

Neuropathic Pain

Introduction

Neuropathic pain, or nerve pain, results from injury to a nerve, nerve root, or the spinal cord. Often it is felt in the hands and feet, but it can occur in other parts of the body. It can last from months to years in some patients.

Causes

Some of the more common causes of neuropathic pain include:

- Chemotherapy drugs such as:
 - Cisplatin.
 - Paclitaxel (Taxol®).
 - Oxaliplatin.
 - Vincristine.
- Radiation therapy.
- A tumor pushing on a nerve.
- Surgery for cancer.
- Trauma or new injury.
- Infections such as herpes zoster (shingles).
- Chronic conditions such as diabetes.

Symptoms

Neuropathic pain often does not feel the same in everyone. It may vary from day to day. Typically, it does not feel like the pain after an injury or surgery. It is commonly described as:

- Burning.
- Cramping.
- Electric shock-like.
- Jolting.
- Knife-like.
- Numbness.
- Pressure.
- Shooting.
- Squeezing.
- Stabbing.
- Tingling.

It can be temporary or constant and may come and go.

In some people, light touch from clothing or bed sheets causes marked unpleasant sensations on the skin. This is called allodynia (al-o-DIN-e-uh). It can occur with some types of neuropathic pain. Sometimes, any form of pressure, from socks or shoes or tight clothes, can cause pain.

Assessment

Your doctor or nurse will often ask you questions about your pain when they see you in the office or hospital. Some common questions are:

- Can you rate your pain on a scale of 0 to 10? Zero is no pain at all and 10 is the worst pain you have had. If you cannot rate your pain using numbers, they may ask you to use words such as none, mild, moderate, severe, or excruciating.
- Where is your pain? What part of your body hurts?
- Does the pain stay in one place or does it move to other sites?
- Can you describe your pain?
- Is your pain constant or does it come and go?

Treatment

The goals of treatment are to:

- Decrease or eliminate the cause of the pain. For example, shrink a tumor that is pressing on a nerve.
- Provide pain relief.
- Allow you to maintain your usual activity level.
- Improve your quality of life.

Treatment is usually with one or more medicines. Common medicines used to treat neuropathic medicine are:

- Anti-seizure drugs. If you are given a prescription for one of these, it does not mean you have a seizure disorder.
- Antidepressants. If you are given a prescription for one of these, it does not mean you are depressed or that you are being treated for depression.
- Opioids.
- Topical and local anesthetics.
- Steroid medicine.

The pain can also be treated with nerve blocks. These are injections of steroids, local anesthetics, or other medicines into the affected nerves. This is done by a pain specialist.

Your doctor or nurse will tell you how and when to take your medicine. They will give you information about the medicine(s) and the possible side effects. While these medicines work well to treat neuropathic pain, they can take up to two weeks to start working. Your dose may have to be increased over the first few weeks to get to a dose that works well in relieving your pain. It is often common to try several medicines before finding one or more that work well for you. Call your doctor or nurse if you have any side effects, questions, or concerns.