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OROFACIAL PAIN: PART TWO

EDITORIAL

This issue of Reviews in Pain explores some of the (putative) neurovascular and neuropathic pains that can affect the craniofacial region: Migraine, Burning Mouth Syndrome, and Persistent Dentoalveolar pain (PDAP, previously classified as phantom tooth pain, or atypical odontalgia). Mostly these pain entities have a typical presentation that makes diagnosis for the health professional relatively straightforward, but at other times they can present atypically, with other painful co-morbidities, or masquerade as another type of headache or as pathology associated with the dentition (1-7). Compounding this is the possibility that the pain may be secondary to an intracranial pathology. The articles in this issue helpfully illustrate the main presenting features for those readers who are less familiar with these trigeminally mediated pains. They also highlight that in more difficult cases and in the absence of definitive biomarkers, or investigations, more than one discipline may be needed to help establish a diagnosis.

What is clear from the papers is that advances in the understanding of the genomics and pathophysiology of conditions such as Migraine, may help further our understanding of the aetiology of some of the less well understood pains affecting the Trigeminal system. These advances in understanding are likely to translate into better management strategies either through more targeted, or more efficacious, treatment modalities. Such cross-condition and cross-discipline translational advances are clearly urgently needed in conditions such as PDAP, which can have significant psychosocial and economic impacts on the individual.

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