

replacement surgery. However, occasionally, the pain after surgery may become persistent and last longer than expected, we call it chronic post-surgical pain.

Symptoms

- Develops after a surgical procedure
- Continues for three months or more
- Is not due to other causes, e.g., malignancy and chronic infection, or an existing condition

Causes

Patients who have undergone the following surgical procedures are more likely to develop chronic post-surgical pain

- Limb amputation
- Thoracotomy
- Cholecystectomy
- Hernia repair
- Breast surgery

Treatment Options

Include orally taken drugs or minimally invasive targeted injections with local anesthetics.

For severe cases of chronic post-surgical pain, implantable devices may have to be considered.

At times chronic post-surgical pain causes distress and in severe cases, depression. Psychological guidance can be helpful for such patients.

Cancer Pain

Cancer pain occurs in up to 90% of patients. Approximately 30 to 50% of cancer patients experience pain while undergoing treatment. Pain is one of the most feared symptoms when patients are diagnosed with cancer. With specialized treatment more than 90% of all cancer pain can be well managed. This can help to dramatically improve the quality of life.



Causes

Most cancer pain is caused by the tumor pressing on bones, nerves or other organs in the body. Sometimes pain is related to the cancer treatment being received.

Treatment Options

Medications are the cornerstone of cancer pain treatment (various combinations of medications which may include medications to treat nerve and bone related pain.)

For severe cancer pain uncontrolled by medications, specialized advanced treatment procedures (guided by our oncologists and radiotherapists) may be used.

These include

- Nerve blocks, involving the injection of anaesthetic medication into affected areas.
- Spinal infusion of drugs, providing long-term pain control.

Chronic cancer pain often causes patients significant distress and in severe cases, depression. Psychological guidance is advised in such cases.

Neuropathic Pain

Neuropathic pain refers to pain due to damage or dysfunction in the nervous system.

Symptoms

- Burning and shooting pain
- Tingling and numbness
- Pain increased on touch

Causes

Some conditions that are linked to neuropathic pain include

- Diabetes



- Nerve pain from slipped intervertebral disc
- Post-herpes zoster pain
- Spinal cord injury
- HIV-related nerve pain
- Central post-stroke pain

Treatment options for neuropathic pain include local anaesthetic cream, nerve stabilizing medications, nerve root decompression treatments, epidural injections, nerve blocks and spinal cord stimulation.

Leading Edge

We are one of the few places in the city to offer advanced techniques such as the intrathecal medication pump and spinal cord stimulator for the management of intractable chronic pain in both cancer and non-cancer patients. Select patients who do not respond to conservative methods of treatment and meet specific criteria may be recommended for such treatments.

The Intrathecal Medication Pump

The Intrathecal Medication Pump is an internal drug delivery system, used mostly by cancer patients.

The system consists of a surgically placed pump and a catheter (a very thin flexible tube). The pump is implanted under the skin in the abdominal area while the catheter resides in the space around the spinal cord. The catheter is then tunneled under the skin and connected to the pump.

The pump reservoir is filled with medication that flows in continuously. Depending on your condition and needs, the pump is refilled every one or three months on an outpatient basis. An external non-implanted pump may also be used.



The Spinal Cord Stimulator

Spinal Cord Stimulation is the stimulation of selected nerves by tiny electrical pulses. A lead is implanted in the fatty layer of tissue in the epidural space surrounding the spinal cord. Connected to a battery system implanted in the abdominal area beneath the skin, the Spinal Cord Stimulator sends electrical impulses to the nervous system that partially block pain messages to the brain.

The Spinal Cord Stimulator replaces some of the pain with the sensation described by some patients as tingling. The reduction of pain varies from patient to patient. A Spinal Cord Stimulator will not mask sharp pain from a new injury.

The stimulator will be programmed to suit your condition, both during the time of implant and on an outpatient basis, as and when it is necessary. A test implant will be inserted first before a long-term implant is considered.

This is a reversible procedure, the stimulator does not damage the spinal cord or the nerves.

For any further information contact
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Manage Your Pain



HINDUJA HOSPITAL

Pain is a common problem which makes people seek medical advice. Injuries and illnesses are typical triggers of pain.

Everyone experiences some degree of pain in day to day life. However when this pain becomes persistent and causes disturbed sleep or interferes with your daily routine, like work or socializing with family and friends, then it requires specialized evaluation for successful management.

At Hinduja Pain Clinic, we believe in a compassionate patient-centered program to obtain the most effective long-term relief.



- Headache and Facial Pain
- Neuropathic (Nerve) Pain
- Pain after Surgery
- Myofascial pain and Fibromyalgia
- Post-Injury Chronic Pain (Complex Regional Pain Syndrome)
- Cancer-related Pain

During the first visit, a pain physician will evaluate the type, cause and severity of pain and give a detailed treatment plan that best suits each patient's needs covering immediate to long term management ranging from physical therapies to pharmacological treatments and minimally invasive procedures.

Common therapeutic Pain Management procedures include

- Lumbar and Cervical facet joint injection
- Sacroiliac Joint injection
- Epidural steroid and Nerve root injection
- Sympathetic Blocks
- Radiofrequency Lesioning
- Intrathecal Drug Delivery
- Neurostimulation
- Epidural Lysis of Adhesions

Most of the above procedures are done under fluoroscopic guidance to ensure correct and precise localization of needle and delivery of treatment.

Back Pain

About 50-80% of adults suffer from back pain at one time or another in their lives. It may be related to strain or injury during lifting or movements. Most back pain attacks resolve after a few days or weeks after taking simple pain-killers. However, if it persists or recurs regularly, one should seek professional help.



Symptoms

- Pain in the back or outer side of the thighs
- Pain going down the legs and getting worse on coughing, sneezing or bending forwards
- Pain getting worse at night
- Numbness and weakness in the legs

Causes

The most common causes of low back pain are

- Strain or inflammation of muscles, ligaments and joints
- Pressure on nerve roots in the spine
- Fractures of the spine bones especially in osteoporotic patients

Treatment Options

Treatment can be either surgical or non-surgical, depending on patient's condition.

Non-surgical

• Medication

Many patients benefit from medication, which relieves low back pain and reduces inflammation or muscle spasms. Medications may be prescribed for the treatment of the nerve pain as well.

• Physiotherapy

A team of highly trained professionals will help to relieve the pain using various treatment modalities and prescribe specific exercises to strength the back muscles.

• Interventional therapy

This is used to treat the underlying cause of spine problem, mainly in the form of injections. Most of the procedures are done under X-ray guidance so as to target the exact level of problem in the spine and to ensure precise delivery medications in small and only required amounts.

Subsequent treatment may include

- Radiofrequency ablation of the nerves
- Nerve root repair using micro catheters
- Intradiscal therapy which helps in shrinking the disc

Surgical

You will be referred to an Orthopaedic surgeon for further assessment if necessary.

Neck Pain

Your neck supports your head and allows for the free flow of nerve impulses to the head, face, hands and the rest of your body. Your neck is especially vulnerable to disorders that produce pain and restrict motion as it is less protected than the rest of your spine.

Symptoms

- Continuous, persistent neck pain
- Neck pain along with pain going down the shoulders, arms or legs
- Neck pain along with headaches
- Weakness, numbness or tingling in the arm

Causes

- Strains and injuries in the muscles, ligaments and joints of the spine
- Pressure on nerve roots in the spine
- Prolonged use of a computer keyboard
- Falling asleep in awkward position
- Worry and stress

Treatment Options

Comprehensive examination for neck motion, neck tenderness, and the function of the nerves and muscles in your arms is done. These simple examinations will help to determine the cause of your neck pain and enable us to prescribe the most appropriate and effective treatment.

Patients who require further evaluation may need to undergo further tests

- MRI (Magnetic Resonance Imaging) scan of the neck helps in evaluation of all spinal cord and nerve roots
- CT (Computed Tomography) scan helps in evaluation of bone and spinal canal
- EMG (Electromyogram) and NCS (Nerve conduction study) helps evaluate nerve and muscle function.

Further treatment will depend on your diagnosis. Most patients are treated successfully with medication, acupuncture, physiotherapy, exercise, and/or activity modifications at home and work.

Interventional therapy, mainly in the form of microinjections, is used widely. Such procedures are done under the guidance of X-ray to ensure accuracy and safety. These injections take about 30 minutes and are performed under local anaesthesia with mild sedation. You will be fit to go home after one to two hours under observation.

Other treatment methods include the use of radio frequency ablative techniques (a form of thermal energy), cryotherapy, nerve repair therapy (neuroplasty) and implantation of computerized implants or nerves stimulators.

Pain After Surgery

Do you fear surgery because of possible pain after the operation? There is good news, most surgical pain can be adequately managed with a little attention.

Our Acute Pain Service helps manage all patients who undergo surgery. This is mainly done with the use of PCA (Patient Controlled Analgesia) pump or Epidural pump. New techniques like advanced nerve blocks with catheters are also used especially during knee

Multi Disciplinary Approach

As we are a tertiary care institution with multiple medical specialties, patients can be assured that appropriate referrals are easily carried out and conditions treated effectively without delay.

Treatment Options

Our highly trained medical staff and advanced techniques go a long way to ensure that you benefit from our

- Appropriate guidance by our medical consultants
- Medical treatments
- Interventional Pain Management procedures
- Surgical procedures
- Physiotherapy
- Psychological Counseling

Our Services

We assist patients suffering from pain caused by a variety of conditions, including

- Low Back Pain
- Neck Pain

