Case 2- The Problem

Neuroma Pain in Persons with Limb Amputation
Financial Disclosure

• Nothing to Disclose.
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Case 2 – The Problem

- 61 y/o woman with right trans femoral amputation and phantom pain
  - History of hepatitis C, diabetes, renal disease
  - Trans femoral amputation due to complications of diabetes 5/2011
  - Increasing phantom and residual limb pain > 10
  - Multiple medications for pain management
    - Hydrocodone/acetaminophen
    - Oxycodone
    - Gabapentin
    - Pregabalin
  - No prosthetic fit issues
    - Pain prevents wearing prosthesis
Case 2 – The Problem

• 61 y/o woman with right trans femoral amputation and phantom pain
  o Physical Exam
    • Residual limb appears without problem
    • Local palpation of posterior mid residual limb
      o Small tender mass
      o Reproduces some of her phantom symptoms
Case 2 – The Problem

• 61 y/o woman with right trans femoral amputation and phantom pain
  o Diagnostic evaluation with ultrasound
    • Sciatic neuroma identified
      o Transducer pressure → phantom
      o Ultrasound guided block → relief
    • Local & Steroid – hours only
Case 2 – The Problem

• 61 y/o woman with right trans femoral amputation and phantom pain
  ○ Treatment options
    • Adjust medications – didn’t help
    • Surgery
      ○ Resect neuroma more proximally & bury in muscle
      ○ Targeted muscle reinnervation (TMR)
      ○ Possible new option – RPNI
Case 2 – The Problem

- 61 y/o woman with right trans femoral amputation and phantom pain
  - Treatment options
    - Surgery – a possible new option RPNI

Courtesy: Dr. Paul Cederna
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