



## PATIENT & CAREGIVER EDUCATION

# Neuropathic Pain

This information explains the causes, symptoms, and treatment of neuropathic (NOOR-oh-PA-thik) pain.

Neuropathic pain (nerve pain) is caused by injury to a nerve. It's usually felt in your hands and feet, but it can also be felt in other parts of your body. Neuropathic pain can last for months or years.

## Causes of Neuropathic Pain

Some common causes of neuropathic pain are:

- Chemotherapy drugs. Examples are:
  - Cisplatin
  - Paclitaxel
  - Oxaliplatin
  - Vincristine
- Radiation therapy
- Monoclonal antibodies (a type of protein made in a lab that's used to treat some types of cancer)
- A tumor pressing on a nerve

- Scar tissue that forms after surgery
- A new injury or wound
- Infections, such as the herpes zoster (shingles) virus
- Chronic conditions, such as diabetes

## **Symptoms of Neuropathic Pain**

Neuropathic pain often feels different for everyone. It may also feel different from day to day. It doesn't feel like the usual pain after an injury or surgery.

Neuropathic pain can feel like:

- Burning
- Cramping
- Jolting pain (electric shock)
- Numbness
- Pressure
- Shooting pain
- Squeezing
- Stabbing pain
- Tingling (slight stinging or poking)

For some people, a light touch (such as from loose clothes or bed sheets) may feel unpleasant on the skin,

or even painful. This is called allodynia (al-o-DIN-e-uh). It can happen with some types of neuropathic pain. For other people, any form of pressure (such as from socks, shoes, or tight clothes) can cause pain.

## **Assessment of Neuropathic Pain**

Your healthcare provider will ask you questions about your pain, such as:

- On a scale of 0 to 10, where do you rate your pain? “0” is no pain at all and “10” is the worst pain you’ve had.
  - If you can’t rate your pain using numbers, they may ask you to use words such as “none,” “mild,” “moderate,” “severe,” or “excruciating.”
- Where is your pain? What part(s) of your body hurts?
- Does the pain stay in one place or does it radiate (move to other areas)?
- Is your pain constant (doesn’t stop) or does it come and go?
- Can you describe your pain?

For more information about how to describe your pain, watch the video below.



Please visit [www.mskcc.org/pe/neuropathic\\_pain](http://www.mskcc.org/pe/neuropathic_pain) to watch this video.

## Treatment of Neuropathic Pain

There are many goals for treating neuropathic pain. The main goals are to:

- Reduce or remove the cause of your pain. For example, your healthcare provider may try to shrink a tumor that's pressing on a nerve.
- Give you pain relief
- Allow you to keep your usual activity level
- Make your quality of life better

Treatment for neuropathic pain usually includes medications or nerve blocks.

### Medications

Usually, people take 1 or more medications to help treat neuropathic pain. Examples are:

- Antiseizure medications. If you're given a prescription for one of these, it doesn't mean you have a seizure disorder (such as epilepsy). These medications help to calm the nerve(s) causing the pain.

- Antidepressants. If you're given a prescription for one of these, it doesn't mean you're depressed or being treated for depression. These medications help to calm the nerve(s) causing the pain.
- Opioids (a strong prescription medication used to treat pain)
- Topical and local anesthetics (medication to numb your skin or a small area of your body)
- Steroid medication

Your healthcare provider will tell you how and when to take your medication(s). They'll give you information about the medication(s) and their possible side effects.

These medications work well to treat neuropathic pain but can take up to 2 weeks to start working. Your doctor may need to raise your dose (how much medication you take) over the first few weeks. This will help you get to a dose that works well in easing your pain. It's common to try a few medications before finding 1 or more that work well for you.

## **Nerve blocks**

You can also treat neuropathic pain with nerve blocks. A nerve block is an injection (shot) of a steroid, local anesthetic, or other medication directly into the nerve(s)

causing the pain. This stops your nerve(s) from sending pain messages to your brain. If you're getting a nerve block, a pain specialist will perform the procedure.

## **Contact Information**

If you have questions, need to talk to someone about your pain control, or have any side effects after your treatment, call the Anesthesia Pain Service at 212-639-6851. You can reach us Monday through Friday, from 9:00 a.m. to 4:00 p.m.

If it's after 4:00 p.m., during the weekend, or on a holiday, call and ask for the anesthesia pain person on call.

For more resources, visit [www.mskcc.org/pe](http://www.mskcc.org/pe) to search our virtual library.

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