

BEWARE OF PAINFUL CUTANEOUS NEUROMAS!

A CASE SERIES OF 100 PATIENTS

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OBJECTIVE

- **To study the causation and outcome of painful cutaneous neuromas (PCN).**

METHODS

- **Retrospective review of 100 consecutive patients with PCN**
- **Diagnosis was clinical confirmed with local anaesthetic blockade**
- **Every patient was offered pharmacotherapy, physiotherapy and transcutaneous neuromodulation**
- **Neuroma surgery as the last resort**

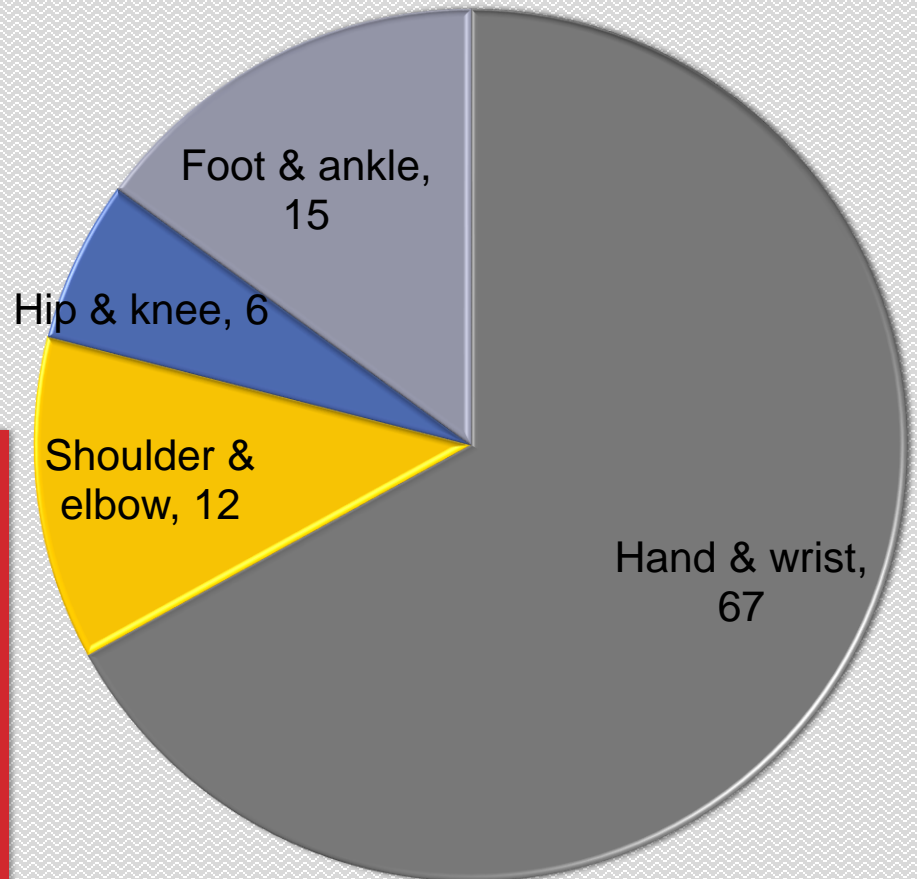
RESULTS

- **Between 2014 - 2019**
- **59 females and 41 males**
- **Mean age 49 years
(range 16-81)**

79% due to iatrogenic injury

21% due to direct trauma

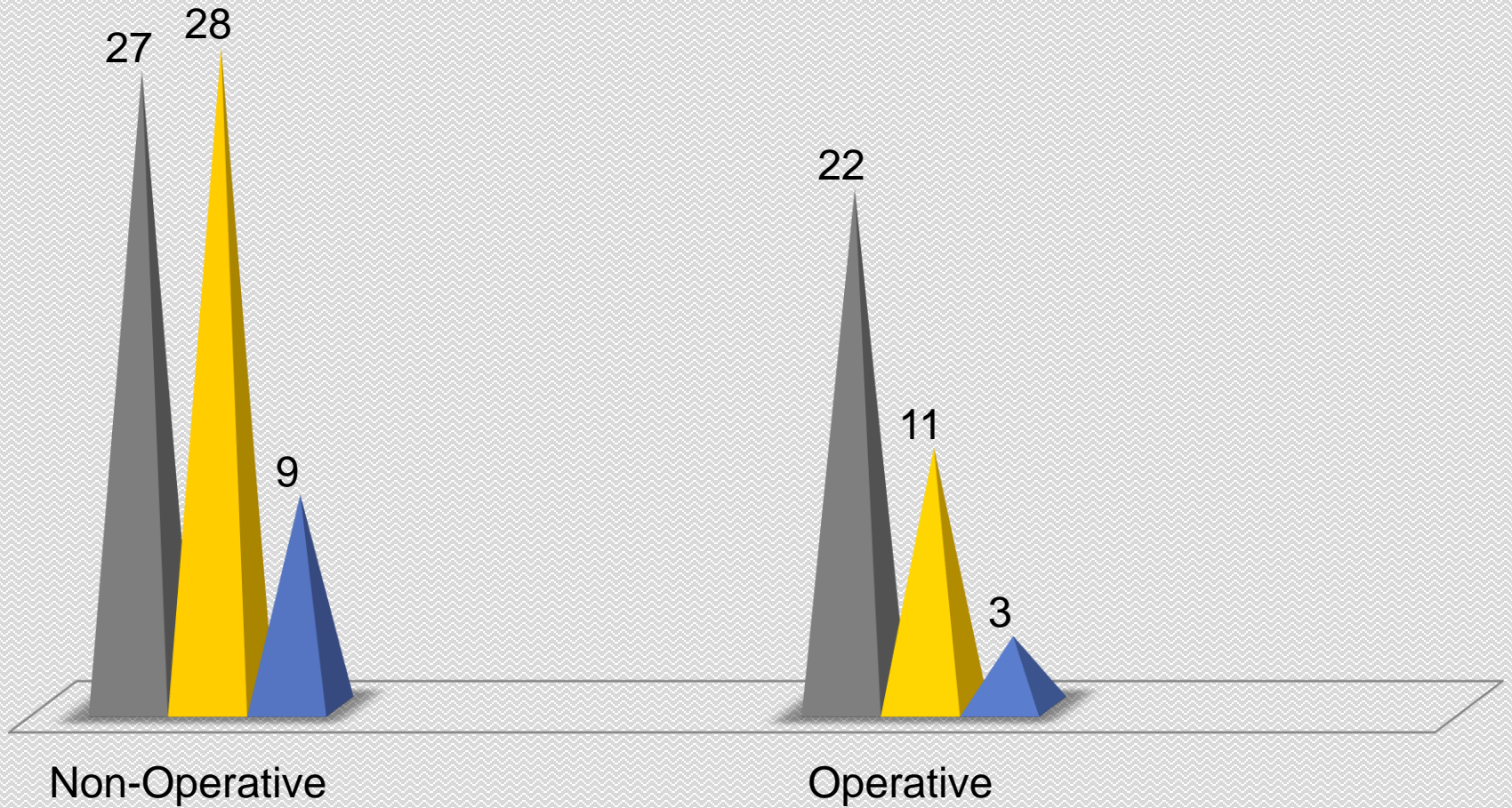
Location of neuromas



Region	Nerve	Number
Hand & wrist	Superficial radial nerve	29
	Dorsal cutaneous branch of ulnar nerve	9
	Palmar cutaneous branch of median nerve	19
	Digital nerve	10
Shoulder & elbow	Medial antebrachial cutaneous nerve	6
	Lateral antebrachial cutaneous nerve	2
	Supraclavicular nerve	3
	Dorsal cutaneous (medial scapula)	1
Hip & knee	Lateral femoral cutaneous nerve	2
	Saphenous nerve	2
	Infrapatellar nerve	2
Foot & Ankle	Saphenous nerve	4
	Superficial peroneal nerve	6
	Sural nerve	4
	Medial Plantar Nerve	1

OUTCOME

■ Improved ■ Not Improved ■ Lost to Follow up



CONCLUSION

- **The vast majority of PCN in both upper and lower limbs are due to iatrogenic injury.**
- **This is potentially avoidable with better appreciation of neural anatomy and soft tissue handling.**
- **Approximately half would respond to therapy targeted at the neuroma.**