

# Spinal Cord Stimulation Shows Potential for Peripheral Neuropathy

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Electrical stimulation of the spinal cord markedly reduced peripheral neuropathy (PN)-associated pain in a man living with HIV who didn't respond to more conventional PN therapies, according to a February 5 presentation at the 6th World Congress of the World Institute of Pain in Miami and [reported](#) by Medscape.

Data involving another five patients enrolled in the study, being conducted by Kenneth Candido, MD, of the Advocate Illinois Masonic Medical Center in Chicago and his colleagues, are awaited, but the researchers are encouraged by the results they've seen thus far. "We believe that it is not only a new indication, but it offers relief for individuals who were previously left to the devices of primary care physicians who really only have at their disposal the ability to prescribe narcotic analgesics," Candido said.

Treatment initially involved temporary placement of two leads, each containing eight electrodes, into a segment of the spine. Once the electric stimulation proved safe and effective, permanent electrodes were placed by the study investigators.

The study volunteer highlighted by Candido's group at the Miami conference was a 50-year-old man who had been living with HIV for 20 years and had an eight-year history of "excruciating" neuropathic pain and burning sensations, notably on the soles of his feet. He had not responded to other available neuropathy treatments, such as narcotic and non-narcotic pain relievers, anti-seizure drugs and nerve blocks.

The results thus far have been encouraging, Candido told Medscape. "He has now had almost two years of reduction in his pain, from a constant level of about 8 out of 10 down to about 1 or 2 out of 10, and we've been able to wean him off his [narcotic pain relievers]," he said.

Spinal cord stimulation is a well-established technique currently indicated for the management of failed back surgery syndrome, complex regional pain syndrome, inoperable peripheral vascular disease, and refractory angina pectoris.

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