

Understanding and Support

CRPS is not a psychological illness, although Patients still report feeling stigmatised by health professionals who do not believe that their condition is 'real'. However, like many chronic conditions, patients often benefit from specialist psychological intervention and support to enable them to manage the challenging aspects of this condition and facilitate an improvement in their quality of life. Patients with CRPS can develop symptoms in other limbs.

Please follow the CRPS National Guidelines for treatment protocols.

Long-term care

The majority of patients with CRPS will find their symptoms improve over time, particularly with early, interdisciplinary input. The remaining patients (approx 15-20%) will have persisting pain and reduced function with marked reduction in quality of life despite treatment; dedicated, specialist CRPS intervention as early as possible improves outcome in this group but not all make a complete recovery.

Limb signs (such as swelling, sweating and colour changes) usually reduce with time, even where pain persists. Therefore an integrated interdisciplinary treatment approach is recommended, tailored to the individual patient.

Resources

Royal College of Physicians (National Guidelines):
<https://www.rcplondon.ac.uk/guidelines-policy/pain-complex/regional-pain-syndrome>

NHS Choices:
<http://www.nhs.uk/Conditions/Complex-Regional-Pain-Syndrome/Pages/Introduction.aspx>

CRPS UK Clinical & Research Network:
www.crpsnetworkuk.org

Arthritis Research UK Leaflet:
www.arthritisresearchuk.org/arthritis-information/conditions/complex-regional-pain-syndrome

Bath CRPS Service:
www.crpsandcancerlateeffects-bath.org.uk (website)
ruh-tr.RNHRDCRPSteam@nhs.net (email)

The Walton Centre:
<https://www.thewaltoncentre.nhs.uk/111/complex-regional-pain-syndrome-CRPS.html>

Pain Relief Foundation List of CRPS Centres:
<http://www.painrelieffoundation.org.uk/wpcontent/uploads/2015/04/CRPS-Centre-Name.pdf>

About CRPS UK and Contact us

CRPS UK is a charity run by and for those with CRPS. We are focused on helping those with CRPS to live the best lives that they can.

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Recognising a Patient with Complex Regional Pain Syndrome

Content of this leaflet written by CRPS UK and was approved by the CRPS UK Clinical & Research Network

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UK CRPS Guidelines

Source: Royal College of Physicians

Complex Regional Pain Syndrome (CRPS) is a neurological pain condition affecting the peripheral and central nervous system. It is an extremely painful condition that usually develops after trauma to a limb (injury or surgery). The cause of CRPS is unknown but it is known to involve the vascular, immune and nervous systems. CRPS may completely or partially resolve in the majority of cases. However, some patients may progress to a persistent condition that can greatly affect their function and quality of life.

The aims of treatment for CRPS include reduction of the pain via analgesia, and optimisation of function with appropriate physical, psychological and self-management strategies.

CRPS presents in a limb and is associated with sensory, motor, autonomic, skin and bone abnormalities. Pain is typically the leading symptom, but it is often associated with limb dysfunction and psychological distress due to living with severe chronic pain. Prompt diagnosis and early intervention are essential for effective treatment.

Diagnosing CRPS: Budapest Criteria

All of the following statements must be met:

- The patient has continuing pain which is disproportionate to any inciting event.
- The patient has at least one sign in two or more of the four diagnostic categories listed below.
- The patient reports at least one symptom in three or more of the categories.
- No other diagnosis can better explain the signs and symptoms.

Signs and Symptoms of CRPS

1. **Sensory:** Allodynia (pain to light touch and/or temperature sensation and/or deep somatic pressure and/or joint movement) and or Hyperalgesia (to pinprick)
2. **Vasomotor:** Temperature asymmetry and/or skin colour changes and/or skin colour asymmetry
3. **Sudomotor/Oedema:** Oedema and/or sweating changes
4. **Motor/Trophic:** Decreased range of motion and/or motor dysfunction (weakness, tremor, dystonia) and/or trophic changes (hair/nail/skin)

Best Practice

- Be aware of CRPS and be able to recognise the clinical signs.
- Be aware of the Budapest criteria for diagnosing CRPS.
- Initiate treatment as early as possible.
- Provide patient education about the condition.
- Encouragement of gentle limb use and an active lifestyle is recommended. Do not advise rest or immobilisation of the limb - an early return to function and access to rehabilitation can prevent secondary problems and alleviate symptoms for most patients.
- Identify and refer patient to the nearest interdisciplinary pain clinic or CRPS specialist rehabilitation centre.
- Recognise non-resolving moderate or severe symptoms and, where appropriate, initiate referral to a multidisciplinary pain clinic or CRPS specialist centre for rehabilitation.
- Amputation should not be considered as a method of providing pain relief in CRPS.