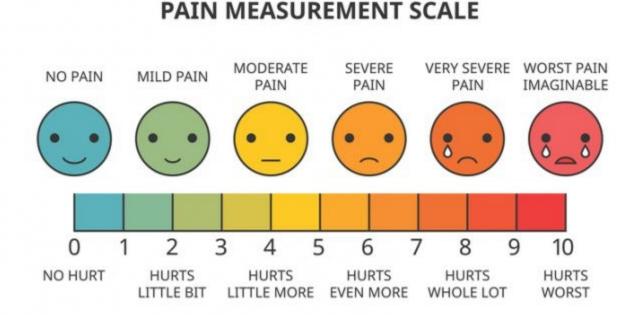
How to Treat Chronic Pain and Neuropathy After Stroke

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Treating neuropathy after stroke requires some finesse. Because first, there are 2 types of neuropathy that you need to understand. Then, there are various levels of treatment that you and your doctor can decide on. This article will explain all of it.

Types of Neuropathy After Stroke

There are two types of neuropathy after stroke:

Peripheral Neuropathy

Peripheral neuropathy feels like: pain or numbness in one area of the body. Peripheral neuropathy happens when there is damage to nerves and nerve endings. This type of pain is often caused by injury, repetitive stress, autoimmune disease, infections, and environmental toxins. While it's possible to develop peripheral neuropathy after stroke, it's more likely that you have the other type of neuropathy:

Central Neuropathy

Central neuropathy feels like: burning sensation, pins-and-needles sensation, intense stabbing or searing sensations. Central neuropathy happens when the central neuropastem (the brain and spine) are injured, like after stroke or traumatic brain injury. Central neuropathy in stroke survivors is known as **central post stroke pain**, and it happens to about 8-10% of stroke survivors. It can be very difficult to cope with central neuropathy because the pain is chronic.

Central Neuropathy After Stroke Is Often Misdiagnosed

Unfortunately, central neuropathy usually develops weeks or months after stroke – sometimes even years later. This delay between stroke and the onset of central neuropathy causes many doctors to misdiagnose it.

If you suspect that you suffer from central neuropathy after stroke, then it's important to point out this link to your doctor.

Treating Central Neuropathy After Stroke

Central neuropathy is often treated with increasingly aggressive treatments. Your doctor will likely start you with something "moderate" and increase the intensity from there.

Moderate Treatment: Over-the-Counter Painkillers

Moderate treatment involves over-the-counter painkillers such as ibuprofen and paracetamol (Tylenol). When that doesn't work, doctors will move onto intense treatment.

Intense Treatment: Prescription Painkillers and Drugs

Intense treatment involves prescription painkillers such as antidepressants and anti-epilipsy drugs. Doctors may even combine over-the-counter painkillers with these drugs. When that doesn't work, doctors may recommend aggressive treatment. Some doctors don't know about aggressive treatment though, so doing your own research is critical.

Aggressive Treatment: Invasive Electrical Stimulation

Aggressive treatment involves deep brain stimulation and spinal cord stimulation. This treatment is aggressive because it's very invasive (i.e. it requires brain and/or spinal surgery).

During **deep brain stimulation**, small electrical leads are placed deep within your brain to stimulate your central nervous system. You may know from our other articles how electrical stimulation helps rewire the brain.

During **spinal cord stimulation**, the electrical leads are placed along your spinal cord. In 2008, the UK's Department of Health found spinal cord stimulation "both clinically effective and cost-effective, with lower lifetime healthcare cost and better long-term outcomes."

If you're interested, here's a link to a Google search to find spinal cord treatments in your area.

Stay Motivated

As you explore your treatment options, it's very important to maintain a healthy support system. Dealing with chronic pain is a serious issue, and you need to be fully supported during this time. You can find support through friends and family, with our <u>Facebook stroke support group</u>, and by joining other online communities.

One of our favorite online communities is the <u>Star Brite Warrior blog</u>, where Bree, who lives is chronic pain 24/7 due to Guillain-Barre Syndrome, still manages to find happiness and gratitude in her life. Her positivity despite the pain is very inspiring.

Next Steps

If you suffer from chronic neuropathy after stroke, then please talk to your doctor about your options. Make sure to mention that central neuropathy tends to happen months after stroke and to please consider that possibility. They will likely start you on moderate treatment and go from there. And if nothing seems to work, you can explore aggressive treatments on your own, if that's what you want.

In the meantime, stay connected, stay motivated, and keep searching for solutions. And most importantly, never give up hope!