

What is Nerve Pain Surgery?

Many causes of chronic pain can be successfully treated with minor outpatient operations. Chronic pain after surgery, accidents, trauma, and sports injuries that has not been relieved by first-line methods may be due to injury to peripheral nerves. Patients often visit several doctors and engage in multiple therapies including physical therapy, medications, orthopedic treatment, or spinal nerve blocks without significant relief. Medications often only reduce or mask the symptoms—unfortunately, patients with chronic pain from peripheral nerve injury rarely experience lasting relief from medications.

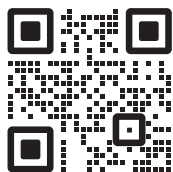
New techniques have been shown to reduce or eliminate pain. Neuropax Clinic is one of a handful of institutions offering surgery as an option for patients who may have exhausted other methods of treating their pain.

The type of procedure depends on the location and cause of the pain. In many instances, the pain results from compression of (pressure on) a specific nerve. In such cases, relieving the pressure relieves the pain.

Nerves do not like to be “squeezed”. There are some very narrow areas that nerves pass through—these areas are set-ups for compression of the nerve due to swelling or bruising from an injury, after surgery, or sometimes spontaneously. Examples include

carpal tunnel syndrome, common peroneal nerve, piriformis syndrome, lateral femoral nerve, etc. If it is determined that your **pain is due to compression** of a nerve, a small operation can be performed to **relieve pressure on the nerve**. The tight space that the nerve goes through is opened surgically, giving it needed room to conduct signals normally, get good blood flow, and glide normally.

Nerves also cause pain when they are cut, stretched, caught up in a scar, or otherwise injured by surgery or trauma. Nerve resection has great success in these cases—around 80%, depending on the individual patient. In order to increase the chances for success even further, special treatments have recently been developed to “cap” the end of the cut nerves. Grafts of nearby muscle or skin are often placed around the ends of the nerve during surgery to prevent them from regrowing and causing pain again. These procedures, developed and pioneered at the University of Michigan, are called Regenerative Peripheral Nerve Interface (RPNI—muscle grafts, and DSPNI—skin grafts). The goal is to give the new ends of the nerves something to grow into, thereby preventing the recurrence of nerve pain. These techniques have been used to treat nerve pain and phantom pain due to amputations, surgery, and injury all over the body.



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