Neuropathic Pain

This information explains the causes, symptoms, and treatment of neuropathic pain.

Neuropathic pain (nerve pain) is caused by injury to a nerve. It’s usually felt in the hands and feet, but it can also happen in other parts of the body. Neuropathic pain can last from months to years.

Causes of Neuropathic Pain

Some common causes of neuropathic pain are:

- Chemotherapy drugs. Some examples include:
  - Cisplatin
  - Paclitaxel
  - Oxaliplatin
  - Vincristine
- Radiation therapy
- Monoclonal antibodies
- A tumor pushing on a nerve
- Scar tissue that forms after surgery
- Trauma or a new injury
Infections, such as the herpes zoster (shingles) virus

Chronic conditions, such as diabetes

Symptoms of Neuropathic Pain

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

Neuropathic pain is described as:

- Burning
- Cramping
- Electric shock
- Jolting
- Stabbing pain
- Numbness
- Pressure
- Shooting pain
- Squeezing
- Stabbing
- Tingling

In some people, light touch from clothing 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 some people, any form of pressure (such as from socks, shoes, or tight clothes) can cause pain.

**Assessment of Neuropathic Pain**

Your doctor or nurse 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 have 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 of your body hurts?
- Does the pain stay in one place or does it move to other areas?
- Can you describe your pain?
- Is your pain constant or does it come and go?

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

Please visit [www.mskcc.org/pe/describe_cancer_pain](http://www.mskcc.org/pe/describe_cancer_pain) to watch this video.

**Treatment of Neuropathic Pain**

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

- Decrease or remove the cause of the pain. For example, your doctor may try to shrink a tumor that’s pressing on a nerve.
- Give you pain relief
- Allow you to keep your usual activity level
- Improve your quality of life

Treatments for neuropathic pain usually include medications or nerve blocks.

**Medications**

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

- **Antiseizure medications.** If you’re given a prescription for one of these, it doesn’t mean you have a seizure disorder. These medications help to calm the nerves that are causing the pain.
- **Antidepressants.** If you’re given a prescription for one of these, it doesn’t mean you’re depressed or that you’re being treated for depression. These medications help to calm the nerves that are 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 doctor or nurse will tell you how and when to take your medication(s). They will give you information about the medication(s) and their possible side effects.

These medications work well to treat neuropathic pain, but they can take up to 2 weeks to start working. Your dose may have to be increased over the first few weeks to get to a dose that works well in relieving your pain. It’s common to try several medications before finding 1 or more that work well for you.

**Nerve blocks**

Neuropathic pain can also be treated 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. If you’re having a nerve block, it will be done by a pain specialist.

**Contact Information**
If you have any of these side effects after your treatment, call the Anesthesia Pain Service at 212-639-6851. You can reach us Monday through Friday from 9:00 AM to 4:00 PM.

If it’s after 4:00 PM, during the weekend, or on a holiday, call 212-639-2000 and ask for the anesthesia pain person on call.

For more resources, visit www.mskcc.org/pe to search our virtual library.