

M E A N D M Y N E U R O L O G I C A L I L L N E S S

notalgia paraesthetica

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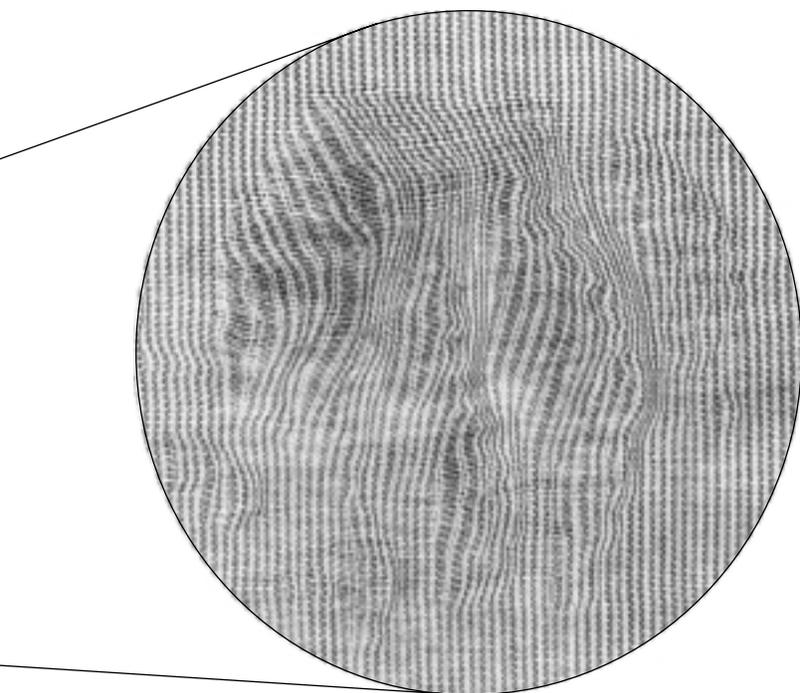
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It must always be interesting and educational for a clinician to find they have a disease. The interest must be all the more acute when it affects the system in which they are a specialist, but easier to express when it is a trivial disorder that needs no treatment. Indeed, if I have any reservation about discussing my symptoms, it is simply that it is hard to believe they are worthy of the interest of others. Perhaps this is an inhibition that some of our patients share, although it is hard to maintain this view after a routine Monday morning clinic.

At the age of 50, I have had Notalgia Paraesthetica for at least 20 years; it is difficult to accurately recall. I can recognize the problems

that patients frequently have in giving a precise history.

The core symptom is that of variable sensory disturbance affecting the left upper back, a roughly irregular oval shape (about 5 × 4 cm) beginning at the medial edge of the lower third of the scapula, extending medially. The feelings involve a 'numb' itching or irritation, at times almost like an intense pins and needles, or a burning sensation. It is difficult to describe precisely and I have never had any identical sensory symptoms elsewhere. Its variability in quality is matched by a variability in severity. It may go away or be very mild for months and then be quite troublesome for



weeks to months. Even during a bad patch, it can be very irritating for a few hours and then be almost unnoticeable for hours. Some variation may be due to distraction or varying attention, but not all. I have not been able to identify any real cause for these variations, and I have the impression that it has been somewhat less troublesome in the last few years.

When it is intense, I have to scratch it. I am not at all sure that this does anything other than produce a counter-sensation, but it is impossible not to do something when it is bad. It is a feature of the condition that I have tended to wear a patch away in my shirts due to the repeated scratching of the area – either with my thumb nail or with a pen. Most of my shirts develop a thin area over this region which eventually wears through (see picture). I have often sat back in clinics, listening to patients, while vigorously scratching my back with my pen. On a few occasions, making the error of using a biro without its top, leaving pen marks on the material.

It is become apparent that cutaneous sensibility in this area is slightly but definitely impaired. I am reasonably certain that this appeared after the onset of the symptoms but it is not something that I would have noticed

except during scratching the area. I think the numbness is slightly worse during active symptoms. Over the last 10 years, the skin in this area has changed, being slightly coarser to feel and with a slightly excessive amount of hair. I have presumed that these changes are secondary to the chronic effects of scratching or rubbing the area.

I have never consulted a doctor about it. Firstly, I regarded it as an irritating nuisance rather than of any serious concern. Secondly, I came across a reassuring text-book account of it about 18 years ago. I have seen three patients with the condition and have immediately recognized their

accounts. It was not a condition ever mentioned to me in medical school, nor indeed by any neurologist during my training (as far as I can recall). At times, its intensity has been such that I think I would have sought medical advice, had I had no medical knowledge

As far as the cause is concerned, it is usually attributed to some sort of disturbance of the cutaneous branches of the dorsal rami, but I confess to a relative disinterest in the underlying anatomy and pathology. It is enough to know that it is a recognized syndrome with no serious implications; perhaps I am a better patient than neurologist.

My father, mother, and two sisters have not had any similar symptoms but, interestingly, one of my daughters appears to have developed it. Kathryn is now nearly 12 and, when about 5, always wanted her left shoulder scratched in exactly the same place in which I have my own symptoms. She said it 'itched' there. This became quite frequent for a while but has not been a prominent symptom in the last year, although she says it still bothers her from time to time. There is nothing to see and there is no definite sensory loss as far as I can tell, within the limits of the sensory examination in a relatively uninterested proto-teenager.