Dorsal Root Ganglion Stimulation for Post-Surgical Groin Pain

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Introduction

Surgical inguinal hernia repair is a quite common procedure after which a considerable percentage of patients can develop chronic neuropathic pain of various etiologies, refractory to pharmacological and first-tier interventional therapies.

Objetives

Dorsal column stimulation is used as standard interventional treatment for chronic neuropathic pain. However, some anatomical regions are hard to cover with this kind of stimulation. A new and more specific system, specially designed to stimulate the dorsal root ganglion (DRG) may offer an alternative to this problem. DRG leads are placed over the dorsal aspect of the dorsal root ganglia.

Materials & Methods

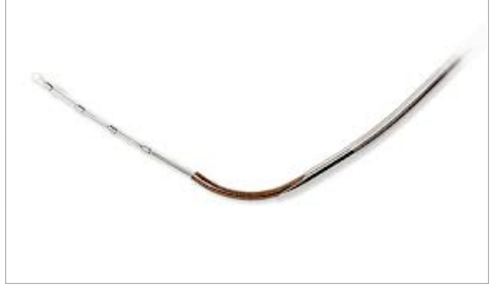
We present the case of a 24-year-old female patient who underwent a right inguinal hernioplasty four years ago. Two years after surgery she presented severe neuropathic pain in the inguinal and suprapubic region, with irradiation to right thigh and poor response to pharmacological antineuropathic treatment. Conventional spinal cord stimulation failed to provide significant relief due to poor anatomical coverage and was removed. Under local anesthesia and radioscopic control, two contiguous stimulation leads were implanted in the right L1 and L2 dorsal root ganglia (Axium Leads. St. Jude Medical).

Conclusions

Dorsal Root Ganglion (DRG) Stimulation may be an effective and encouraging tool for the management of neuropathic pain in the groin area.

Results

Intraoperative stimulation was performed, achieving adequate paresthesias with specific coverage of the painful area. Analgesic efficacy will be assessed 1, 3 and 6 months postoperatively.



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