

# COMPLEX REGIONAL PAIN SYNDROME (CRPS)

CRPS is a poorly understood condition. It occurs most commonly following injury or surgery, although it can also occur following heart attacks, strokes or infections. It usually affects the hands or feet. CRPS varies considerably in severity and is also known by a number of other names including Reflex Sympathetic Dystrophy (RSD) and Algodystrophy.

The cause of CRPS is unknown. It is thought that in patients with CRPS the body's response to injury or surgery is exaggerated causing a greater reaction than normal. Anyone can be affected. It may occur in up to 30% of cases following wrist fracture although in most cases the symptoms are mild and resolve. There is no way of predicting who will be affected and there is no known way of preventing it. The effects of CRPS are: -

**Pain and sensitivity** - This is the most common complaint and is usually out of proportion to the severity of the injury or scale of surgery. The affected part is often sensitive to touch and just stroking the area can cause pain. Sudden shocks or jolts can also result in increased pain. When this is experienced it does not mean that further damage is being done.

**Swelling and stiffness** - Fingers may be swollen and because of this, mobility is restricted and stiffness experienced. In the hand this may result in difficulty making a fist.

**Changes in skin colour, temperature and sweating** - The affected part can become hot and red, or cold and blue. The hand or foot may sweat more profusely than on the unaffected side. Occasionally changes in the skin, nails and even hair growth are experienced.

The diagnosis is made by the symptoms described and also by the examination performed by the doctor. In later cases there may be changes seen on x-ray or bone scan.

Treatment involves a number of approaches and often a number of people. If the problem is severe or slow to respond you will be referred to a pain clinic.

**Physiotherapy** - is an important part of the treatment of pain syndromes. This is to improve comfort, prevent or relieve stiffness and to resolve specific issues. This can range from simple measures such as massage, the application of heat and exercises to more sophisticated forms of hand therapy such as sensory re-education and mirror therapy.

**Medication** - Painkillers may help you to continue most everyday activities and to exercise effectively. Medications such as Gabapentin / Amitriptyline are used to control the neurological symptoms. Specific injections may be helpful if the condition is slow to improve.

**Adjunctive treatment** - examples include trans-cutaneous nerve stimulation (TENS) and acupuncture.

**Psychological treatment** - the presence of pain can increase stress levels and make a person feel more anxious. Both of these altered states of emotion can heighten a person's experience of a pain. There are a range of techniques that can be helpful in reducing the experience of pain e.g. guided imagery, relaxation strategies and talking therapies.

Approximately 50% of cases are mild and resolve quickly and without treatment. In more severe cases symptoms may last for up to two years and occasionally longer.