the cause by learning the exact time when the pain occurs. If prior to the onset of menses, the cause is likely to be some ovarian condition; if immediately preceding the flow, and ceasing once that is established, some obstruction or spasm at the internal os probably exists; if the pain persists after the flow is established, some cause of congestion in the uterus itself, such as displacement, should be looked for.

Chronic inflammation of bone causes severe, aching pain which occurs characteristically at night, as in Brodie's abscess. Most people have had the experience of an intense ache in the jaw which wakes them in the middle of the night, and perhaps nothing can be seen wrong with the teeth, which may be well tended and stopped. Tapping the teeth sharply in such a case will show that one is tender, due to periostitis round its root in the jaw. In chronic iritis also, pain is generally worst after midnight.

The diagnosis of stomach conditions rests largely on the time at which pain, if present, is felt. If occurring immediately upon eating, ulcer is suggested. Pain which comes on two hours or so after food, is commonly experienced in dilatation of the stomach with fermentation. "Hunger pain" felt when the stomach is empty, and relieved by taking food, is an almost certain indication of duodenal ulcer.

In cases of stone in the kidney or bladder it is often noticed that pain is excited by any jolting movement, such as riding or driving. Subjects of attacks of appendicitis also may find that for a few days after an attack they have to be careful in coming down steps, etc., and anticipate jarring by supporting the appendix region with the hand.