

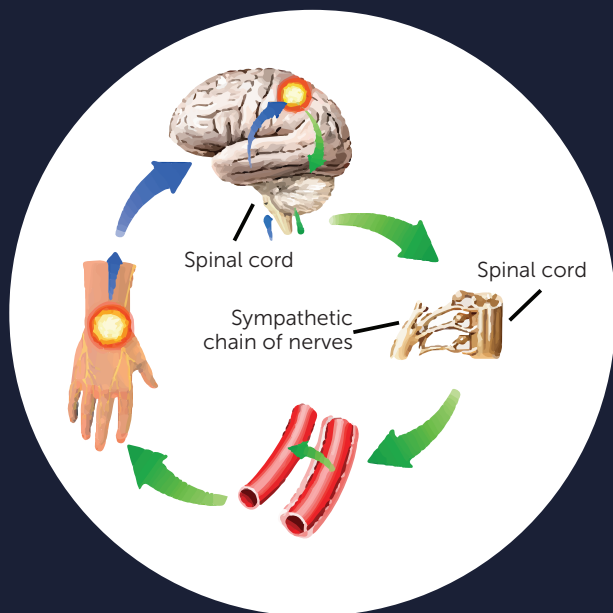
What is CRPS?

Complex Regional Pain Syndrome is a chronic pain condition that usually affects one limb (such as an arm, leg, hand or foot). The condition occurs after an injury or trauma like a fracture or minor injury eg. muscle sprain.

CRPS is categorised as:

Type 1: Occurs after an injury that did not directly damage the nerve.

Type 2: Occurs after there has been a known injury to the nerve.



For more Information,
Videos and Resources,
visit our website.

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Complex Regional Pain Syndrome (CRPS)

Who can get CRPS?

Anyone at any age can be affected by CRPS although it is more common in women with a peak at age 40.

- Rare in the elderly
- Very few under the age of 10
- No children under the age of 5 are affected

What are the symptoms of CRPS?

CRPS symptoms may vary depending on the severity and length of the condition.

However, the common features include:

- Burning pain.
- Skin colour, may become blotchy, pale, purple or red.
- Changes in skin texture on the affected area; it may appear thin and shiny.
- Swelling of the affected limb.
- Temperature changes.
- Problems coordinating muscle movements, with decreased ability to move the affected body part.
- Increased or reduced sweating.
- Reduced hair growth and nail changes.
- CRPS may be heightened with emotional stress.

What is the prognosis?

Prognosis is good if CRPS is detected early and treated appropriately.

The aim of physiotherapy treatment is to:

- Reverse and prevent further changes in the brain.
- Reduce pain.
- Preserve or restore function.
- Enable patients to manage their condition.
- Improve quality of life.

What can physiotherapy do?

Use a Graded Motor Imagery (GMI) approach.

This is done in three stages:

- 1) Left and Right Discrimination
- 2) Explicit Motor Imagery (Imagined movements)
- 3) Mirror Therapy

GMI aims to give creativity back to the brain via graded exposure.



Additional approaches such as sensory discrimination are also used for CRPS patients. With the aim of enhancing the ability to differentiate information received through the sense of touch.

Best practice recommendations:

- 1) Ensure the patient is well educated about their condition.
- 2) Initiate treatment as early as possible to improve outcomes.



Pharmacological treatments for CRPS

- 1) NSAIDs
- 2) Corticosteroid
- 3) Anticonvulsant
- 4) Antidepressant
- 5) NMDA receptor antagonist
- 6) Bisphosphonates

Interventional treatment for chronic CRPS

- 1) Sympathetic ganglion block
- 2) Ketamine infusion
- 3) Spinal cord stimulation (SCS)