

An introduction to a scientific article that discusses the common psychological reactions to pain in female adolescents. Pain is an almost universal experience for most people, regardless of age, gender, or culture. The presence of pain during the course of everyday life is inevitable and unavoidable for many people. Women are no exception—in fact, they are more likely to experience chronic pain than men. Furthermore, adolescents generally suffer from both acute and chronic headaches more frequently than adults do. Women are also at a greater risk for experiencing anxiety when coping with painful events such as childbirth and sexual assault (Silberstein et al., 2013). This article will discuss how people process pain in women with various diagnoses, such as migraine headaches, menstrual cramps, chronic widespread pain (CWP), fibromyalgia (FM) and cancer. There are two major psychological components to contend with in the study of pain: expectancies and emotional responses. Both the perceptions of others about the pain experienced by women and their own emotional reactions to it can influence how they deal with pain. If expectations exist regarding certain situations in which women will experience physical discomfort, this is likely to influence their emotional responses to that discomfort, thus creating an expectation-based cycle of negative emotionality that may greatly exacerbate their physical symptoms. It is important to consider that there is a difference between the perception of pain, the emotional response to pain, and the physical symptoms that result from pain. Perceived ability to cope with stress was significantly lower among women with chronic widespread pain than among women with other diagnoses. It was concluded that women with CWP may not be able to adequately regulate their emotional states in an attempt to cope effectively with perceived stressors. This finding supports previous findings that CWP can cause significant disruption of adaptive coping abilities (Smith et al., 2008). The perception of pain involves an individual's beliefs about the event causing damage and their body's ability to cope. This perception can be influenced by an individual's thoughts and expectations about the pain. This may be due to trauma that occurred in the past or events that did not happen, such as disease or medical procedures. An individual's beliefs can also result from discussions with friends, family, health professionals, and researchers. The perception of pain can change when an individual becomes aware of how others responded to a similar situation in the past. This is called vicarious traumatization (Van Ameringen & Dornbush, 2001), which occurs when a person witnesses a traumatic event that occurs to another person in close proximity during a vulnerable emotional state, such as childbirth or sexual assault. The event can lead to the individual developing chronic pain in the future (Van Ameringen, Dornbush, & Clifford, 2000). Women in general and female adolescents in particular tend to experience chronic pain more frequently and intensely than men and older people. Thus it is important for health care professionals to understand what factors particularly contribute to the development of this type of pain in women. An area of significant concern is how women are affected by both acute and chronic pain. Some researchers have proposed that female gender is an independent risk factor for experiencing physical pain more severely than men do (Attal-Waldman et al., 2005).

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