総説

慢性疼痛の生物心理社会モデルによる俯瞰的評価と臨床実践への展開

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要旨：慢性疼痛の患者を診療する際には，生物学的モデルだけでは限界がある．つまり，痛みには原因があり，その原因がなくなれば痛みも良くなるという原因論だけでは解決できないことが多い．そこで本稿では，慢性疼痛を生物心理社会モデルに沿って俯瞰的に理解・評価する方法について述べる．社会学的要因によって強化される「痛み行動」に対しては，MPI（Multidimensional Pain Inventory）の３分類に基づいて認知行動療法における治療方針を決定する．そして，心理学的要因として慢性疼痛にはパーソナリティ障害が多く併存するため，患者のパーソナリティを評価しそれを活かすような課題を設定する．生物学的要因である脳機能の障害にはドパミンシステムスタビライザーであるアリピプラゾールや，漢方薬の効果が期待できる．

索引用語：生物心理社会モデル，痛み行動，Multidimensional Pain Inventory（MPI），パーソナリティ障害，ドパミンシステムスタビライザー

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Comprehensive evaluation based upon a biopsychosocial model is recommended to achieve good clinical practice of chronic pain

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Abstract: When treating patients with chronic pain, biological models alone have limitations. Biological models assume that some physical causes provoke chronic pain, hence pain should be relieved by removing those physical causes. However, attempts of removing possible physical causes often fail to improve chronic pain. The present authors advance a method to understand and treat chronic pain which is based upon a comprehensive biopsychosocial model. The biopsychosocial model explains chronic pain as a result of repetitive “pain behavior” reinforced by psychosocial factors. Social factors are evaluated by the Multidimensional Pain Inventory（MPI）. MPI classifies social factors into three categories, which provides clues for cognitive behavioral therapies. Regarding psychological factors, personality disorders frequently coexist with chronic pain. Evaluation of personality traits of chronic pain patients will be helpful for selecting appropriate therapeutic approaches. We also introduce aripiprazole, a dopamine system stabilizer, and traditional Japanese medicine which are expected for alleviating brain dysfunction, a hiding biological factor of chronic pain.

Key words: biopsychosocial model, pain behavior, Multidimensional Pain Inventory（MPI）, personality disorder, dopamine system stabilizer

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