NEUROMUSCULAR THERAPY CENTER, INC.

Innovative Physical, Occupational, & Massage Therapies for Pain Relief and Injury Rehabilitation

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[1]**RSD / CRPS...** is estimated to affect 1.5 to 6 million Americans. For both Type I (RSD) and Type II (Causalgia) treatments may include medications; nerve blocks; physical therapy; psychological support; sympathectomy; or implantable devices such as a dorsal column stimulator or intrathecal medication pumps. [2]With regard to physical therapies, the RSD/CRPS victim has to learn that they will have pain with too much exercise, and also with too much inactivity. The patient will have to find a happy medium. If nerve blocks are part of the treatment regimen, massage therapy becomes essential for success...by disseminating irritating chemicals such as nitric oxide, substance P, and CGRP; properly administered massage enhances the transmission of these chemicals through the extracellular space, to the blood system,

and their excretion through the kidneys. [7]Massage can also be helpful with lymphedema, a common problem in CRPS. [3]Most therapy protocols have primary goals of restoring function to the affected limb, alleviating pain, strengthening muscles, and reducing swelling and joint stiffness. Steps to achieve these goals include raising awareness and education of the patient regarding the need to use the limb despite the pain, raising the tolerance level for touch and desensitizing the affected area(s), increasing functional use of the limb through appropriate exercises, passive therapies, and activities directed toward pain control; increased flexibility and ROM, increased strength, better posture, improved circulation, and decreased hypersensitivity. [3,4,8]Although physical therapy is an important first line treatment for RSD, significant misuse and overuse of this modality may occur. It should be noted that RSD/CRPS is often treated by physical therapists with the same processes as a stroke or nerve plexus injury (which will fail due to extreme pain and possible injury with passive manipulation). [5]It also appears that physical therapy without supporting analgesia may only be marginally effective, but it should be noted that in the studies reviewed by this author, the therapy consisted only of exercises, or had other contraindicating components such as cyrotherapy or elevation (inactivity). [6]One of the more interesting case studies involved a hospitalized eight year old female child diagnosed with CRPS Type I, who showed absolute touch avoidance, and who could not tolerate physical therapy until after receiving an intrathecal infusion of a local anesthetic. Post treatment included twice daily physical therapy in the gym, and daily massage therapy. Seven days later the patient was discharged with pain 3/10 primarily with ambulation (on a walker). The patient continued to receive outpatient therapy three times a week, and after two months had regained nearly full range of motion, strength, and sensation, although she still showed a slight left sided limp. Both physical and massage therapies had a clear role in her recovery. [7]Like with many painful conditions, there is no shortage of alternative treatments available for RSD/CRPS, most of which are not covered by Medicare and health insurance programs. That is not the case at our practice where, in the appropriate setting, we can utilize both physical and massage therapies under our Medicare and managed care contracts.

1. Reflex Sympathetic Dystrophy Syndrome Association accessed at rsd.org (Updated March 27, 2008)
2. Hooshmand H, Hashmi H. CRPS/RSD syndrome diagnosis and therapy, a review of 824 patients. Pain Digest 1999;9:1-24
3. Kirkpatrick AF, 3 ed. RSD/CRPS. Clinical Practice Guidelines, USF, Dept. of Anesthesiology,Tampa, FL
4. Krunoslav M, Jelka P, The treatment of CRPS involving upper extremity with continuous sensory analgesia, Euro J of Pain; Vol 7, 1, Feb 2003, 43-47
5. Rho RH, Brewer RP, Lamer TJ, Wilson PR. CRPS, Mayo Clin Proc 2002;77:174-80
6. Farid IS, Heiner EJ. Anesth Analg 2007:104:1078-80

Please consider asking your doctor for a referral to our practice if you are bothered by pain, suffer from an injury, or are planning a surgery. You can print a referral form (Rx form) from the home page of this website.