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REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION (RTMS) IN THE TREATMENT OF MEDICATION-RESISTANT NEUROPATHIC PAIN

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Introduction: Transcranial magnetic stimulation (TMS) is a non-invasive method that induces functional changes in a relatively small area of the cerebral cortex. It is supposed that the effect of the method in therapy of neuropathic pain is based on the induction of spinothalamic tract inhibition, which leads to the symptom withdrawal.

Aim: To prove the clinical and electrophysiological effect of rTMS in the therapy of chronic neuropathic pain.

Methods: 29 patients with medication-resistant neuropathic pain were examined by Visual analog scale (VAS), McGill Pain Questionnaire (MPQ) and QST (Quantitative sensory Testing, consisted of von Frey and thermic threshold examination), then treated by high frequency rTMS in the study using double-blind randomized sham-controlled parallel design. rTMS parameters: 5 rTMS sessions (2 weeks treatment), where each session consisted of three 10 Hz rTMS series using:

- 1) 85%MT (motor threshold),
- 2) 90%MT and
- 3) 95%MT.

Each rTMS series consisted of 20 pulses in 12 trains. Location of the active coil was administered over the contralateral motor cortex, directed specifically to facial area of homunculus (according to functional location). Sham coil was angled 90° degrees away from the skull.

Results: Confirmation of a significant decrease of VAS item in active group, trend to improvement in tactile sensation of severed patient faces. The changes of thermic threshold were not found. Sham rTMS did not show any trend for improvement.

Conclusion: Although no general recommendations can be drawn based on our result, our study is another one that suggests rTMS should be considered as an effective and safe treatment option for chronic neuropathic pain.