



"How?" I asked myself and whoever was listening as I focused all my powers of concentration on my immobile index finger. The physiotherapist had just told me to wiggle the finger, but I couldn't work out how. After several minutes of tense concentration I saw a little flicker of movement. I had not injured my hand or my finger, but paralysis was creeping outwards from the site of a simple break in my forearm, even though X-rays showed that it was mended. I had RSD.

Reflex Sympathetic Dystrophy, also known as Complex Regional Pain syndrome, affects about five percent of people who suffer fractures to a wrist or ankle. That adds up to a lot of people, so it is surprising how few of us have heard of it. I certainly hadn't, and I soon discovered that it is not properly understood even in the medical profession. It can be diagnosed from its symptoms - burning pain, swelling, redness tending to blue, shiny skin, coarse hair growth on the limb - but its cause is not known and there is no certain cure. This is an affliction where you need to take responsibility for your own healing. Eight weeks previously I had been an active man. I jogged to keep fit, and enjoyed walking through the hills when time allowed. One Sunday early in January I woke up to a Spring-like day in Bristol, with the sun already dispelling the overnight mist and a blue sky beckoning me to take a walk I had promised myself. I drove to Dartmoor, parking close to Meldon Reservoir, and began trudging up towards Yes Tor and High Willhays. At 619 and 628 metres respectively, they are the highest peaks on Dartmoor; not mountains exactly, but sufficient challenge for a short Sunday outing.

Neither peak was visible from the car park as the overnight mist was still hugging the slopes waiting for the Sun to burn it off. Heading past the reservoir and up the first slope I could not yet see the spot where my life would soon change. The air was cold, but still, and clear pools of ice lay where water had seeped in gaps among the rocks. As an experienced walker I clambered easily to the summit of Yes Tor, where I paused for a lunchtime snack and to enjoy the view through the mist.

When I had finished my brief lunch the mist was already clearing, revealing the easy twenty-minute route across the pass to High Willhays, the lesser-known, but higher peak. By the time I mounted the cairn at 628 metres there was a clear view all round, cheering the spirit and making the day seem worthwhile. My two objectives achieved, I could now head back to the car and travel home, satisfied and triumphant. Retracing my steps along the well-laid,

almost level, rock path back towards the summit of Yes Tor, I strolled along happy and unhurried, pleased at my luck with the weather at such a time of year. Then I stepped on a rock that still had a covering of frost. My fall was so sudden that I have no memory of those seconds before I found myself, dazed and startled, on the ground.

I have often fallen over and, in such a safe and level place, I felt stupid but not yet hurt. To any observer it would have looked like a trivial accident. But there were no observers. I was alone, and needed to stand up, brush off the mud and get going again just like all those other times when I had slipped harmlessly. However, my left hand was playing no part in the proceedings. It was not available for lifting, pushing, pulling or carrying. What's more, the wrist should not be pointing in that direction. Using my walking pole to ease myself up, I collected the remains of my watch and its broken strap and looked around. A movement on the skyline drew my gaze to a man and a dog at the top of Yes Tor. Help was within reach.

Minutes later, with my dangling left arm just beginning to register pain, I arrived back at Yes Tor and sought help. The stranger spread his sweater on a rock and sat me down with a mug of coffee from his flask. He found the First Aid kit in my rucksack and took out a triangular bandage to make a sling. Not yet acknowledging the seriousness of my injury, I asked him to walk with me to the car park where an ambulance could meet me. I dialled 999 on my mobile phone and told them my plan.

"How long will it take you to get to this car-park?" they asked.

"About an hour", I guessed.

"We'll send the Air Ambulance", they decided.

Within minutes we heard the chatter of the approaching helicopter and marvelled as the pilot manoeuvred it improbably onto an untidy rock pile. Minutes later I was in the air and Dartmoor became a relief-map spread out below me.

At Plymouth's Derriford Hospital I learned that mine was the fifth broken arm they had seen since that morning's frost had turned the local streets into booby traps. My accident was one among many and, for all the expected inconvenience, still only a broken arm. I set my face to make the best of the coming six weeks, but that was excessively optimistic. I had broken the top off the left distal radius, close to the wrist, and the first attempt at setting it did not work. Ten days later I had it re-set and wired together. The pain was severe and, as the weeks wore on, it persisted and even got worse. After the wires were removed and the final plaster was put on, my arm swelled so much that the plaster had to be slit to relieve the pressure. When the plaster came off it revealed a pitiful stiff and crooked hand and the first angry signs of RSD.

I had never heard of Reflex Sympathetic Dystrophy, so the Registrar had to write the words down for me to show the physiotherapist. At least I had a name to put to my painful condition. The significance of the diagnosis did not strike until one of my sons surfed the Internet for information and phoned me in some concern.

"This is a condition you definitely don't want to have", he said.

When I looked it up myself I saw what he meant. RSD was first described during the American Civil War when doctors noticed how some injuries got worse at a stage when recovery ought to have been almost complete. Nobody has yet explained why it happens to some people and not to others, but it is not at all rare. The symptoms are caused by a mis-firing of the sympathetic nervous system, which pours chemicals into the injured area, creating hot pain and provoking paralysis. The sympathetic nervous system is part of the body's natural defences and warns us of trouble by stimulating pain. It also controls the healing processes that repair cuts and fractures. When healing is complete the processes should switch off but, in RSD sufferers, they continue firing and create problems of their own.

Surf the web for the text string "Reflex Sympathetic Dystrophy" and you will find lots of information, much of which has been published by RSD sufferers. For me, as a newly diagnosed sufferer already worried about my pain and disability, it made discouraging reading. It threatened to paralyse me permanently. It threatened me with continued and increasing pain. It threatened to change my life. I learned that some sufferers get so bad that they go into clinical depression, and may even commit suicide to escape the pain. That was not the life for me. Some web-sites, however, held out a ray of hope. RSD could be put on the run if vigorously attacked with physiotherapy within the first three months. There was something I could do for myself.

Never have I willingly accepted so much pain. I put myself through a lot when training for marathons. I ached terribly on the summit approach to some mountains. But deliberately bending and flexing my unyielding wrist and fingers was as bad as toothache; and I was doing it to myself! To keep myself going I needed only to re-read the stories I'd found on the Web. Three months of controlled pain is preferable to a lifetime's suffering, and it worked. Between my weekly sessions with the physiotherapist I worked hard at the exercises four times a day. My gradual recovery was marked by small triumphs that gave me a similar sense of achievement to completing my first Marathon. Triumphs like touching my thumb to my fingers, tearing a tissue off a roll, buttoning a shirt, lacing a shoe, eventually driving my car and, the ultimate triumph, playing the guitar again. Each significant victory raised my hopes and encouraged more effort, more determination and more self-torture.

The physiotherapist described my RSD as the worst case she had seen, but it also became the most complete recovery. Eight months after the accident I was still working to achieve a full range of movement, but was fit enough to revisit Yes Tor, the scene of my fall. After 12 months the outward signs of RSD were gone and my left wrist had almost the same range of extension and flexion as the right one. I was in remission. Early diagnosis and determined effort saved me from the threat of permanent suffering and began my campaign to raise awareness of this condition so that others can enjoy the same benefits as I have. Reflex Sympathetic Dystrophy is a painful and poorly understood condition. But it doesn't have to be a life sentence.

Derrick Phillips
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RSD Alert... <http://www.rsdalert.co.uk> or <http://www.rsdalert.org>

NB. My outcome has been good. However, this condition varies from case to case and my experience does not define the matter and my remission cannot be guaranteed to last. If you have RSD, or you think you might, you can obtain help from one of the Support Groups (details and hyperlinks shown on **RSD Alert**). Or you can make direct contact with one of the **RSD Alert** Team via <http://www.rsdalert.co.uk/team/> (to send a personal email click the button under a particular Team member's photo).

RSD Alert is a voluntary organisation maintaining an Internet-based magazine and information resource. Our aim is to disseminate information about CRPS (generally known as RSD) to encourage RSD patients and carers and to campaign for greater awareness of this condition. To help the campaign, please tell other people about RSD and encourage them to visit our website. If you have a website, please add a link to **RSD Alert**. If you have a help-group, campaign organisation or website working in this field please let us know so we can link to you and publish news about your activities.

