

# Central / peripheral neuropathic pain

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## Rationale

Neuropathic pain is a common and often disabling symptom with many underlying causes. It may be the initial presentation of a potentially serious underlying medical condition. Various treatment options exist. If not diagnosed and treated early, it may result in greater disability.

## Causal Conditions

(list not exhaustive)

- Metabolic (e.g., diabetic neuropathy)
- Nerve entrapment (e.g., carpal tunnel syndrome, lymphoma, trigeminal neuralgia)
- Infectious (e.g., postherpetic neuralgia)
- Central (e.g., phantom limb pain, spinal cord injuries)
- Sympathetic (e.g., reflex sympathetic dystrophy)

## Key Objectives

Given a patient with neuropathic pain, the candidate will diagnose the cause, severity, and complications and will initiate an appropriate management plan.

## Enabling Objectives

Given a patient with neuropathic pain, the candidate will

- list and interpret critical clinical findings derived from a thorough history and physical examination, including
  - a. a thorough review of the pain history (including past treatments) and psychosocial and functional impairment; and

- b. the identification of signs of neurologic impairment and other causes of pain or numbness (e.g., vascular insufficiency);
- list and interpret possible appropriate investigations, including
  - a. screening investigations for underlying medical conditions (e.g., fasting glucose level, chest radiography);
  - b. nerve conduction studies; and
  - c. vascular studies; and
- construct an effective initial management plan, including
  - a. discussing possible pharmacotherapeutic options;
  - b. counselling, including prevention of progression (e.g., chronicity of symptoms, exercise, activity modification);
  - c. providing optimal treatment of any underlying medical conditions (e.g., diabetes management); and
  - d. determining whether the patient needs a referral to a pain clinic or pain specialist.