Introduction
Although motor cortex stimulation (MCS) has been used for more than 20 years in the treatment of chronic neuropathic pain, there is still a debate in the efficacy of MCS.

Methods
To investigate the long-term results and the factors associated with long-term success in chronic MCS, 21 patients who underwent MCS trial were classified into central poststroke pain (CPSP), central pain of spinal cord injury (SCI pain), and peripheral neuropathic pain (PNeP), and we investigated the clinical factors associated with long-term success and degree of pain relief.

Results
Of the 21 patients, 16 (76.2%) had a successful trial and underwent chronic MCS. In the long-term follow-up (53 ± 39 months), only type of pain (CPSP and PNeP) was associated with long-term success defined as more than 30% pain relief compared with baseline (p<0.05, chi-square test). The difference in pain relief was not significant in SCI pain (>0.05, one-way Anova). The other variables did not show any significant influence in the long-term success and degree of pain relief (>0.05, one-way Anova).

Conclusions
MCS was more effective in the treatment of chronic neuropathic pain of CPSP and PNeP than that of SCI pain in the long-term.

Learning Objectives
To learn about the long-term results of motor cortex stimulation in neuropathic pain syndrome

References
