The use of immunoglobulins (IG) for the peripheral nerve block for phantom limb pain was 2.9 times higher (95% CI 1.6 – 5.2) in comparison to placebo (p=0.0003).

Conclusions The use of IG for the treatment of PNP has a potential therapeutic benefit. Further studies across patients with different types of PNP are needed to better characterize this effect.

B402 THE USE OF IMMUNOGLOBULINS (IG) FOR THE MANAGEMENT OF PERIPHERAL NEUROPATHIC PAIN; SYSTEMATIC REVIEW AND META-ANALYSIS

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Background and Aims Immunoglobulins (IG) are widely used for the treatment of a variety of immune-mediated diseases. The exact mechanism of action remains unknown, but IG modulate the expression and function of Fc receptors, interfere with activation of the complement and production of cytokines, neutralize pathogenic autoantibodies and affect the activation and effector functions of B and T lymphocytes. Immunoglobulins are usually delivered intravenously and they are effective in ameliorating motor symptoms and/or preventing disease progression in immune-mediated neuropathies including Guillain-Barré syndrome (GBS) and chronic inflammatory demyelinating polyneuropathy (CIDP).

The aim of this systematic review and meta-analysis was to study the potential of IG for the treatment of peripheral neuropathic pain (PNP).

Methods We performed a systematic literature search in the PubMed database. We also looked for unpublished or ongoing trials in clinicaltrials.org. PNP reduction following IG treatment had to be within the aims (primary or secondary).

Results The above-mentioned literature search strategy revealed 5 studies (2 open label, 3 randomized placebo-controlled) eligible to be included. The pooled estimate of the percentage of patients with PNP who received immunoglobulins and reported pain relief was found to be 65% (95% CI 58% – 71%). As demonstrated in the forest plot (Figure 1), the likelihood of achieving pain relief with immunoglobulin treatment was 2.9 times higher (95% CI 1.6 – 5.2) in comparison to placebo (p=0.0003).

Conclusions Current evidence supports that the use of PNE can produce a statistically and clinically important difference in reducing pain, improving patient understanding of pain mechanisms, reducing disability and psychosocial factors and improving function and quality of life.