

## DID YOU KNOW?

In 1995, RSD was renamed *Complex Regional Pain Syndrome*. It is poorly recognized and misunderstood in Canada.

“Over 50% of cases remain undiagnosed”, reports Dr Schwartzman, neurologist and leading CRPS/RSD researcher.

WHY??

There is a distinct lack of public awareness in the health care community. Awareness can only be improved through education. Moreover, in Canada, there is no standard protocol for treating RSD/CRPS. More research is urgently needed to find the cause and cure.

## WHEN TO SUSPECT RSD/CRPS

“Excruciating pain; stiffness, inflammation following minor trauma....

Persistent pain and swelling of unexplained origin aggravated by bed rest or upon awakening.”

(Source: CRPS: Diagnosis and Therapy by H. Hooshmand MD Springer Verlager 1999).

## WHAT CAN YOU DO?

Early diagnosis (and treatment) brings the best prognosis.

If left untreated, there could be severe chronic pain.

Contact us.

## WHAT DO WE DO?

- give support, information, encouragement to RSD/CRPS patients, their families and friends
- promote awareness of RSD/CRPS through education, disseminating information
- provide referrals to health care professionals who have treated and managed CRPS
- support research into the causes, controls and cures for RSD/CRPS

*If you suspect or know a person has RSD/CRPS, please contact:*



**P.A.R.C.**

PO Box 21026  
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Canada L2M 7X2



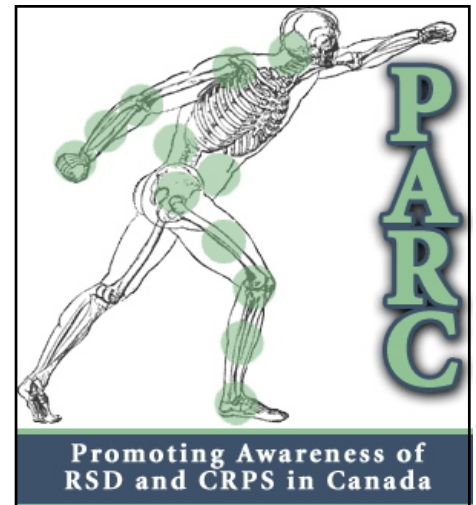
**HELP LINE: (905) 934 0261**  
**HOURS: Mon.-Thurs.**  
**7-10 PM evenings only**

PARC is a registered  
charitable organization.

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## DO YOU HAVE COMPLEX REGIONAL PAIN SYNDROME (CRPS) AKA REFLEX SYMPATHETIC DYSTROPHY (RSD)?

*Do you have burning pain?  
Is it out of proportion to the injury?  
Has it lasted longer than the  
expected healing time?  
Please read on...*



**“RSD: It’s not a walk in the PARC”**

**Web: <http://www.rsdcanada.org>**

## **P.A.R.C: PROMOTING AWARENESS OF RSD/CRPS IN CANADA**

*Our mission is to support, educate, and inform persons with Complex Regional Pain Syndrome (CRPS), their families, friends, the community and the medical professionals treating CRPS, about the utmost importance of early diagnosis and treatment.*

*Do you suspect or have you been diagnosed with RSD/CRPS?*

### **PARC HELP LINE**

#### **OFFICE HOURS:**

**MONDAY—THURSDAY  
EVENINGS 7-10 P.M. (EST)**

**TEL: (905) 934 0261**

#### **WEB SITE:**

**<http://www.rsdcanada.org>**

**EMAIL: [rsdinfo@becon.org](mailto:rsdinfo@becon.org)**



## **WHAT IS RSD/CRPS?**

- RSD/CRPS is a multi-system, multi symptom disease characterized by chronic pain usually affecting one or more limbs but it can affect any part of the body
- The blood supply to the limb (hand, knee, foot, hip, shoulder) is affected.
- The function of the limb may also become impaired.
- If diagnosed early, it can be treated effectively. If left untreated, it can spread to other parts of the body.
- Recent studies point to nerve damage in the small C fibers (Oaklander 2006)

## **WHAT CAUSES RSD/CRPS?**

- 65% of cases are caused by soft tissue injury due to minor trauma e.g. sprain,
- common cause: fracture or surgery
- some neck/back disorders (cervical spine/spinal cord disorders)
- other: infections, stroke, heart attack, cumulative trauma, repetitive motion disorders, carpal tunnel syndrome

## **WHAT ARE THE SYMPTOMS?**

- pain: constant burning in area other than primary injury site
- swelling
- skin changes: temperature and color (warm/red or cool/blue, mottled)

- limited active range of motion
- increase of complaints after exercise
- other: motor dysfunction (tremor, weakness, muscle atrophy), limbic system dysfunction (insomnia, agitation, depression, memory loss, anxiety), hair, skin and nail changes, sweating

## **HOW IS IT DIAGNOSED?**

- There is **NO SINGLE TEST.**
- thorough medical history and physical exam by a qualified physician
- thermography may be helpful

## **HOW IS IT TREATED?**

Treatment may include:

- drugs: NSAIDS, anti-depressants, opioids
- blocks: focal, sympathetic, epidural
- physical therapy or aqua therapy: to restore function of limb
- sympathectomy: surgical or chemical in selected cases only
- spinal cord stimulator (SCS) or peripheral nerve stimulator (PNS), morphine pump
- psychological support: counselling to acquire coping skills, relaxation techniques, guided imagery, cognitive behaviour therapy (CBT)
- complimentary alternative medicine options e.g. photon therapy