Pediatric Rheumatology



Poster presentation

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A review of the management of Complex Regional Pain Syndrome; an experience of an inpatient rehabilitation unit

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Background

Complex Regional Pain Syndrome (CRPS) is a rare pain condition that causes severe pain in one or more limbs and results in severe loss of function. The management of this condition is difficult and requires a very intensive approach. In-patient rehabilitation is able to provide the intensity of physiotherapy that is required to effectively manage this condition.

Materials and methods

A retrospective case note review was performed for 23 patients with a diagnosis of CRPS. All children were seen at Great Ormond Street Hospital, which has an ambulatory rehabilitation unit able to provide an intensive programme including twice daily physiotherapy, advice on pacing and pain management over a 2–3 week period. The main philosophy of the programme is that function is regained before pain is reduced.

Results

See table 1. The mean age was 10.38 years and 72% female. Presentation included symptoms of cold, mottled skin (30%) skin allodynia (56%) and loss of function (82%) predominantly in a lower limb (95%). 65% were using walking aids. 80% were hypermobile and 100% had a significant loss of muscle strength in specific lower limb muscle groups, including hip abductors, hip extensors, inner range quadriceps and plantar flexors. The therapy included active muscle retraining to regain normal movement, function and muscle strength in 100%, only 40% also had a skin desensitisation programme. All children

improved in symptoms and function including school attendance.

Conclusion

An intensive rehabilitation approach to the management of children with CRPS is very effective in reducing pain and restoring function.

Table I:

Mean age of onset (years)	10.35	
Percentage Female	72%	
Mean time to treatment (years)	0.57	
Mean time to diagnosis (years)	I.I	
Mean time to treatment at GOSH (years)	1.5	
Mean pain score before treatment (VAS)	76/100	
Mean pain score after treatment (VAS)	19/100	
Mean CHAQ score before treatment	1.625/3	
Mean CHAQ score after treatment	0.5/3	
Reduced school attendance before treatment	80% (more than 60% of school missed in 80%)	
Reduced school attendance after treatment	40% (more than 60% of school missed in 7%)	

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