PAIN

City doctor does not use drugs to treat patients

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Vancouver doctor Chan Gunn is world-famous for his ability to relieve chronic pain but he is also unconventional. He defines pain differently than other doctors do and treats it differently, too.

"I see the type of pain that is the most severe in the population and I don't prescribe any drugs," Gunn boasted during an interview in his West Broadway office.

Pain, he said, comes in three types and grouping them together is as unhelpful as using the word "animal" when you could specify "horse" "walrus" or "tiger."

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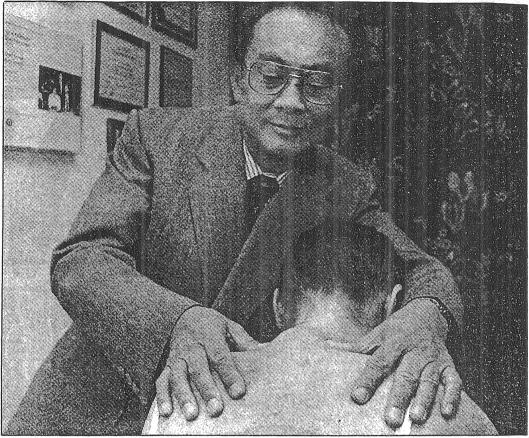
The first type of pain is the one most people think of. An external stimulus, as when "something is burning you or cutting you" that causes tissue damage to which the body's receptors react.

The second type, Gunn said, is inflammatory pain, which is betrayed by heat and swelling.

Those two types of pain are legitimately treated with drugs but Gunn said the third, far more common type — neuropathic pain, or chronic pain due to nerve damage — can be helped only by physical medicine. By that, he means hands-on treatment that heals hypersensitive nerves.

Gunn lifted the ivory-colored telephone receiver from his desk. "Very little that is wrong with the phone is in here," he said, giving it a little tap. "Most of the time, it's a problem with the line"

When patients have neuropathic pain, in which the nerve damage is often caused simply by the wear and



DENISE HOWARD

PAIN SPECIALIST Dr. Chan Gunn examines patient, looking for hypersensitive nerves

tear of aging, Gunn doesn't just take their word for what hurts.

He gives them a full physical examination, looking their bodies over for gooseflesh, for expanses of skin that dimple when pushed together, for thickened skin and for skin that retains dents when prodded with a matchstick.

He said this locates the myofascial motor points, the places in the muscle where nerves are hypersensitive.

Since Gunn's office is decorated with Chinese scrolls, it seemed reasonable to ask if this is an Easternstyle examination technique. He laughed and said: "No, this is 100-per-cent physiology. Straight physiology is not universally understood."

When Gunn finds the motor points, he pokes them with acupuncture needles. "The injury caused by the needle sets up an electrical current which will last for many days."

Yet he is at pains to distinguish his work from acupuncture and calls his technique intra-muscular stimulation (IMS).

His expertise in the diagnosis and treatment of pain has been recognized by the University of Washington, to whose Multidisciplinary Pain Service he serves as a visiting scientist.

Dr. John Loeser, director of the service, has said his procedures "offer a viable alternative to the prescription of drugs, which foster toxicity, and to surgery, which all too often causes more harm than benefit."

Earlier in his career, Gunn spent 15 years assessing work-related injuries at the Workers' Compensation Board. He believes standard medicine tends to look down on neuropathic pain, categorizing it as mere "soft-tissue injury."

In a traditional assessment of whiplash, "they say, 'This patient

has nothing wrong: Soft-tissue injury.' That's craziness. Soft-tissue injury could be blindness," he said.

"I see patients who have had whiplash for two to three years and I gradually fix them by returning each muscle to normal."

Mary Ballard, a 37-year-old Vancouver woman, began seeing Gunn for lower back pain caused by a herniated disc. She had been on anti-inflammatory drugs for 2½ years but had seen little improvement. Some days, the pain was so bad she couldn't walk.

Gunn felt her previous doctors had been barking up the wrong tree, treating her muscle pain as if it were inflammation. He gave her IMS treatments and Ballard paid for them, since they are not covered by B.C.'s Medical Services Plan.

Like anybody who finds relief from chronic pain, she says it was worth the money.