

Management of phantom limb with severe refractory neuropathic pain with ketamine and lidocaine



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Poster number: TU619

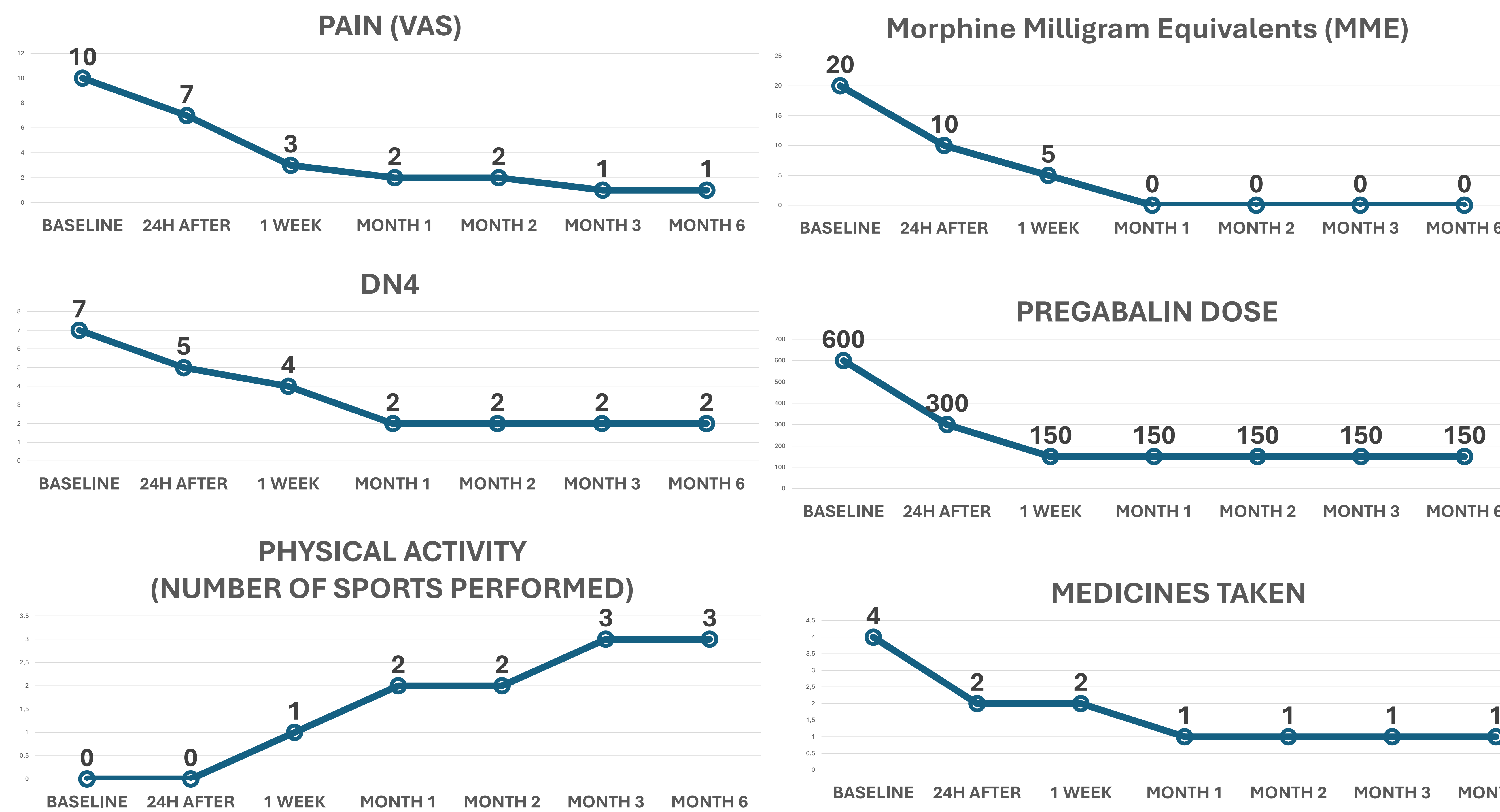
Therapy:

- Accurate diagnosis:
 - Refractory painful phantom limb
 - Polypharmacy
 - Dysthymia
- Multidisciplinary team
 - Comprehensive pain management
 - Mental health
 - Physical therapy

Pharmacological management

- Progressive withdrawal of medication: Opioids, NSAIDs, Amitriptyline.
- Admission to Suportamed, an outpatient intravenous infusion room.
- **Dexmedetomidine: 0.1mcg/kg/h, increasing doses as needed.**
- **Ketamine: 0.05 mg/Kg/H up to 0.5 mg/Kg/H. Intravenous infusion lasting 5 hours.**

Clinical Evolution:



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Introduction:

- The etiology of painful phantom limb is still unknown, however, it is a real problem for patients who suffer from it.^{1,2}
- This issue is so important that the evidence reports prevalences that exceed 80%.¹
- The therapeutic approach has been diverse and often ineffective, so the search for new therapies is important.^{3,4}
- The impact on quality of life of uncontrolled pain in an amputee patient is very high.^{5,6}

Method:

Presentation of a clinical case with literature review.

Case Overview:

- **Patient:** 32-year-old female.
- **Personal History:** None
- **Physical activity:** Soccer, climbing, mountaineering, cycling.
- **Current Disease:** Amputation of the right transtibial lower limb, initially presented fracture that is complicated by osteomyelitis, the patient is not clear about the evolution of the amputation process. (5 years ago)

The pain was initially treated with NSAIDs, without success for a few months. It is then managed with paracetamol and with incremental doses of pregabalin until reaching 600mg per day, however, the pain persists with a VAS of 6/10

3 years ago he put on the prosthesis and tolerated it with pain EVA 5-6/10. About 2 years ago the pain began to worsen and made it difficult for him to do physical activity. A year ago he worsened and resumed NSAIDs in higher doses without success, they added amitriptyline, the pain did not change and adverse events appeared. Reasons why he attends.

She comes with severe pain (10/10), does not tolerate the prosthesis, so she no longer performs sports activities, the pain is located in the phantom limb with neuropathic characteristics (DN4: 9/10), she also reports drowsiness, dry mouth and in the mental sphere: tiredness, hopelessness and emotional lability. She is incredulous and skeptical of any therapeutic option.

It is currently being managed with: Pregabalin 300mg PO BID, Naproxen 550mg PO QD, Tramadol 50mg PO BID, amitriptyline 25mg PO HS.

Issues identified:

- Uncontrolled pain
- Deteriorated quality of life
- Decreased physical activity
- Affected mental health
- Polypharmacy
- Adverse drug events.

Response to Therapy:

- Decreased pain
- Increased physical activity / Prosthesis tolerance
- Resolution of polypharmacy
- Improving the quality of life

Discussion/Conclusions:

- There is a systematic review of 18 studies and 706 participants that ratifies the effectiveness of ketamine in neuropathic pain.⁷
- The management of phantom limbs with refractory pain using ketamine has also been experienced in the literature with good results 3,8–14
- The impact of pain control on a prosthetic amputee who plays sports is positive, especially when they practice sports extensively.
- Advanced pain management involves a multidisciplinary team with a comprehensive approach and a proactive attitude.

Patient Perspective

Pain: the pain relief is awesome, life-changing.

Physical Activity: I have managed to resume my sports, I was able to do my activities, I realized that I can try many more things despite my disability.

Adverse events: ketamine infusion is not complicated, it is 5 to 6 tedious hours that have given me months of good quality of life.

Mental Health: "I see life with different eyes, I can only thank the Suportamed team".

Would you repeat the treatment? : Yes, absolutely.

Acknowledgement:

We would like to thank the entire Suportamed team that is involved in caring for people and that always gives more than 100% and that thanks to that commitment we reach excellence. People's quality of life is the engine that motivates us to continue growing and looking for new ways to alleviate suffering.

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