Introduction

1/190 patients with amputations in the US
25-70% of amputees develop chronic pain due to neuromas
>150 reported treatment options
Systematic review and meta analysis compared surgical treatments
Improvement was shown in 77% of patients regardless of treatment

Patient Identification

56 year old male with chronic left lower extremity pain

Persistent pain

Medications
Hardware removal
Ankle neurectomy
Spinal cord stimulator

Physical Exam
Tinel's sign over common peroneal and lateral sural nerve
Local anesthesia in common peroneal nerve relieved pain

Ideal Neuroma Treatment

Pathway for neuroma-free regeneration
Physiologic neuronal regeneration

Allograft or Autograft reconstruction
Hollow tube reconstruction
Excision and implantation
Nerve Cap
Centro-central connector assisted neurorrhaphy
Relocation Nerve Grafting
"End-to-side" repair
TMR
RPNI

Neuroma excision
Burying of nerves in muscle

Surgical Plan
Lateral sural cutaneous nerve (LS) -> Medial sural nerve (MS)
Common peroneal nerve (CP) -> TPS
End-to-side remainder common peroneal (CP) nerve -> TN

Post-operative outcome
Admitted overnight for monitoring
Discharged home POD#1
3 weeks post op: Incision healed well, pain improved
6 weeks post op: Pain completely resolved

References
Nichole Joslyn, MD, Michael Schmitt, MD, Joel Solomon, MD PhD