



The pooled 12-month global prevalence was 3.7% (95% CI 3.2-4.2) and the pooled 24-month prevalence was 6.1% (95% CI 5.2-7.1).

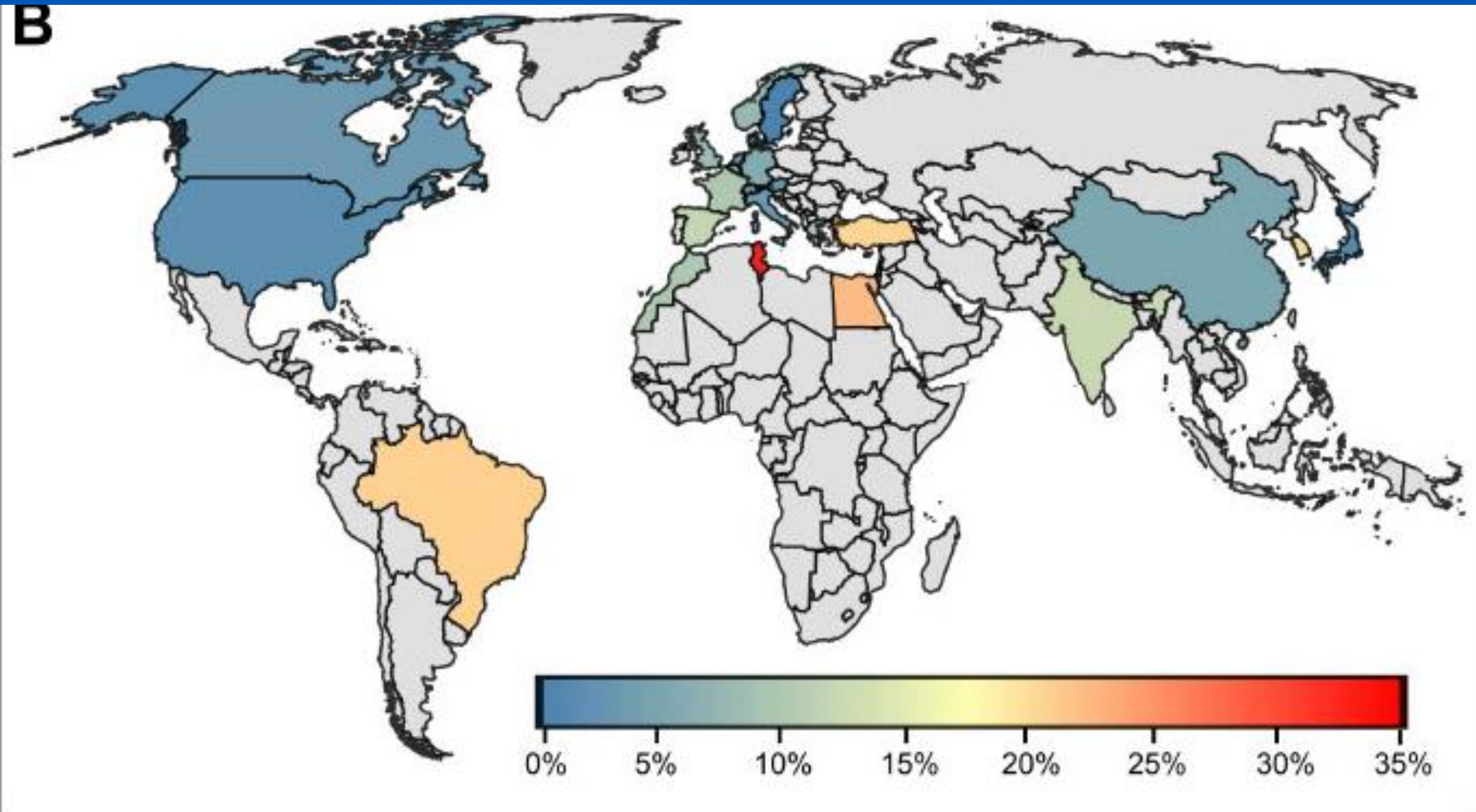
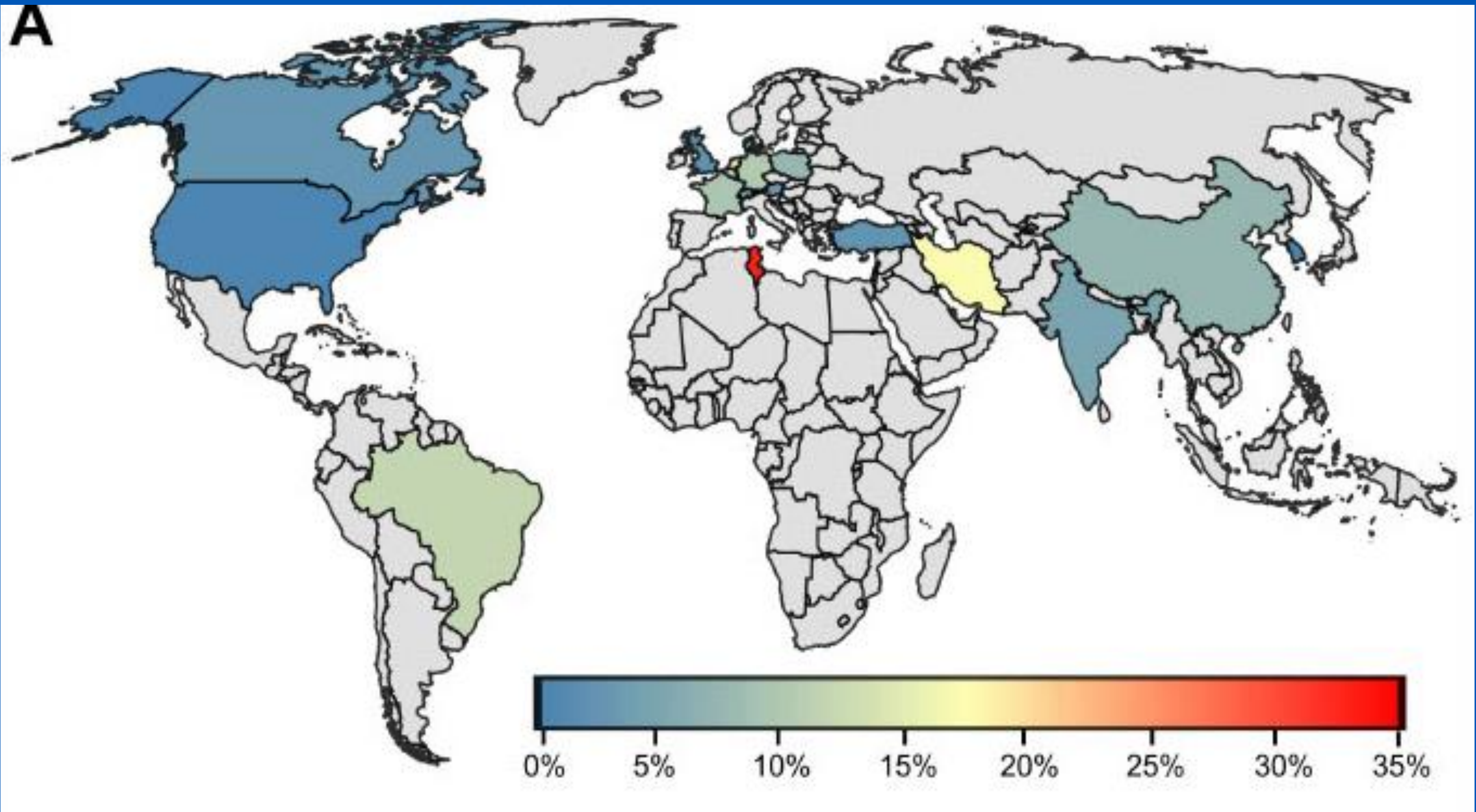


Figure 3 . Heat Maps of Global Burden of CRPS. Rates are displayed for A) 12-month prevalence and B) 24-month prevalence of CRPS in the figure legend with a corresponding color.

CONCLUSION

- This meta-analysis estimated the CRPS prevalence among adults by combining data of over 2.4 million participants from 35 countries.
- The global prevalence was 9.4% at 1 month, 6.9% at 3 months, 3.7% at 6 and 12 months and 6.1% at 24 months.
- Most prevalence estimates were derived from developed countries highlighting the gap in CRPS research.

REFERENCES

1. de Mos M, de Bruijn AG, Huygen FJ, Dieleman JP, Stricker BH, Sturkenboom MC. The incidence of complex regional pain syndrome: a population-based study. *Pain*. May 2007;129(1-2):12-20. doi:10.1016/j.pain.2006.09.008
2. Kim H, Lee CH, Kim SH, Kim YD. Epidemiology of complex regional pain syndrome in Korea: An electronic population health data study. *PLoS One*. 2018;13(6):e0198147. doi:10.1371/journal.pone.0198147
3. Sandroni P, Benrud-Larson LM, McClelland RL, Low PA. Complex regional pain syndrome type I: incidence and prevalence in Olmsted county, a population-based study. *Pain*. May 2003;103(1-2):199-207. doi:10.1016/s0304-3959(03)00065-4

Global Burden of Complex Regional Pain Syndrome: Estimates of Prevalence From 35 Countries Between 1978 and 2023



Johana Klasova¹, Chandan Saini², Albert Chang³, Stephen Music¹, Jay Dipesh Shah⁴, Praveen Reddy Elmati⁵, Ahish Chitneni⁶, Jimmy To⁷, Nasir Hussain⁸, Ryan D’Souza¹

1. Department of Anesthesiology and Perioperative Medicine, Mayo Clinic, Rochester, MN, USA; 2. Department of Physical Medicine and Rehabilitation, Rush University Medical Center, Chicago, IL; 3. Department of Physical Medicine and Rehabilitation, University of Washington, Seattle, WA; 4. Department of Anesthesiology, Baylor College of Medicine, Houston, TX; 5. Department of Anesthesiology and Interventional Pain, Saint Clare’s Health, Denville, NJ; 6. Department of Rehabilitation and Regenerative Medicine, New York-Presbyterian Hospital-Columbia and Cornell, New York, NY; 7. Department of Rehabilitation Medicine, University of Minnesota, Minneapolis, MN; 8. Department of Anesthesiology, The Ohio State Wexner Medical Center, Columbus, OH

INTRODUCTION

- Complex regional pain syndrome (CRPS) is a debilitating chronic pain condition with prevalence ranging from 5.4 to 29 per 100,000 individuals in *general population*.¹⁻³
- The global prevalence in *at-risk population* following an inciting event such as fracture, surgery, or neurological injury remains unknown.
- We aim to address this gap by examining the global prevalence of CRPS among *at-risk population* from 1978 to 2023. The 12-month and 24-month prevalence were a primary outcomes.

METHODS

- Relevant studies were identified through a systematic search following the PRISMA guidelines.
- Inclusion criteria: Studies reporting CRPS prevalence in *at-risk* adult patients.
- Estimates from individual studies were transformed using double-arcsine transformation, and the resulting estimates with 95% confidence interval (CI) were back-transformed and pooled in a meta-analysis using a random-effects model.

RESULTS

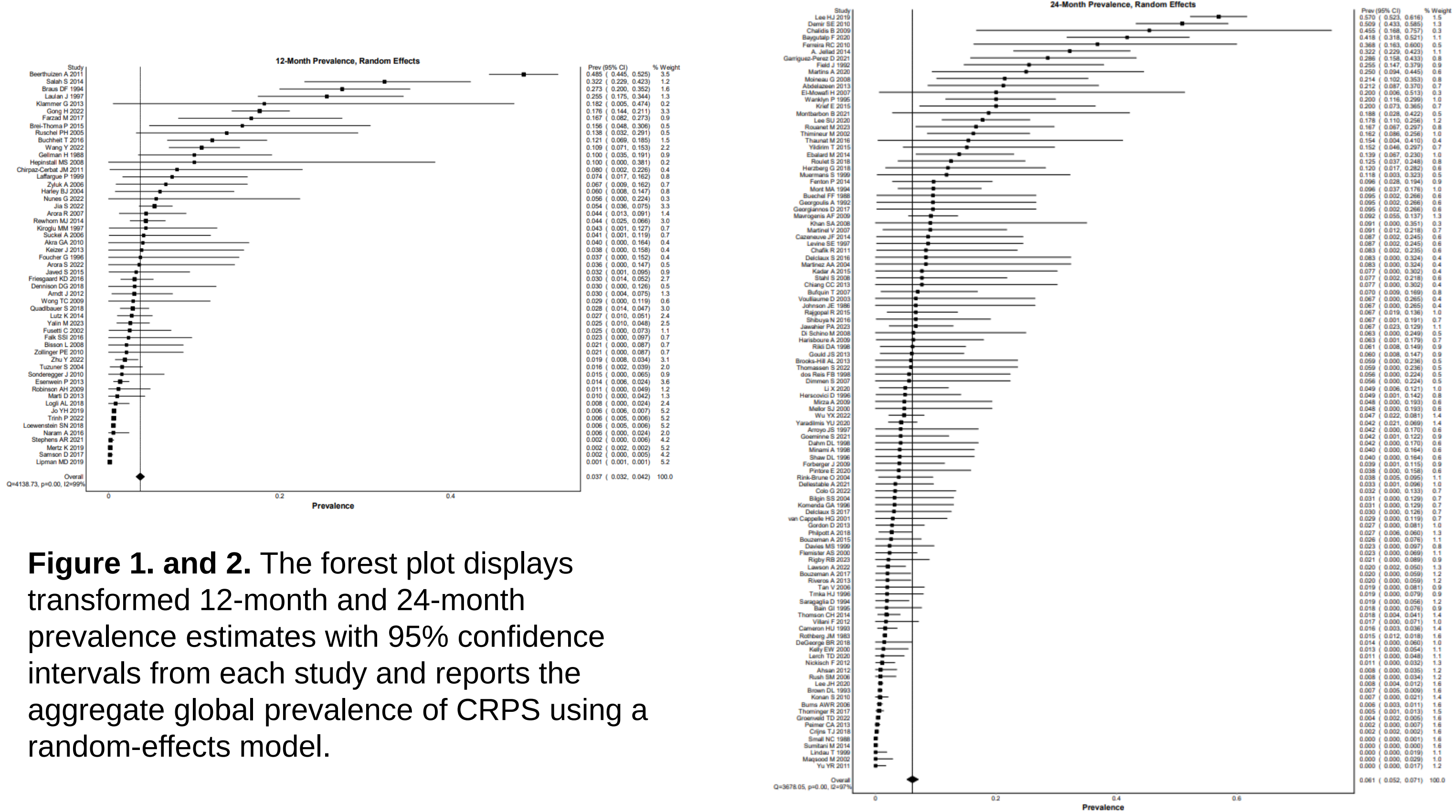


Figure 1. and 2. The forest plot displays transformed 12-month and 24-month prevalence estimates with 95% confidence intervals from each study and reports the aggregate global prevalence of CRPS using a random-effects model.