Ohio Legislative Service Commission

Bill Analysis

Carol Napp

Am. S.B. 40

129th General Assembly
(As Reported by H. Health and Aging)

Sens. Kearney, Cafaro, Brown, Sawyer, Smith, Wagoner, Manning, Tavares, Bacon, Balderson, Beagle, Burke, Daniels, Faber, Hite, Hughes, Jones, LaRose, Lehner, Obhof, Oelslager, Patton, Schaffer, Schiavoni, Skindell, Turner

Reps. Goodwin, Fende, Antonio, Barnes, Carney, Gardner, Garland, Hackett, R. Hagan, Hill, Hottinger, Johnson, Ramos, Yuko

BILL SUMMARY

- Requires the Department of Health to promote education on complex regional pain syndrome through the Department's web site.
- Designates November as "Complex Regional Pain Syndrome Awareness Month."
- Specifies that the bill is to be known as the "Complex Regional Pain Syndrome Education Act."

CONTENT AND OPERATION

Complex regional pain syndrome − legislative findings

Complex regional pain syndrome (CRPS), also known as reflex sympathetic dystrophy syndrome, is defined by the bill as a debilitating and progressively chronic syndrome characterized by severe burning pain, pathological changes in bone and skin, excessive sweating, tissue swelling, and extreme sensitivity to touch. The bill specifies that the General Assembly makes the following findings and declarations regarding CRPS:

(1) CRPS occurs in 5% of all cases of nerve injuries.

(2) CRPS is thought to be a neuropathic pain syndrome that generally occurs at the site of a minor or major trauma injury, but may also occur without an apparent injury.

(3) While the cause of CRPS is unknown, both the peripheral and central nervous systems are involved.

(4) The syndrome is unique in that it simultaneously affects the nerves, skin, muscles, blood vessels, and bones, and if untreated, can result in permanent disability and chronic pain.

(5) CRPS is often misdiagnosed because the syndrome is either unknown or poorly understood. The prognosis for patients suffering from CRPS is generally much better when CRPS is identified and treated as early as possible.

(6) If treatment is delayed CRPS can quickly spread to an entire limb and changes in bone and muscle may become irreversible, resulting in limited mobility, atrophy of the muscles, and eventual permanent disability.

(7) Since a delay in the diagnosis or treatment of CRPS can result in severe physical and physiological problems, and early recognition and prompt treatment of CRPS provides the greatest opportunity for recovery, it is in the best interest of the public to require the Department of Health to include CRPS information on its web site to educate individuals and medical professionals on this debilitative condition.[1]

CRPS information provided by the Department of Health

The bill requires the Department of Health to include information on its web site to promote CRPS education in a manner that enables individuals to make informed decisions about their health. The requirement takes effect 90 days after the bill's effective date.[2]

The information on the Department's web site must include all of the following:

(1) Emerging research regarding the pathophysiology of CRPS;

(2) The risk factors that contribute to the manifestation of CRPS;

(3) Available treatment options, including the risks and benefits of those options;

(4) Information on environmental safety and injury prevention;

(5) Information on rest and the use of appropriate body mechanics;

---

[1] Section 3.

[2] R.C. 3701.137; Section 2.

(6) Information on the availability of CRPS diagnostic, treatment, and outreach services;

(7) Information concerning any other factors or elements that might mitigate the effects of CRPS.

The bill requires the Department to notify boards of health, hospitals, clinics, and other health care providers about the availability of information on CRPS on the Department's web site.[3]

CRPS Awareness Month; CRPS Education Act

The bill designates November as "Complex Regional Pain Syndrome Awareness Month."[4]

After enactment, the bill is to be known and may be cited as the "Complex Regional Pain Syndrome Education Act."[5]

HISTORY

ACTION	DATE
Introduced	02-01-11
Reported, S. Health, Human Services & Aging	11-21-11
Passed Senate (31-0)	11-30-11
Reported, H. Health & Aging	01-25-12

s0040-rh-129.docx/ks

[3] R.C. 3701.137.

[4] R.C. 5.2271.

[5] Section 4.