

REFLEX SYMPATHETIC DYSTROPHY SYNDROME



BASIC INFORMATION

DESCRIPTION

A chronic disorder that often affects the arms or legs, and rarely, other parts of the body. It involves the nerves, skin, muscles, blood vessels, and bones. Symptoms vary in severity and how long they last. Reflex sympathetic dystrophy can occur at any age, but is more common in ages 40 to 60. The number of cases among teens and young adults is increasing.

FREQUENT SIGNS AND SYMPTOMS

- Pain (may be burning or aching) and swelling. These symptoms may increase over time.
- Changes in skin. It may be sweaty or cold. Color may change from pale to purple/blue or gray. Affected area may be tender, thin, and shiny.
- Hair and nail growth is increased. These symptoms may decrease with time.
- Stiff joints and muscle spasms.

CAUSES

The exact cause is unknown. It usually occurs after major or minor injuries to an arm or leg. It can occur following an illness, such as a heart attack. The pain that occurs is more severe than would be expected from the injury. The sympathetic nervous system that controls blood flow and sweat glands appears to play a role in the cause.

RISK INCREASES WITH

- Genetic factors may increase the risk.
- A tendency towards increased sympathetic activity. This includes cold hands, excessive sweating, or a history of fainting.
- Major or minor injury to an arm or leg.
- Heart attack, stroke, pancreatic cancer, herpes zoster, arthritis, or nerve compression disorder.
- Chest, neck, or shoulder injury.
- The period following surgery.
- Prolonged time in a cast or splint.

PREVENTIVE MEASURES

No specific preventive measures.

EXPECTED OUTCOMES

Outcome will vary in different people. Some may be helped with treatment, some cases clear up on their own, and others have ongoing pain despite treatment.

POSSIBLE COMPLICATIONS

- Disabling pain that may affect an entire arm or leg.
- Muscle wasting (atrophy) and severe joint damage.
- Skin damage that cannot be reversed.
- Tightening of the muscles as they lose their tone. Hand and fingers or foot and toes may contract into a fixed position.
- Depression and anxiety due to chronic pain.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider will do a physical exam and ask questions about your symptoms and activities. This is often enough for diagnosis. An anesthetic injection may be given and if relief of symptoms occurs within 30 minutes, it helps to confirm the diagnosis. Other tests may be done to check for complications.
- There is no cure, but there is a variety of treatment options. These include drugs, counseling, physical therapy, splinting, surgery, spinal cord stimulation, implanted drug pumps, and others. Your health care provider will devise a treatment plan based on your symptoms.
- TENS (transcutaneous electrical stimulation) may be recommended. It uses brief pulses of electricity applied to nerve endings under the skin to relieve pain.
- Applying cold may relieve swelling and sweating. If the affected area is cool, applying heat may offer relief.
- Massage therapy will often help with symptoms.
- Biofeedback may help. It is a technique that involves learning to become more aware of your body to help you relax and to relieve painful symptoms.
- Counseling may help you learn ways to cope with the chronic pain. Joining a support group may also help.
- To learn more: Reflex Sympathetic Dystrophy Syndrome Association website: www.rsd.org.

MEDICATIONS

- You may take nonprescription drugs for pain and inflammation such as ibuprofen or naproxen.
- Steroids to reduce swelling and inflammation, drugs that widen blood vessels, injections of local anesthetic, or stronger pain drugs may be prescribed.

ACTIVITY

- Maintain normal daily activities as best you can.
- Physical therapy may be prescribed to help keep muscles flexible, strong, and mobile.

DIET

Eat a healthy diet to help maintain physical well-being.



NOTIFY OUR OFFICE IF

You or a family member has symptoms of reflex sympathetic dystrophy or pain continues despite treatment.

Special notes:

More notes on the back of this page