

# Non-articular musculoskeletal pain

## (January 2017)

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### Rationale

Non-articular musculoskeletal pain, though common, is rarely due to life-threatening or damaging conditions. Often referred to as "soft tissue" pain, it is a common cause for concern, which frequently prompts those affected to seek medical advice.

### Causal Conditions

(list not exhaustive)

- Generalized Pain
  - a. Acute pain (e.g., viral infections)
  - b. Chronic pain (e.g., fibromyalgia, polymyalgia rheumatica)
- Localized Pain
  - a. Acute
    - Trauma (see also Fractures and Dislocations)
    - Infection (e.g., osteomyelitis, necrotizing fasciitis)
    - Vascular (e.g., compartment syndrome, sickle cell disease)
  - b. Chronic
    - Mechanical (e.g., tendinopathy, bursitis)
    - Vascular (e.g., intermittent claudication)
    - Neoplastic
    - Neuropathic
    - Complex regional pain syndrome

## Key Objectives

Given a patient with musculoskeletal pain, the candidate will be able to differentiate symptoms arising from bone, joint, muscle, nerve or vascular causes. The candidate will be able to further classify the likely underlying pathology and determine if urgent action is required.

## Enabling Objectives

Given a patient with musculoskeletal pain, the candidate will

- list and interpret critical clinical findings, including
  - a. likely anatomic and pathogenic pain mechanisms;
  - b. determining whether the pain represents a problem requiring urgent or immediate investigation;
  - c. trigger, if any;
  - d. impact on function;
  - e. occupational and recreational history;
- list and interpret critical investigations, including appropriate laboratory investigations and other tests
  - a. initial investigations (e.g., radiographs);
  - b. further or specialized investigations (e.g., Doppler ultrasound, magnetic resonance imaging, nerve conduction studies), if indicated;
- construct an effective management plan, including
  - a. beginning urgent or acute management of serious problems;
  - b. providing patient education and counselling regarding self-limited or benign conditions;
  - c. providing counselling regarding appropriate return to activities;
  - d. referring for specialized care, if necessary.