Meralgia Paresthetica
QUICK OVERVIEW

What is Meralgia Paresthetica?
- Abnormal sensation or pain in the outer thigh.

Symptoms:
- Burning, stinging or “pins and needles” sensation in the outer thigh
- Numbness
- Tingling

Treatment:
- Non-Surgical
  - Weight loss (if applicable)
  - Not wearing tight fitting pants or belts
  - Anti-inflammatory and pain relief medication
  - Injections
- Surgery may be necessary in extreme cases

We hope that this information is helpful in understanding your condition, the possibility of further testing and treatment options.
Diagnosis

Pain in this area could come from the hip joint, the spinal nerves in the lower back, the knee joint or the nerves in the pelvis area. At times a specialist can make this diagnosis without doing any other testing. Your doctor may recommend hip x-rays, pelvis x-rays, spinal x-rays, knee x-rays, a CAT scan of the pelvis, MRI of the spine and/or EMG. These tests are to rule out other causes of pain in the outer thigh. If you truly have meralgia paresthetica, it will not show up directly on any of the test formats.

Treatment

There are multiple appropriate medicines in each category, but an example of anti-depressant medicines is nortriptyline (Pamelor) or amitriptyline (Elavil). An example of seizure medicines is gabapentin (Neurontin) or pregabalin (Lyrica).

Another treatment that may work for your symptoms is a TENS unit. A TENS unit is an electronic “gizmo”. Surface electrodes are taped to the skin around the painful area and gentle electrical stimulation of the skin blocks the pain signal.

Creams containing capsaicin are very safe, but in our experience, do not provide much relief. There is a product called a Lidoderm patch. This patch contains lidocaine (a numbing medicine like you would get at the dentist) which numbs the painful skin area and blocks the pain signal. This is also available in cream form but typically is less effective than the patch.

A mainstay of treatment (which could be curative) are nerve blocks. A local anesthetic (numbing medicine) and a “cortisone” like medicine are injected near your waist (at the exit of the nerve under the inguinal ligament). This will reduce the pain signal and inflammation of the nerve and can temporarily or permanently reduce or eliminate symptoms. Some patients are candidates for surgical treatment.

The simplest treatment is to get the pressure off the nerve by losing weight and/or not wearing tight fitting pants or belts. If there is pressure on the nerve, any way we can decrease that pressure will improve symptoms.