INTRODUCTION

Complex Regional Pain Syndrome (CRPS), formerly reflex sympathetic dystrophy (RSD), is a chronic pain condition in which the skin changes in color, temperature, and/or swelling in the affected area. It is caused by damage/malfunction of both the peripheral and central nervous systems.

Predisposing factors:
- Immobility
- High energy injuries
- Multiple fractures
- Female
- Distal greater than proximal
- Upper extremities greater than lower extremities

PATIENT DESCRIPTION

53-year-old Caucasian female status post fall resulting in an injury to her right arm and wrist. 5 months later, she was diagnosed with CRPS.
- PMH: unremarkable
- Social: wife and mother of 2 girls
- Work: Founder and managing partner to a strategy consulting firm

Patient’s Goals:
- Reduction of pain
- Regain of right upper extremity function

PURPOSE

The purpose of this case report is to present the influence of CRPS on an individual status post DRF surgery and the physical therapy rehabilitative outcome.

INakkEDENCE of CRPS
- The estimated overall incidence rate of CRPS was 5.5 cases per 100,000 persons annually.
- Rates of occurrence of CRPS range from 22% to 39% after distal radial fracture.

METHODOLOGY

Interventions for this patient were selected to address impairments in pain, edema, and allodynia associated with CRPS. They were prescribed in accordance with the patient’s goals of decreasing pain, inflammation, and joint stiffness, and to return to prior level of function.

Techniques:
- Pain desensitizing techniques
- Retrograde massage
- Warm paraffin application

DISCUSSION/CONCLUSION

The onset and presence of CRPS markedly slowed the rehabilitative process for an individual with distal radial fracture in comparison to an individual post DRF surgery without CRPS.

Other suggested Interventions:
- Mirror Therapy
- Pain Exposure Physical Therapy
- TENS
- Watsu and Flotation Therapy