Conclusions

Neuropathic pain is a major form of chronic pain with profound physical and psychological impact and it’s often challenging to manage due to its diversity of mechanisms and patients’ responses. In this case the SCN block provided the patient an effective pain relief due to the nerves contribution to the affected area, perhaps underlying a neuropathy-mediated SCN pain, which may benefit of longer relief with radiofrequency.

Methods

The patient underwent diagnostic obturator and femoral articular nerve branch injections and she also a middle cluneal nerve steroid injection under fluoroscopic and ultrasound-guidance and reported improvement in her pain. She had a peripheral nerve stimulator (PNS) trial and subsequent implantation with leads to the right middle cluneal nerve and right obturator and femoral articular nerve branches.

Results

The patient reported significant relief in both the posterior and anterior distribution of her pain. Her ADLs improved with PNS implantation and she reported that she is now able to sleep without pain.

Conclusions

Through the use of combined fluoroscopy and ultrasound we were able to safely target the middle cluneal nerve and the obturator and femoral articular nerve branches. We were able to reliably replicate the patient’s pain distribution with neurostimulation before permanently implanting the PNS. This case demonstrates the successful use of PNS in treating chronic post-traumatic hip and pelvic pain.

Attachment pns.pdf