

Post Mastectomy Pain

Overview: While surgery and surgical procedures have become specialized and involve as little tissue damage as possible, they nonetheless involve the cutting, removing and suturing of skin, muscles, nerves and other structures. Therefore, some surgical procedures can cause chronic pain due to the trauma of the procedure. Post mastectomy pain syndrome is an example of the pain associated with the surgical procedure. The discomfort begins immediately or soon after the mastectomy or lumpectomy. The pain usually affects the front or sides of the chest in the area of the surgery and sometimes involves the upper arm. Patients with post mastectomy pain often describe their pain as burning and intensified by light touch or pressure. The pain can sometimes result in a disruption of the person's daily life style. The pain in post mastectomy pain syndrome usually results from irritation of one or more of the nerves in the chest wall, which may have been entrapped by scar tissue or cut during surgery. In some cases a neuroma or painful bundle of nerves grows at the stump of a nerve that has been cut. For some patients with post mastectomy pain, the muscles of the chest, shoulder or arm can also contribute to the pain.

Diagnosis: Doctors perform a physical examination to confirm a painful, sensitive area near the surgical scar and to map the area of irritation. CT scans are sometimes used to determine if a recurrent tumor may be causing the symptoms. Doctors may use a kind of nerve block or injection of anesthetic around the painful structures or along the path of the nerves involved to help confirm the diagnosis.

Treatment: Some patients benefit from the use of oral nonsteroidal anti-inflammatory medications with additional pain medications or special medications used to treat nerve pain. The use of topical ointments can sometimes reduce this pain as well. Research shows long-term relief can often be obtained with the use of therapeutic nerve block injections containing anesthetic medication with anti-inflammatory medications. These can be given into a neuroma or along the path of the nerves involved in post mastectomy pain syndrome. Nerve block treatments usually occur in a short series that can be repeated intermittently as needed. Nerve stimulation procedures can sometimes help with chest wall pain that persists. Physical therapy exercises are used to help regain normal daily activity for those who find the pain interferes with their physical functionality.