Who can get CRPS?

Anyone can get CRPS at any age, but studies show that it is more common in people between the ages of 25 and 55, and is more frequently seen in women than in men. It used to be considered rare in children, but there has been a recent increase in the number of cases diagnosed among adolescents and young adults.

If you think you have CRPS

If you have an injury that isn't healing as it should, or if the pain or swelling is more severe than you expect for such an injury:

- Ask your physician if this could be CRPS
- Make sure that you are getting treatment for the pain
- Try to keep the affected area moving
- Get another medical opinion if you feel that your physician isn't taking your complaints seriously.

Is there a cure?

No, but there is hope! Advances in research on pain and CRPS have helped find some new and effective treatments. More funds and research are needed to understand the causes of CRPS, find effective treatments for those living with CRPS, and prevent the development of CRPS after injury and tissue damage.

Reflex Sympathetic Dystrophy Syndrome Association of America (RSDSA)

- Promotes public and professional awareness of CRPS.
- Educates those afflicted with the syndrome, their families, friends, insurance companies, healthcare providers, and others.
- Encourages those with CRPS to offer emotional support to others through affiliated support groups (for a list of support groups in your state, go to www. rsds.org).
- Supports research and has funded \$1,243,371 in fellowships and research grants since 1992.
- Has published Complex Regional Pain Syndrome: Treatment Guidelines (available on our website, in CD-ROM, and in print).

For more information on CRPS, joining RSDSA, or making a donation, please contact our office or visit our website.

RSDSA

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Raising awareness of Complex Regional Pain Syndrome (CRPS) and Reflex Sympathetic Dystrophy (RSD) since 1984 Reflex Sympathetic Dystrophy Syndrome Association

Recognizing, Understanding, and Treating CRPS

(more generally known as Reflex Sympathetic Dystrophy Syndrome/RSD)

A potentially disabling, chronic neurologic syndrome

www.rsds.org

Sara was the busy mother of two young daughters. Besides working full time for her husband's company, she was active in her girls' sports and scouting activities. One afternoon Sara dropped a box of books on her foot and fractured it. Instead of getting better, the foot got worse. It turned blue, was swollen, and she experienced the worst pain of her life. She visited three physicians, one of whom suggested that Sara was exaggerating her pain to get attention. Although she tried to keep up her former routine, Sara could not do it.

Finally, she was diagnosed with CRPS. Her physician prescribed medication to alleviate the pain, began a series of nerve blocks and had Sara work with a physical therapist to help her regain function in her foot. Sara still suffers pain and has had to curtail some of her activities, but with appropriate treatment, she is able to work and take part in family activities.

What is CRPS?

Complex Regional Pain Syndrome (CRPS), also called Reflex Sympathetic Dystrophy Syndrome (RSD) is a chronic neurologic disease characterized by intense and persistent pain. Although CRPS is still classified as a rare disorder (affecting less than 200,000), a newer epidemiological study conducted by de Mos et al* reported that there may be up to 50,000 new CRPS-1 cases annually in the United States. As Sara's story shows, people with the syndrome typically see several physicians before being diagnosed. We are, however, making progress in understanding this little-known and poorly understood syndrome.

CRPS occurs when part of the nervous system and the immune system malfunction as they respond to tissue damage from trauma, such as an injury or a medical procedure. The nerves misfire, sending constant pain signals to the brain. There are two types of CRPS: Type I (RSD) and Type II (Causalgia), which has definite nerve damage.

Telltale Signs and Symptoms of CRPS**

CRPS is a diagnostic consideration for people who have moderate-to severe pain that is disproportionate to any inciting event (sprain, fracture, surgery, etc.) and has some of the following characteristics:

- Pain which is described as deep, aching, cold, burning, and/or increased skin sensitivity
- The presence of an initiating noxious event (sprain, fracture, etc.)
- Continuing pain (moderate to severe) associated with allodynia (pain resulting from a stimulus that normally does not cause pain, such as the touch of clothing or water from a shower), or hyperalgesia (heightened sensitivity to painful stimulation).
- Abnormal swelling in the affected part
- Abnormal hair or nail growth
- Abnormal skin color changes
- Abnormal skin temperature (greater than 1°C asymmetry)
- Abnormal sweating
- Limited range of movement, weakness, or other motor disorders (paralysis, dystonia etc)
- CRPS is excluded by the existence of conditions that would otherwise account for the degree of pain and dysfunction

Diagnosis

Early diagnosis and appropriate treatment offer the highest probability of remission of CRPS. A physician must make a clinical diagnosis of CRPS using a patient history, a thorough examination, and the results of numerous tests. There is no single test for CRPS.

Treatment

Treatment may include a wide variety of medications, nerve blocks, physical therapy and psychological support for people with CRPS and their friends and family. Occasionally, surgical procedures are needed to control pain and abnormal nervous system responses. Treatment is individualized—each person should have a treatment plan that includes pain control, psychological support, and physical and occupational therapy.

CRPS is a Physical Disease

Many of the symptoms of CRPS are not visible to others, and often people with the syndrome don't look sick. It has not been unusual for medical professionals to suggest that people with CRPS exaggerate their pain for psychological reasons. However, research has proven that CRPS is a very real condition.

** The formal diagnostic criteria are per the recommendations of the Budapest consensus group: Wilson PR, Stanton-Hicks M, and Harden RN (eds). CRPS: Current Diagnosis and Therapy. Seatlle WA: IASP press; 2005.

^{*}de Mos M, de Bruijn AGJ, Huygen FJPM, Dieleman JP, Stricker BHCh, Sturkenboom MCJM. The incidence of complex regional pain syndrome: A population-based study. *Pain.* 2007; 129:12-20.