



SERVICIO DE SALUD  
DEL PRINCIPADO DE ASTURIAS

# A Clinical Characterization of Phantom Limb Syndrome

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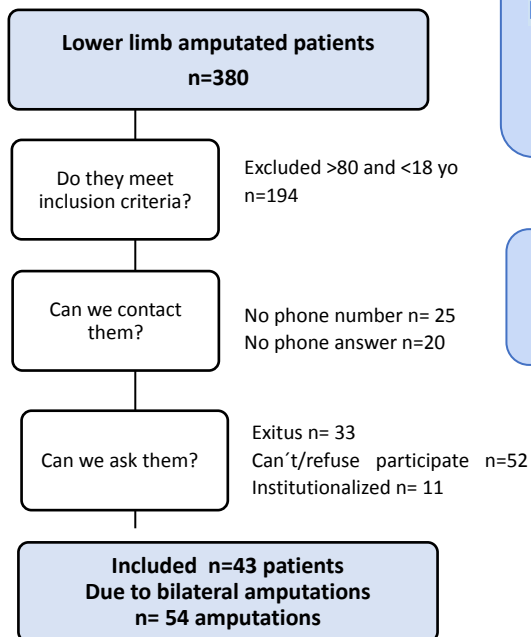
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**Background:** Studies reveal that Phantom Limb Pain Syndrome (PLS) often appears after an amputation.

**Objectives:** The aim of this report is to describe characteristics of PLS, analyzing the risk factors which develop it.

## Methods:



A transversal, retrospective, descriptive, observational study was carried out, including information on 54 lower limb amputated patients at a Spanish University Hospital between the years 2016 and 2019.

## Tests and scales

**Hamilton and Zung** : Depression and anxiety  
**McGill and Spanish pain questionnaire** : Pain

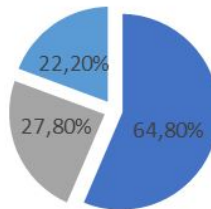
## Results:

### Patients general characteristics:

- Gender: 81,6% male
- Age: 63 +/- 10
- 78% Unilateral amputation

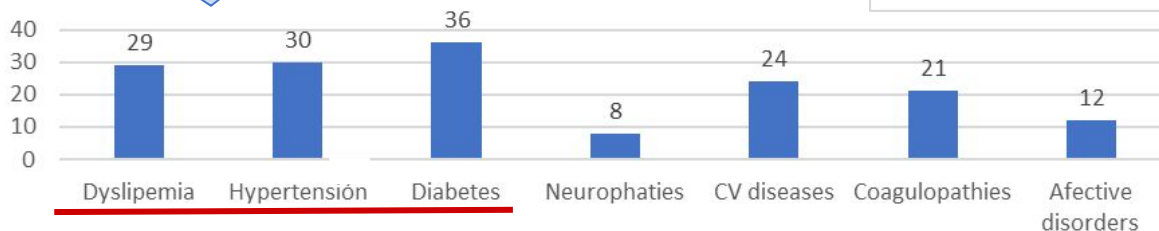
## AMPUTATION ETIOLOGIES

- Isquemic
- Traumatic
- Infectoious

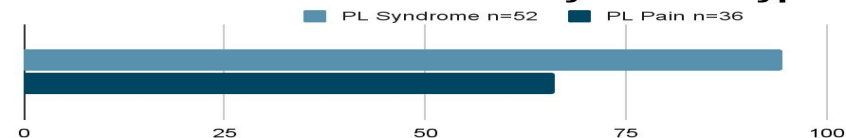


- Cardiovascular risk factors were strongly associated with amputation.
- 85,2% of patients were smokers.

## COMORBIDITIES

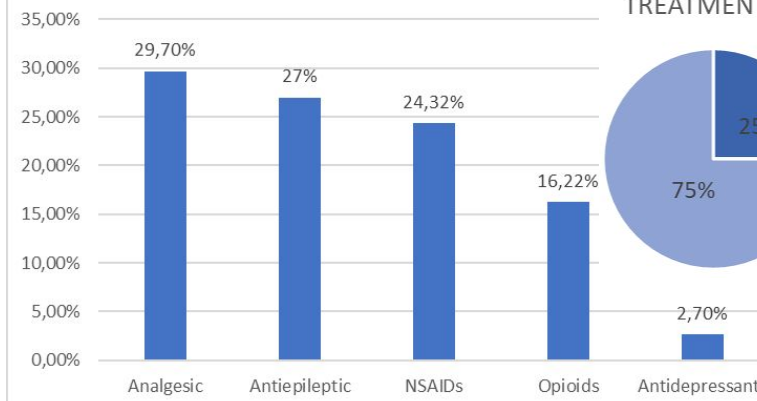


## Prevalence of Phantom Limb Syndrome Types %

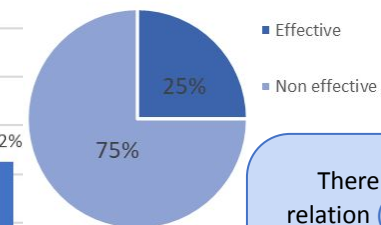


PLP was referred to 66% patients. Described as lashing (33,3%) and brief (48,2%). With and intensity of 4,5 points in EVA scale.

## PHARMACOLOGICAL TREATMENTS



## PHARMACOLOGICAL TREATMENT EFFECTIVENESS



There was a relation ( $p < 0,05$ ) between pre-surgically pain incidence and less prominent PLS after amputation.

## Conclusions:

PLS appeared frequently in amputees. The main cause of amputation were previous comorbidities, highlighting cardiovascular risk factors. There is a need in following PLS intensively to approach earlier therapies.