

MANAGEMENT OF GENERATOR SITE PAIN WITH A LIDOCAINE PATCH 5% IN PELVIC PAIN PATIENTS TREATED WITH SACRAL NERVE STIMULATION

Aims of study: The clinical efficacy of sacral nerve stimulation (Interstim®, Medtronic) has been well established for the treatment of complex voiding dysfunction and pelvic pain. Though the complications with this device are minimal we have found that many of our pelvic pain patients complain of significant discomfort over the generator site. We believe that this is partially related to the size of the device which is implanted into patients who are already hypersensitized by longstanding pelvic pain. We are currently assessing the analgesic effectiveness of a Lidocaine patch 5% (Lidoderm®Endo Laboratories) applied directly to the painful area. This patch has been approved for the local treatment of postherpetic neuralgia.

Methods: Four pelvic pain patients successfully managed with sacral nerve stimulation complained of severe pain over their generator site, one to ten months following implantation. A Lidocaine patch 5% (140cm²) was applied over the generator site for 12 hours and then removed. Responders were given a prescription for the Lidocaine patch 5%, and instructed to apply one patch for 12 hours every 24 hours. Patients applied the patch during the daytime or at night depending upon when their pain was most bothersome. Analgesic efficacy was measured utilizing a visual analogue pain score from 1-10, where 1 = no pain and 10 = excruciating pain.

Results: Prior to treatment all four patients graded their pain as being 8-10/10. One hour following patch application their pain was reduced to 5-8/10. At 4 hours all four patients reported pain levels of 2-5/10. The analgesic benefit remained constant for the remaining 8-hour period. Upon removal of the patch the pain level returned close to baseline within the next 12 hours. Three of the four patients are effectively managed with a mean follow-up time of 4 months. One of the three patients only requires the patch when she is very active. One patient continues to complain of significant pain and has elected to undergo explantation of the device. Skin irritation or systemic side effects have not been reported.

Conclusion: Intense pain over the generator site can be a significant problem in pelvic pain patients treated with sacral nerve stimulation. The Lidocaine patch 5% can be effective in controlling pain in these patients and ultimately improve results with sacral nerve stimulation.