

LIVING WITH CRPS AND NEW ADVANCES FROM A PODIATRIC PERSPECTIVE

ARTISAN
FOOT AND ANKLE
SPECIALISTS



Devon Glazer, DPM, FACFAS

CEO, Artisan Foot and Ankle

Vice President, California Podiatric Medical Association

Secretary, American College of Foot and Ankle Surgeons Division 1

Who is the CRPS Patient

- Potentially anyone
- Anecdotally what I've experienced:
 - People that are internal stressors.
 - Generally those that are the "rock" in their family and/or put on a "strong face".



RSD/CRPS from a Podiatric Perspective

- Patient's can present from a wide variety of initial injury
 - Foot/ Ankle Surgery
 - Trauma
 - The simplest/ craziest things



RSD/CRPS from a Podiatric Perspective

- How I visually determine suspicion for RSD/CRPS
 - Change in color of limb, scar



RSD/CRPS from a Podiatric Perspective



Visual Changes

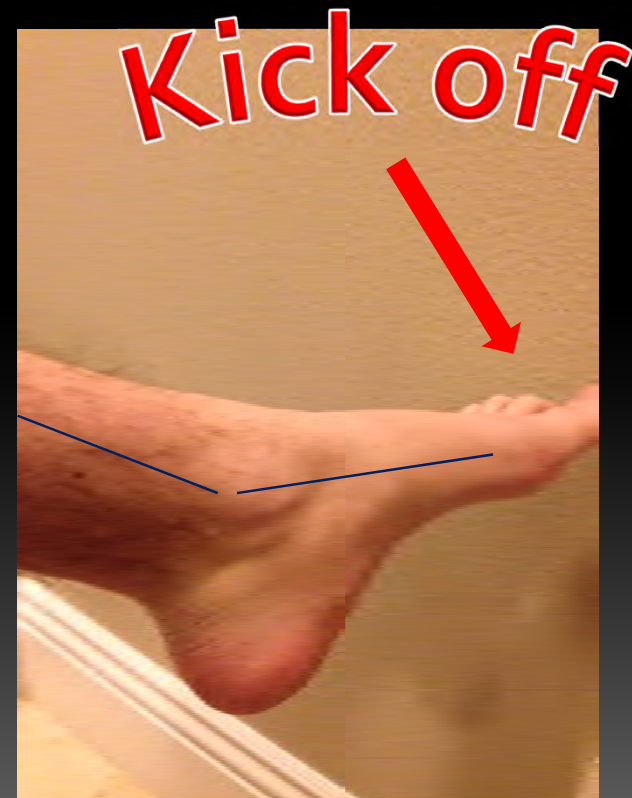


Visual Changes



So What's Next.....

- RSD/CRPS is a team management approach
 - General guidance for the PT



So What's Next...





So What's Next

- Use of devices



So what's next.....

- TENs unit



So What's Next...

- Oral Medications:
 - My technique: balance patient's largest complaints to the medications.
 - Example: Pregabalin's biggest side is drowsiness. So if a patient complains that the biggest issues are at night, I will give that medication to patients two hours before bed.



So what's next....

- Topicals

- Compounding pharmacies: mixing of several different meds into one. Tailor the ingredients to needs.
- Cannabinoid creams: use depends on state regulations and social taboos, but anecdotally have found to be another effective treatment protocol.



Tailoring meds to Patient Needs



ARTISAN
FOOT AND ANKLE
SPECIALISTS

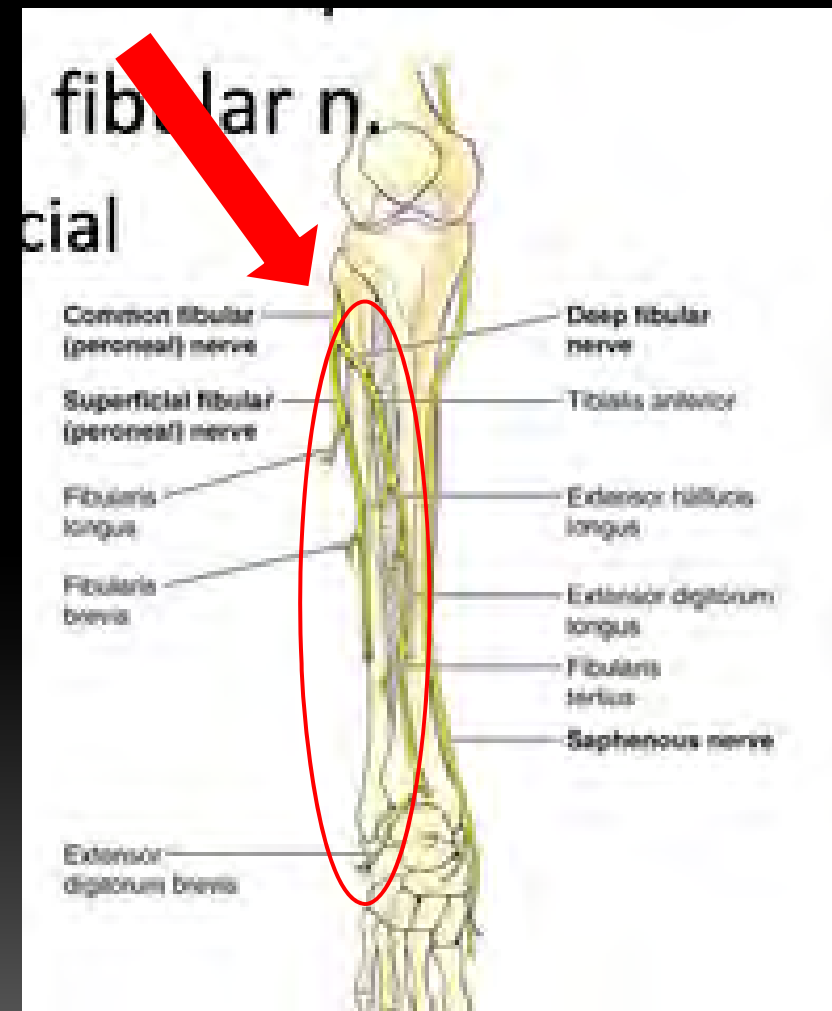
Proper Applications of Topicals

- It is important to block the local receptors and the nerves above the area of RSD/CRPS



So what's next.....

- Injection therapy from my standpoint
 - Focal injections, planned with Pain Mgt



So What's Next...

- Injection therapy
 - Coordination with pain mgt, pre-medicating and discussion of risks are all very important.

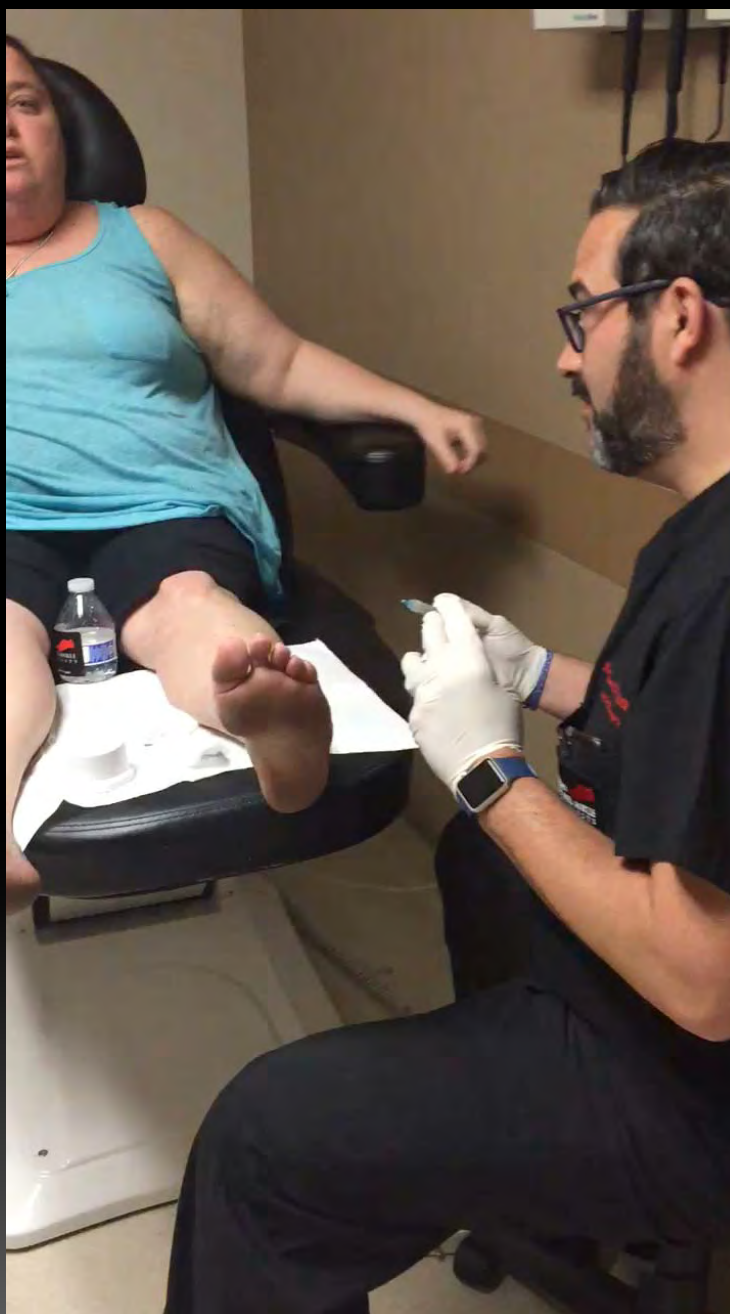


ARTISAN
FOOT AND ANKLE
SPECIALISTS



Dr. Glazer*

* minus beard, 10 years, 40 pounds....played by Patrick Dempsey



So What's Next...

- COBLATION (controlled ablation)

technology involves the creation and application of a high-energy field called “glow discharge plasma.” This plasma ablates tissue through a chemical process as highly energized particles in the plasma break down molecules in the tissue.

In English... It breaks down scar tissue and reorganizes as normal tissue.

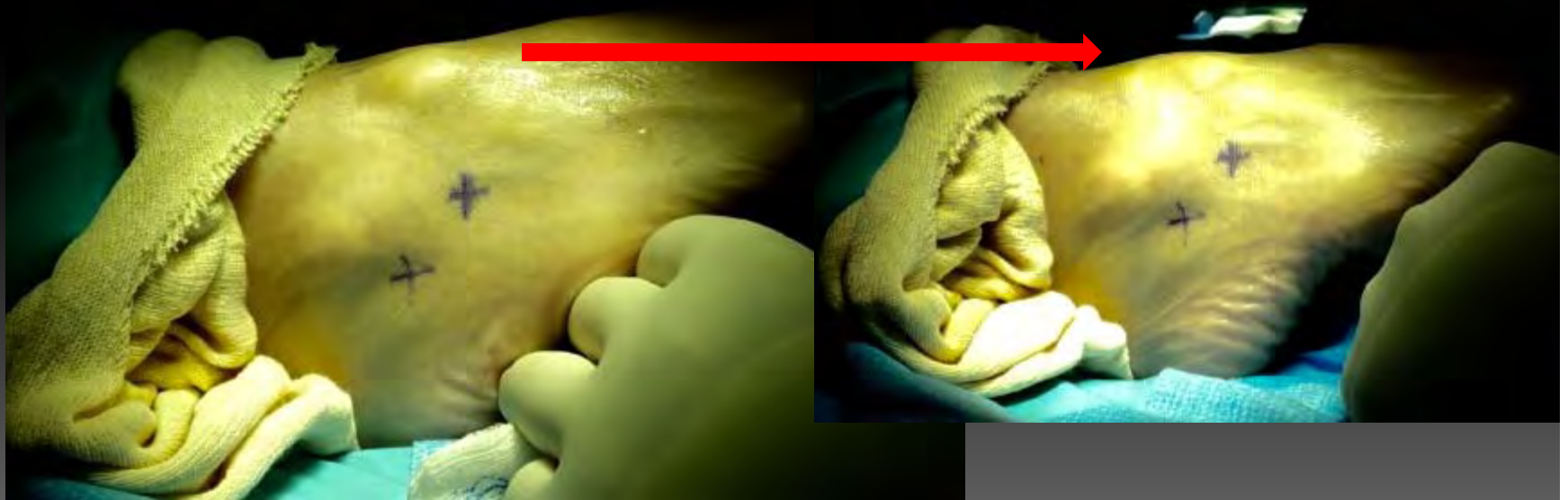


Coblation



So What's Next....

- Ultrasonic Energy Tipped Devices
 - Through a small incision, breaks up scarred areas through selective ultrasound debridement.
 - Possibly beneficial for nerve entrapped patients.



Coblation and Ultrasound Together



Ultrasonic Energy



ARTISAN
FOOT AND ANKLE
SPECIALISTS

In Summation

- Every CRPS patient is different
- Tailor treatment the individuals needs to create balance between mobility and pain management
- Seek support
- Don't be surprised if loved ones with CRPS don't want support
- Cry when you need too, but laugh as much as you can

