Background

Pain is a multidimensional subjective experience and has profound effects on a patient’s health and quality of life. Patients with chronic pain often report difficulties with physical activity and therefore find standard activities of daily living (ADL) a significant challenge.

Methods

Study design: Retrospective chart review of clinical outcomes from our own patient charts.

Duration: Previous 4 year period.

Inclusion criteria: Subjects in whom chronic neuropathic pain of the trunk and/or limbs was treated with the Boston Scientific Precision SCS system and one or two Linear™ 8-contact leads, placed epidurally to achieve paresthesia concordance of their primary area of neuropathic pain.

Exclusion criteria: SCS trial failure or >50% missing data.

Number of subjects: 37 (18 male, 19 female)

Clinical endpoint: ADL measures included food preparation, hygiene performance, toileting, reading, writing, and speaking. Sleep patterns and physical activity.

Additional data: Age, gender, diagnosis, duration of implant, medication usage, device usage

Results

A total of 37 patients met our inclusion and exclusion criteria (18M/19F).

- Mean subject age: 55.8±10.9 years
- Diagnoses: FBSS/PLS, CRPS, neuropathy
- Mean implant duration: 17±9.7 month

SCS patients reported normal daily functioning in 4 of the 6 ADL measures: 1) Food preparation and self-feeding, 2) Hygiene performance and toileting, 3) Reading, and 4) Speech. In addition, the mean number of sleep hours per 24-hour period (7.4± 2.3) was statistically equivalent to normal sleep patterns of 8 hours (P=0.1163). Finally, a statistically significant number of patients (n=19) reported ability to participate in moderate physical activity (P=0.02).

Conclusions

Our retrospective consecutive case-series suggested that our chronic pain patients treated with the Boston Scientific Precision™ SCS system reported normal performance levels across several measures of ADL, as well as normal sleep patterns, and the majority of patients reported the ability to perform moderate physical activity.

Further prospective study is recommended to systemically study the effects of SCS treatment patients’ ADL.

References


Results of clinical studies may not necessarily be indicative of clinical performance.