

MANAGING RESIDUAL LIMB and PHANTOM LIMB PAIN

INITIAL PAIN

All individuals undergoing amputation will experience initial pain in the residual limb.

This pain will most often diminish with healing time and with the initiation of limb massage, exercise and socket fitting.

PHANTOM SENSATION

Nearly all individuals undergoing amputation will experience phantom sensation, or the feeling that the absent limb is still there. This is not necessarily painful, but rather the sensation of an itch or the twitching of the toes, etc.

Some phantom sensation will usually be present for life, but will substantially decrease with healing and prosthetic use.

PHANTOM PAIN

Far less consistently, phantom pain will be experienced. Often this is described as a piercing or twisting sensation in the area of the absent foot. It is reported that the higher the level of amputation or the more painful the trauma to the lower limb prior to the amputation, the greater the tendency to have phantom pain. The cause of phantom pain is not fully understood.

There is not one treatment that works for everyone; however, the vast majority of individuals undergoing amputation find that phantom pain is greatly reduced when functional walking with a prosthesis is mastered. This does not mean pain is completely abolished, but it becomes progressively less frequent and more short-lived, often only seconds long and weeks to months apart.

Let us look at one widely accepted theory of the cause of phantom pain to help in understanding how some treatments can reduce symptoms. We know that a great deal of damage has occurred to the neurologic system within the limb, causing an increase in excitatory or painful messages sent up to the brain. At the same time, a degree of the inhibitory or non-painful messages that are generated from the surface area of the limb or skin have been eliminated with the amputation of the limb.

To understand this more simply, consider being hit in the arm. The first thing you do is grab your arm or rub it over a broad area which causes inhibitory messages to be generated from the skin and diminishes the perception of excitatory or painful messages coming from the irritated internal nerves. This process explains why many of the self-treatment options given on the attached sheet can work.