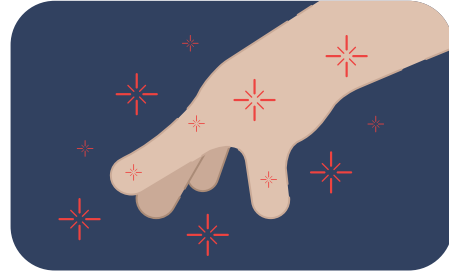


Patient presenting with Pain associated with Peripheral Neuropathy



Peripheral neuropathy is damage to the nerves outside the spinal cord and most commonly affects patients' hands and feet. This type of pain typically presents as numbness or a tingling sensation. Patients may report that these symptoms are constant, or they may be intermittent depending on the patient's experience.



Over-the-counter conversations:

When responding to symptoms in the pharmacy, it is important to establish which medications a patient is taking. This is because:

- It could be a side effect to a medicine
- It could be a reason to stop a medicine
- It can influence the over-the-counter advice/treatments you can recommend

You may want to incorporate the following questions into your conversations:

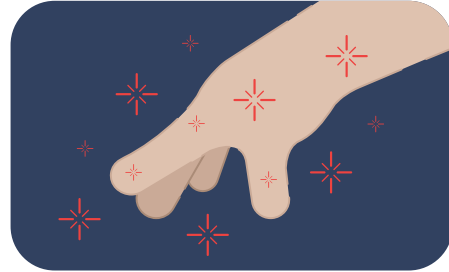
- Do you take any medicines prescribed by your GP?
- Are you on any treatment in/from the hospital?
What condition do you have hospital treatment for?
- Do you have any previous history of peripheral neuropathy?
- Do you have any other conditions which can increase your risk of peripheral neuropathy
e.g. diabetes?

**IF A PATIENT IS ON CANCER TREATMENT OR TREATMENT FROM THE HOSPITAL,
ALWAYS REFER TO YOUR PHARMACIST FOR FURTHER ASSESSMENT AND ADVICE.**

The full Let's Communicate Cancer course is available by clicking [here](#)

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Patient presenting with Pain associated with Peripheral Neuropathy



Pharmacist Intervention:

Assess the symptom

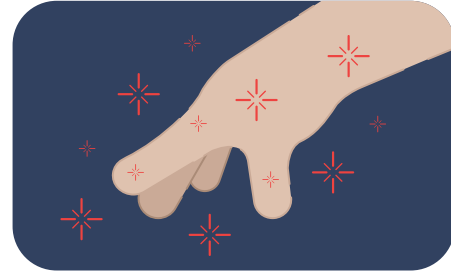
When assessing the patient's symptoms, it is important to try and address the following:

1. What type of cancer treatment they are receiving
 - Chemotherapy/Radiotherapy/Immunotherapy/Surgery
 - Route of administration - Oral/Injection/Infusion
2. Whether the symptom they are experiencing is a side effect that the hospital has made them aware of
 - Certain chemotherapy agents e.g. oxaliplatin and paclitaxel, can cause peripheral neuropathy
3. Has the hospital provided any advice or medicines on how to manage this side effect
 - When patients are prescribed cancer treatment that can cause peripheral neuropathy, they are usually advised to protect their hands and feet as much as possible by wearing gloves/shoes to avoid extremes of temperature
4. The outcome of following this advice or supportive medications to try and manage the side effect
 - Has the patient taken any painkillers – OTC/prescribed?
Any improvement of symptoms?

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Patient presenting with Pain associated with Peripheral Neuropathy



Pharmacist Intervention (continued)

Assess the severity of the symptom

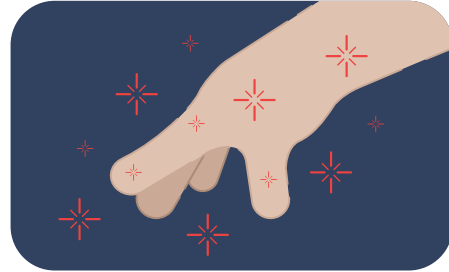
Ask the patient about where the pain is and how long they have had it. Assess the severity (grade) of pain they are experiencing using the table below:

Grade	0	1	2	3
Pain experienced	None or no change from normal for patient with pre-existing neuropathy	Mild pain not interfering with daily activities. Often described as a tingling sensation	Moderate pain interfering with daily activities. Often described as more significant numbness or burning. This may cause some patients difficulty undertaking activities which require greater coordination e.g. fastening buttons	Severe pain interfering with daily activities. Often described as intolerable burning sensation or complete numbness. Patients may be unable to undertake activities which require greater coordination e.g. fastening button
Action	OTC advice / treatment	OTC advice / treatment	OTC advice / treatment	Refer to cancer team

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Patient presenting with Pain associated with Peripheral Neuropathy



Advice and over the counter treatments which can be provided in the pharmacy **GRADE 0-1/GRADE 2**

- Protect your hands and feet as much as possible by avoiding touching very hot or cold items, wearing gloves when doing things with your hands e.g. gardening/washing up and avoid walking around barefooted
- OTC painkillers are usually ineffective at managing peripheral neuropathy. If moderate pain, a referral to GP or secondary care team may result in prescribing of neuropathic painkillers e.g. gabapentin/pregabalin.

When to refer cross sector primary/secondary care **GRADE 2/GRADE 3-4**

Advise patient to contact their hospital

- If their pain is stopping them enjoying their everyday life
- If they are experiencing pain radiating down from their lower back into their legs
- If pain is associated with swelling/redness consider DVT or cellulitis

How to refer cross sector primary/secondary care

- Clinical Nurse Specialist (CNS) in hospital cancer care team.
- 24-hour hospital cancer treatment "hotline".

Additional Support

Comprehensive information regarding individual cancers, or cancer treatments, is available from the **Macmillan website**

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