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THE PARADOX OF PAIN EXPERIENCES*

LA PARADOJA DE LAS EXPERIENCIAS DE DOLOR

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Abstract: There are few things in our lives we dislike or hate so strongly as pain. On the other hand, the symptoms of the patients suffered from so-called congenital analgesia teach us that if we are deprived of the ability to feel pain, our lives would be unbelievably miserable and disastrous. In this way, if we try to understand the meaning and the value of pain, it seems we immediately find a paradox. The paradoxical character of pain is reflected in philosophical discussions between subjectivist's and objectivist's view of pain. In this paper, I try to show that the seemingly paradoxical character emerges because we are obsessed by groundless prejudice that the concept of pain must have one definite single meaning and that if phenomena of pain can be understood as multidimensional, the various characteristics of pain can be interpreted as various aspects of multidimensional pain experiences.

Keywords: Pain. Philosophy of mind. Tactile experience. Frwin Strauss.

Resumen: Hay pocas cosas en nuestras vidas que nos desagraden u odiemos tan fuertemente como el dolor. Por otro lado, los síntomas de los pacientes que padecen la llamada analgesia congénita nos enseñan que, si nos privamos de la capacidad de sentir dolor, nuestras vidas serían increíblemente miserables y desastrosas. De esta manera, si tratamos de comprender el significado y el valor del dolor parece que encontramos inmediatamente una paradoja. El carácter paradójico del dolor se refleja en discusiones filosóficas entre la visión del dolor subjetivista y objetivista. En este trabajo, trato de mostrar que el carácter aparentemente paradójico surge porque estamos obsesionados por el prejuicio infundado de que el concepto de dolor debe tener un único significado definido; y que, si los fenómenos de dolor pueden entenderse como multidimensionales, las diversas características del dolor pueden ser interpretadas como varios aspectos de experiencias de dolor multidimensionales.

Palabras clave: Dolor. Filosofía de la mente. Experiencia táctil. Erwin Strauss.

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INTRODUCTION

There are few things in our lives we dislike or hate so strongly as pain. Whenever we are assaulted by pain, we try to get rid of it as soon as possible. The long history of medicine has been a history of the battle against pain. Jeremy Bentham wrote that Nature placed humankind "under the governance of two sovereign masters: pain and pleasure", regarding pain as the main factor of the unhappiness and evil in our lives. It seems that everyone believes that a life possessed by pain is unbearable and that a life without pain would be the best and happiest one in this world.

On the other hand, it is also well known that if we are deprived of the ability to feel pain, our lives would be unbelievably miserable and disastrous. The most dramatic and frightening evidence comes from a consideration of people who suffer from so-called *congenital analgesia*, although such conditions as leprosy, diabetes, alcoholism, multiple sclerosis, nerve disorders, and spinal cord injury can also bring about the strange hazardous state of insensitivity to pain.

Many of these people sustain extensive burns, bruises, and lacerations during childhood, frequently bite deep into their tongues while chewing food, and learn only with difficulty to avoid inflicting severe wounds on themselves. The failure to feel pain after a ruptured appendix, which is normally accompanied by severe abdominal pain, led to near death in one such man. Another man walked on a leg with a cracked bone until it broke completely. (Melzack / Wall 2008, 3f)

If we take these miserable and awful phenomena into consideration, we cannot but have the opinion that pain is "one of the most remarkable design features of the human body" (Brand / Yancey 1993, 12).

In addition, people seem to intuitively know that the ability to feel pain is essential for human beings. If we discuss whether we should treat animals or fetuses as important moral beings, as we do normal human beings, we often focus on the question of whether they have the ability to feel pain. We cannot but have sympathy for living beings which or who are tortured with pain. Pain is considered to be a precious gift to us, although it is a gift nobody wants.

In this way, if we try to understand the meaning and the value of pain, we immediately find a paradox. The paradoxical character of pain is reflected in philosophical discussions concerning pain.

For example, one of the central issues concerning pain experiences in contemporary philosophy of mind is the question of whether pain experiences can be regarded as a kind of perception of some bodily injury or must be understood as essentially a subjective experience with no such intentional relation to objective factors. While the perceptual view of pain can be interpreted as a reflection of the view in which pain is understood as an important natural gift, the subjectivist view of pain could be considered to be a reflection of the view that pain has no such positive function in our lives. Reflecting the paradoxical character of pain in our lives, the philosophical dispute between objectivist and subjectivist views seems to continue endlessly.

However, is the paradox I describe here really a paradox, which we can and must dissolve? Are philosophical disputes between objectivists and subjectivists really disputes that can come to be settled in one definite way?

Is it not the case that the seemingly paradoxical character emerges because we are obsessed by the groundless prejudice that the concept of pain must have one definite single meaning?

In contrast to this prejudice, is it not the case that, if phenomena of pain can be understood as multidimensional, the various characteristics I indicate need not be understood as being incompatible, but rather can be interpreted as various aspects of multidimensional pain experiences?

Indeed, in contrast to philosophers, who have long been troubled by the seemingly paradoxical character of pain experiences, some physiologists find in them not a paradox but multidimensionality.

In the following, I focus on the multidimensional character of pain experiences and clarify the philosophical implications of this view.

First, to confirm the multidimensional character of pain experiences, I refer to some peculiar syndromes of patients known in the field of the pathology of pain.

Second, to clarify the philosophical implications of the multidimensional view of pain experiences, I take up Erwin Strauss's view of senses, in which the characteristic way of sensing pain is the focus in contrast to other senses.

Third, to explicate the meaning of Strauss's thesis that pain experiences are realized as a "disturbed embodied being in the world", I consider the relation between touch and pain more concretely.

Through these discussions, I hope to show that the seemingly paradoxical character of pain and pain experiences expresses a unique aspect of consciousness, which is realized in an embodied being in the world.

1. THE MULTIDIMENSIONALITY OF PAIN

"Yes, I feel the pain, but it doesn't bother me" (Grahek 2007, 131).

This is a typical response of patients who have received a lobotomy. Before the operation, they complained of some definite pain so strongly and so persistently that they tried every kind of treatment without any remarkable effect. But, after the operation, they no longer complain and answer questions about the pain with the statement above. Surprisingly, the results of measurements of pain intensity, pain sensation, and pain reaction thresholds in lobotomized patients do not differ from those before surgery. Indeed, they continue to feel pain as unpleasant. However, according to the researchers, the main difference is observed in the affects and attitude of patients toward pain. They no longer treat pain with anxiety or fear and become indifferent to it.

This example is already sufficiently perplexing, but there is another example, which is more perplexing and difficult to understand with our conventional concepts.

Pain asymbolia patients with lesions in specific areas of the brain show similar responses to noxious stimuli as lobotomized patients. They show neither emotions of anxiety or fear nor avoidance behavior against painful or harmful stimulations. In addition, pain asymbolia patients seem to experience no unpleasant feelings. Rather, they sometimes show a positive response to painful stimuli and sometimes laugh or smile when receiving such stimuli.

Nikola Grahek describes the symptoms of this kind of patient in the following way:

One should remember that just such selective deficits in pain experience and pain behavior were characteristic of pain asymbolia syndrome. These patients were quite capable of detecting noxious stimuli, discriminating quality, and feeling pain. But, like the monkey studied by Dong et al., they were incapable of appreciating the threatening nature of such stimuli or displaying any avoidance or escape behavior. (Grahek 2007, 63)

To characterize the experience of these patients, Grahek uses the expression "feeling pain but not being in pain". Feeling pain means, in this case, detecting noxious stimuli, and being in pain means appreciating the threatening nature of such stimuli and displaying some avoidance behavior.

However, we must be careful here, because it is questionable whether it is appropriate to use the expression "feeling pain" in this case.

If we confront these kinds of dissociation phenomena, we easily tend to interpret the relationship between a normal case and an abnormal case in the way that the normal case is constituted of dissociated factors found in abnormal cases. However, in the normal case, feeling pain and being in pain are inseparably connected, and feeling pain is considered nothing other than being in pain. If we consider the dissociated factor found in an abnormal case as a building block, with which a normal phenomenon is constituted, it is the result of a misunderstanding, which is to be characterized as a "fallacy of misplaced concreteness (A. Whitehead)", i.e., the misunderstanding that a factor resulting from an abstraction is considered to be the most basic and concrete factor.

In spite of this risk of misunderstanding, we can learn an important lesson from the dissociation phenomenon of pain asymbolia patients. This kind of phenomenon shows in a negative way that a normal pain experience is a very complex and multidimensional event or process, which is constituted of sensory, emotional, and behavioral responses to stimulations. If we take this complex character of pain experiences seriously, we can immediately understand how abstract philosophical discussions about the qualia problem are. If we detach the qualia of pain experiences from emotional and

behavioral characteristics, we would only have a diluted experience, which could be found only in such a case as pain asymbolia, and it would be far from being the essential core of a pain experience.

A similar thing can be said about the perceptual theory of pain experiences. If we understand pain experiences as purely sensory and perceptual, they would be like the experiences of pain asymbokia patients.

Both subjectivist and objectivist views of pain commit the same fallacy, namely the fallacy of neglecting the complex and multidimensional character of pain experiences.

Not only in an exceptional case such as a lobotomized or pain asymbolia patient can we find complex and multidimensional characteristics of pain experiences, we can also find them in much more common pathological cases.

For example, there is a well known difference between acute pain and chronic pain. Acute pain is pain people feel upon sustaining some physical injury. On the other hand, chronic pain is pain people continue to feel although tissue damage has healed and they no longer suffer from a definite physical injury.

Some physiologists, such as Melzack and Wall, who proposed the gate control theory of pain, criticized the naïve view of pain, according to which pain is always considered to be connected to some physical injury, and emphasized the complex and multidimensional character of pain.

Pain experience was reduced to a one-dimensional sensory experience that varied only in intensity. In the 1970s, however, the definition of pain changed from an injury-produced response to a multidimensional subjective experience. Peripheral and spinal mechanisms are obviously important. But they are only part of the story of pain. Many people suffer severe chronic pain in the absence of any detectable physical cause, which forces us to explore neural programs in the brain, where subjective experience occurs. (Melzack / Wall 2008, xii)

Pain is a complex experience, which is determined not only by physical stimulations but by a variety of factors, including the past history of the patient, the meaning of the injurious agent or situation to the subject, and the state of the mind of the subject at the moment of the experience. If we take such a multidimensional character of pain seriously, it is obvious how

naïve the question is, which many philosophers have discussed for a long time.

When it comes to philosophical questions concerning pain experiences, it has been a cliché to ask whether or not pain can be identified with the firing of C fibers, which are activated by damage to a bodily part. However, as cases of soldiers on the battlefield indicate, there are many cases in which injuries occur without any pain experiences. The reverse is also true, namely in the case of chronic pain, pain experiences occur without definite physical injuries.

In the above citation, Melzack and Wall refer to the role of brain activity to explain the complex and multidimensional character of pain experiences. Of course, brain activities play an important role in pain experiences. But, as I would like to concentrate on the task of clarifying the complex and multidimensional structure of pain experiences from a phenomenological point of view, I will not go into physiological discussions. In any case, if we take the multidimensional character of pain experiences seriously, pain experiences are to be understood neither as subjective feelings detached from every emotional and behavioral response nor as a simple physical event of C fiber firings, but as a complex and multidimensional responsive event of subjects reacting to the world in which they live.

To explicate this characteristic way pain is experienced, I would like to take up Erwin Strauss' phenomenological view of the senses.

2. PAIN AS A DISTURBED EMBODIED BEING IN THE WORLD

In the well-known work *About the meaning of senses (Vom Sinn der Sinne*), a phenomenological psychiatrist, Erwin Strauss, comprehensively criticized the popular view of sensation, which is based on Cartesian dualism or a mechanical image of the body. In this view, sensation is characterized as a preliminary stage, which prepares materials for cognition. According to Strauss, sensation cannot be considered to be a kind of cognition or one phase of cognition, but must be understood as a "communication" between the subject and the world. This relationship is realized as a responsive movement of the bodily self to the meaning of the world. "Sensing is not a confirmation of some objective facts and qualities but is a process of

confrontation with the world" (Strauss 1978, 386). Every kind of sense, from visual through auditory, olfactory, gustative, tactual to pain sense, can and should be understood as a way of "being in the world" in its particular modality.

On the other hand, each sense has a different structure and meaning, and has characteristics that cannot be reduced to those of other senses. Strauss called this relationship between different senses the *spectrum of senses*.

According to Strauss, as we interact with the world in a particular way through each sense, every sensible experience has not only a factor of intentionality, i.e., the factor of "directing oneself to (Sich-richten-auf)", but also has a "pathetic" factor (ein pathisches Moment) of "being suffered from (Getroffen-sein-durch)". The way these two factors are combined determines the characteristics of each modality. While in the case of the visual sense the intentional factor and the objective orientation are predominant, in the case of pain the pathetic factor and the character of suffering are to the forefront.

In addition, interaction with the world includes social and personal relations with other persons, so the spectrum of senses implies a variety of "I and the other relation". While each modality of the senses has its own particular variety of aspects, a fundamental theme of "I and the other relation" varies from one modality to another. According to Strauss, in the visual modality predominates a persistent relationship, in the auditory modality an actuality, in the sphere of touch a mutual relationship, in the field of smell and taste a physiognomy, and in pain a power relationship. We can even talk about a sociology of senses (Strauss 1978, 395, 402).

Seeing and contemplating someone and touching and feeling someone have essentially different meanings in our society, just as seeing disgusting things on the street and touching and tasting such things are totally different experiences for us.

In this way, the concept of the spectrum of senses includes various meanings, but when it comes to pain experiences, the difference from the other modalities is especially conspicuous. All of these circumstances are long since familiar to 'the child who once received a burn (das gebrannte Kind). The child shrinks from the fire, because it has become clear how differently the same thing reacts to her in the case where it is seen from the case where it is touched. Once and for all times, the child had learnt that it makes her painful to touch a wicked oven. We all are children who have once received a burn and know that, from seeing to touching, we not only exchange visual stimulations with tactile stimulations but that the way of contact is changed and that we experience things and ourselves in alternating aspects. Through the experience, the child learned that the oven, this unique object, can be painfully hot and it is better not to touch it. The child does not need to learn the characteristics of modalities of senses. The characteristics of senses are directly familiar as a natural gift, which makes possible that the child has such an experience about the wicked oven in its particularity. (Strauss 1978, 394)

Unfortunately, not everyone is a child who once received a burn. As I have indicated in the first part of this paper, people who suffer from congenital analgesia and other types of insensitivity to pain cannot enjoy this natural gift. When it comes to pain asymbolia patients, they can "feel" pain, which means they can discriminate noxious stimuli, but they are incapable of appreciating the threatening nature of such stimuli or displaying any avoidance behavior. In this sense, these people touch a hot oven, just as they touch a desk or just as they see a hot oven. If we take these possibilities into consideration, the description of the difference between seeing and touching, which Straus indicates in the above citation, is not sufficient. In the case of pain asymbolia patients, seeing and touching are not so different as in the case of other normal people. In this sense, what makes us children who have received a burn is not the sense of touching in general but the sense of pain in particular.

Indeed, emphasizing the event character of sensing, Strauss himself focuses on the characteristics of the sense of pain in the following way:

When someone feels pain, everything in her is brought into movement. The world penetrates into her and threatens to overwhelm her. Feeling pain means experiencing directly the disturbance of the relation to the world. Thus, feeling pain means at the same time feeling oneself (*sich-empfinden*), i.e. finding oneself in the relation to the world, or to be more exact, finding oneself changed in the bodily communication with the world. (Strauss 1978, 18)

Strauss emphasizes here the *disturbance (Stoerung)* character in the feeling of pain in contrast to other perceptual relations to the world. The disturbance means a disturbance of the relation to the world, which is realized through various senses. If we take this characteristic seriously, we must consider that even if the sense of pain belongs to one aspect of the spectrum of senses, it has a peculiar character, which cannot simply be placed in a row with other senses. While various types of sense make the relation to the world possible, or open various perceptual worlds to us, the sense of pain functions rather to disturb the relation to the world and make one focus one's attention on one's body and oneself, closing access to the world. To clarify this characteristic of the sense of pain, in the following I will consider the relationship between touch and pain more carefully.

3. TOUCH AND PAIN

When I put my finger at an edge of a desk and touch it moving my finger, I feel and find the form and texture of that part of the desk. But, if I push my finger at the edge a little more strongly or move my finger along the edge a little faster, I feel not only the form and texture of the desk but also the pressure from the desk on my finger. If I push my finger even more strongly or move faster, I begin to feel pain in my finger. If the form of the edge were to be very sharp or rough, I would injure my finger, and the pain in my finger would remain even after my finger became detached from the desk and perhaps even after the injury had healed.

In this seemingly simple experience, we can differentiate at least four types of experience.

The first one is the usual tactile experience, which is understood as a typical intentional perceptual experience. The attention of my consciousness is focused on the object, in this case, the form and texture of the desk. This type of experience is sometimes classified as *active touch* in contrast to *passive touch*, which we experience when we cannot control our exploratory activity, for example when some part of our bodies is touched by something or someone.

The second type is a tactile experience, which is constituted not only of the intentional experience of the edge of the desk but also of the feeling of pressure on my hand. Even in the first case, we could identify the feeling of pressure, if we were to change the direction of attention, but usually attention is not focused on this sensation. When we use the Husserlian concept, in the first case, a feeling of pressure constitutes a *hyletic* factor of the tactile experience, which is conscious in the sense of "lived" (erlebt), but is not objectively conscious. In contrast, in the second case, this factor is focused upon together with an objective factor. As this feeling of pressure is localized in my finger, it is also a feeling of my bodily part, and if we use a Husserlian term, it can be called *Empfindnis* (Husserl 1952, 144ff). In this sense, the experience is considered to be an experience of the qualities of a desk and at the same time an experience of my hand, thus it can be characterized as a twofold experience of my body and an object, or me and the world.

In the third type begins a feeling of pain, which takes the place of the hyletic factor or *Empfindnis* that played a role in constituting my body. The question is whether this change from the feeling of pressure to the feeling of pain brings about an essential change in the structure and the meaning of the tactile experience, and if it is an essential change, what makes the essential difference. At least in *Ideen* two, Husserl seems not to be so much interested in this question, as he takes up the feeling of pain or the feeling of being pierced together with a feeling of pressure and other tactile sensations without any particular reservations (Husserl 1952, 144ff).

As long as the pain is not so strong and is bearable, we can find a similar structure in this case as in the second case. If I can direct my attention to the object in spite of the pain in my hand, we could say that I "live" through the pain and perceive the object tactually.

However, even if I can continue to perceive the form and texture of the object, the appearance of the object is fundamentally changed. The edge of the desk begins to appear to me as a dangerous, awful, or wicked object, just like a wicked oven, which children touch and receive a burn. These characteristics are determined by emotion and value consciousness, and captivate my attention so strongly that it becomes difficult to direct my

attention to the object in a neutral way. In this way, as the pain essentially includes a value-laden and emotional character, the onset of pain changes the structure of the tactile experience fundamentally. In addition, as the feeling of pain includes an avoidance attitude, my attention begins to be distracted from the appearance of the object. It is these characteristics of the distraction from and the disturbance of the tactile experience that begin to be realized when the feeling of pain begins.

Corresponding to this process of disturbance and distraction, attention is focused on the feeling of pain itself. Consequently, the feeling of pain has a self-reflexive character, i.e., the character of feeling oneself (sichempfinden), and the subjective character of pain experience comes to the fore. But, we must be careful here. This subjective character of a pain experience does not mean subjectivity is detached from the body or the world. Feeling pain, rather, means an essential involvement in the bodily relation to the world, although it is a disturbed relation. According to Straus, the world penetrates me and threatens to overwhelm me when I feel pain. Feeling pain means suffering, but it means suffering in and from the world.

The fourth and last type of experience of the episode is the experience I have when I let my finger leave the object but the pain remains. In this situation, the disturbance character of pain is generalized. Even if I do not touch something, I continue to feel pain. A pathetic factor of "being suffered from" is not related to a definite object, but is extended to everything in the world, which I can touch with my painful finger. The world appears no longer to be a place where I can freely engage in various activities, but rather a place where I will feel an unbearable pain. "The world threatens to overwhelm me". I live in a different world from the world in which I had lived before when I felt no pain.

If the feeling of the pain in my finger remains further, although the injury is healed, the situation becomes much worse. I not only feel pain, but I cannot understand why I feel pain or why I am involved in such a disturbed relation with the world. Not only does the world threaten me, but I am alienated from the world and at the same time alienated from my own body. These are typical experiences suffered by chronic pain patients. In the case of chronic

pain patients, "the dissolution of the lifeworld" occurs and the patient is "worldless" (Morris 2013, 172).

In the case of chronic pain, we cannot easily say that we experience a disturbed relation with the world *because* we continue to feel pain, but it would sometimes be more appropriate to say that *because* we experience a disturbed relation with the world we continue to feel pain. It is no longer clear which is the cause and which is the effect. It is rather the case that the experience of the disturbed relation with the world is nothing but the feeling of pain. Just as emotional and behavioral factors cannot be detached from the sensory feeling of pain, the disturbance character cannot be detached from the feeling of pain.

The disturbance character has not only a negative meaning. It can also have a positive meaning. If our relation with the world is disturbed, we are forced to retreat from the confrontation with the world in some way or other, and it makes it possible for us to have a place and time for rest and recovery. However, this positive meaning can easily be changed to a negative one, because the abandonment of the confrontation with the world can easily be fixed, and the patient cannot find a way to the world and the pain becomes a kind of trauma and gets stronger.

Every pain experience has this ambivalent meaning related to the disturbance character, whether the pain is categorized as acute or chronic.

In addition, we can interpret this ambivalent and paradoxical character of pain experiences in a much broader perspective, because they can be considered to be rooted in the essential character of consciousness itself, which is realized as a bodily relation to the world through various senses. As far as our conscious access to the world is based on various sensory and perceptual experiences, which are realized as an embodied being in the world, our consciousness cannot escape from the vulnerability of suffering from the world. The factor that makes possible our conscious access to the world, is at the same time the factor that makes us vulnerable in our world. How to strike a balance between the two factors constitutes how to realize our lives in this world.

PROVISIONAL CONCLUSION

Think of another episode.

A small child, who runs cheerfully away from her mother, stumbles and falls on the street. She hits her knee and begins to cry. Her mother approaches her and caresses her knee, speaking to her gently. The child stops crying and begins to run again.

In this familiar case, touching the knee of the child tenderly has the function of stopping the disturbed relation and opening her access to the world again. We cannot simply say that, because her pain stopped thanks to her mother's touch, she recovered her access to the world. It is rather the case that because she recovered her access to the world thanks to her mother's touch, her pain decreased and stopped. Just as the feeling of pain is inseparable from the realization of a disturbed relation with the world, ceasing to feel pain and opening access to the world are also inseparable.

As we have seen, the multidimensionality of pain experiences shows that there are various factors in the world that disturb our relation with the world and make us feel pain. But, it is also the multidimensionality that makes our relation with the world recover in various ways. The vulnerability and resilience of our conscious lives are inseparable and constitute two sides of the same coin. The paradox of pain, which I mentioned at the beginning of this paper, could be interpreted as nothing but a reflection of this paradoxical essence of our conscious lives.

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