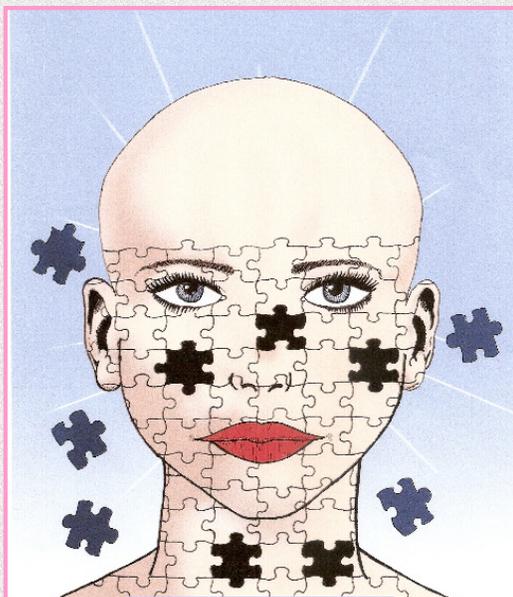


PICTUREPAINMETRIC REPRESENTATION OF THE ORAL AND MAXILOFACIAL PATHOLOGY

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Tokens to collect symptoms

Key Words: Imagin, Holograms, 3D, Acupuncture, Tatroo, Radiographic Studies, MG (Magnetic Resonance), PET.

Background and objectives:

Without any doubt, pain is one of the most frequent symptoms in medicine, and it has always been a challenge in order to try to represent it as something easy to perceive, at least to the observer, because pain is essentially subjective. Without special pretentions, we have begun an study in which in a graphic way and with measurements intentions, we can to get as close as the patient to the subject, in a way that the patient can transmit us orally and with signs, graphically the location, intensity and irradiation of the pain, and also other qualities.

In a period as our, where scientific imaginology seems to have no limits - and we talk about conventional radiology, CT, MRI, and so on, and its volumetric consequences, as the stereolithography- constitute a representative way to show us almost psychosomatic images, and we say this in a contudent way (we actually pretend to recover the volumetric aspects of the clinic symptomatolog

Methods:

The method has the objective of being much less subjective about the “pain symptom” in order to make the patient feel better understood by the professional. At the same time that the later can visualize pain graphically represented and in this way it can be easier to understand and be helpful to make a better and correct diagnosis.

For our study we are going to use simple models that represent head and neck space although it also can be extended to the thorax. In these, patients will be able to paint with a not indelible special pen, the location, extension and pain and influences or irradiation areas. Patient will do this with colors as the red for intensive pain, yellow if it is moderate, and green if it is very light or almost imperceptible. In this case, patient can substitute it for sensations as noises, contractures, and/ or vertigos and so on, and to represent this, patient will be able to write on the correspondent area.

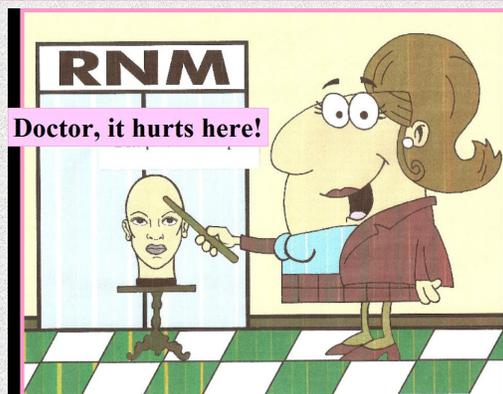
Results:

The method has the objective of being much less subjective about the “pain symptom” in order to make the patient feel better understood by the professional. At the same time that the later can visualize pain graphically represented and in this way it can be easier to understand and be helpful to make a better and correct diagnosis.

Conclusions:

We have been able to see, not without surprise, how pain description may sound similar from one patient to another and how their graphic representations can differ, making us question if medicine professionals really get to understand patients’ complaints.

Our goal with this procedure is try to make symptoms go away from the patient and at the same time transport them to other (we mean, to the model or face that we propose).



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