

# Meralgia Paresthetica, locating the lateral femoral cutaneous nerve (LFCN) with elektro-stimulation followed by a therapeutic injection of methylprednisolone/lidocaïne (M/L), a double-blind randomized placebo-controlled clinical trial

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<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Peripheral neuropathies
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON44713

### Source

ToetsingOnline

### Brief title

Meralgia Paresthetica Elektrostimulation Study

### Condition

- Peripheral neuropathies

### Synonym

Sensory entrapment neuropathy

## Research involving

Human

## Sponsors and support

**Primary sponsor:** HagaZiekenhuis

**Source(s) of monetary or material Support:** kosten worden gedragen door het ziekenhuis

## Intervention

**Keyword:** Elektrostimulation, Meralgia paresthetica, Methylprednisolone/lidocaïne

## Outcome measures

### Primary outcome

Primary endpoint will be reduction of the pain score on a visual analogue scale (VAS).

### Secondary outcome

Secondary endpoints are:

- Pain reduction after injection measured on a different scale (pain worsening, no improvement of pain, slight to moderate improvement of pain, complete remission of pain.)
- Duration of pain reduction
- Reduction of oral analgetics ( descriptive)

## Study description

### Background summary

Meralgia paresthetica (MP) is a mononeuropathy of the lateral femoral cutaneous nerve (LFCN) characterized by pain, numbness and tingling in the anterolateral aspect of the thigh. It can be organized as an entrapment neuropathy with a long list of differential diagnosis. Frequently its cause is spontaneous which include mechanical factors such as obesity, wearing a tight belt and

other conditions associated with increased intra-abdominal pressure ( 1). The incidence of meralgia paresthetica in the Rotterdam area is 4.3 per 10.000 a year. (2). In a previous study five different types of anatomical variation were described.(3) For interventional treatment of meralgia paresthetica such as local injections with anesthetics and corticosteroids the evidence is limited but seems beneficial however it has previously been performed in a blind fashion using an anatomical landmark. Locating a nerve with electrostimulation is easily applicable and usually well tolerated by patients. It does not require a radiologist or neurologist specialized in ultrasound.(4) This therapy can be used for a more accurate localization and a more accurate blockade of the LFCN.\*

## **Study objective**

The aim of this study is to analyse the analgetic effect of a local injection in the lateral femoral cutaneous nerve ( LFCN) with methylprednisolone/lidocaine (M/L) after localisation through elektro stimulation VS placebo. In this trial we hope to objectify: Therapeutic value of a localized injection with M/L in MP patients, when localized by elektro-stimulation.

## **Study design**

This will be a single centered double-blind randomized placebo-controlled intervention study.

## **Intervention**

Patients will be injected with 2,5 ml methylprednisolone/lidocaine or 2,5 ml saline 0,9% 1 cm medial of the anterior superior iliac spine after localisation with electro stimulation of the LFCN.

## **Study burden and risks**

Nature and extent of the burden and risks associated with participation, benefit and group relatedness:

Needle examination is a study that is often used for the treatment of MP and does not form an additional risk for the patient group. Often described adverse effects for both groups are haematoma, reversible dermatomal change or duration of pain after injection. Furthermore a temporary increase in numbness in the area of the LFCN can occur.

## Contacts

### Public

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### Scientific

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

Adult patients with newly diagnosed idiopathic meralgia paresthetica will be recruited. Age: 18 years and older. Duration 4 weeks or more.

Diagnostic criteria: Meralgia paresthetica characterized by pain, numbness and tingling in the anterolateral aspect of the thigh in the area of the LFCN

### Exclusion criteria

1. Coexisting disorders or conditions that may mimic MP such as lumbar radiculopathy, severe polyneuropathy.
2. Known allergic reaction to methylprednisolone/lidocaine.
3. Pregnancy

4. No localization possible through electrostimulation
5. Systemic viral or fungal infections
6. Known allergy to steroids
7. No injection with steroids can be given in a vicinity of a preexistent infectious area

## Study design

### Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)
Control:	Placebo
Primary purpose:	Diagnostic

### Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	16-10-2015
Enrollment:	20
Type:	Actual

### Medical products/devices used

Product type:	Medicine
Brand name:	Depo-medrol/ lidocaine
Generic name:	Depo-medrol/ lidocaine
Registration:	Yes - NL outside intended use

## Ethics review

Approved WMO	
Date:	30-06-2015
Application type:	First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)  
metc-ldd@lumc.nl

Approved WMO  
Date: 02-06-2017

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)  
metc-ldd@lumc.nl

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

Register	ID
EudraCT	EUCTR2014-004052-54-NL
CCMO	NL50504.098.15

## Study results

Results posted: 10-08-2018

Actual enrolment: 20

**First publication**  
31-05-2018