

WHY PERFORM THIS PROCEDURE

Denervation of the painful joint in your spine can reduce pain significantly for a number of months (range 3 to 18 months or more)

The aim is to break the pain cycle to enable you to engage in a rehabilitative process, which is the mainstay of treatment for chronic pain. Strengthening the muscles that support your spine can further prolong the benefit of the denervation procedure.

IS THERE ANY THING I NEED TO INFORM THE DOCTOR BEFORE THE PROCEDURE?

- ◆ You should always tell the doctor if you are pregnant or likely to be pregnant.
- ◆ You should inform the doctor about any blood thinning medications that you might be taking. This includes Aspirin, Clopidogrel, Warfarin, Heparin and some of the newer ones like Rivaroxaban.
- ◆ Finally, always inform the doctor about your allergies, especially latex, iodine and medications.





OTHER TREATMENTS OFFERED

Lumbar epidural Injection	Lumbar radiofrequency Denervation
Lumbar Facet Injections	Botox for Migraine
Cervical Facet Injections	Trigger Point Injection
Lumbar Diagnostic Blocks	Sacro-Iliac Joint Injection
Cervical Diagnostic Blocks	Coccygeal Injection
Transforaminal epidural Injections	Occipital Nerve Blocks
Plantar Fascia Injections	Trochanteric Bursa Injections

OTHER CONDITIONS TREATED

Fibromyalgia	Trigeminal Neuralgia
Mechanical Low Back Pain	Neuropathic Pain
Headache	Diabetic Neuropathy
Migraine	Complex Regional Pain
Sciatica	Whiplash Pain
Sacro-iliac Pain	Medical-Legal Reporting (Personal Injury)
Trochanteric Bursitis	

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Facet Joint Radiofrequency Lesioning (Denervation)

The aim of this information sheet is to provide you with information relating to Rhizolysis/Radio Frequency Lesioning (Denervation) and to answer some questions that you may have.



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WHAT IS RHIZOLYSIS/RADIO FREQUENCY LESIONING?

Rhizolysis, or Radio Frequency Lesioning (Denervation) is a procedure where nerves to facet joints (medial branch nerves) are destroyed with heat (sometimes called lesioning or denervation). The procedure is usually undertaken when medial branch blocks have proven to produce significant pain relief for a short duration. The purpose is to try and produce more prolonged pain relief sometimes even lasting a number of years. The probe is heated to disrupt the nerves that transmit your back pain. In addition, local anaesthetic and/or steroid is injected to reduce any post procedural discomfort. Usually, several injections are undertaken during the same procedure.

It is used for localised spinal pain in the lumbar or cervical area where simpler measures have not helped.

WHAT WILL HAPPEN TO ME DURING THE PROCEDURE?

- ◆ The procedure is performed under local anaesthetic, and you will remain awake during the procedure.
- ◆ The procedure is performed under fluoroscopy (x-ray) guidance. You will be carefully positioned on the table and local anaesthetic will be used to numb the skin.
- ◆ The doctor will then insert a special needle close to each nerve supplying the facet joint. Special tests are performed to check the accurate positioning of the needle prior to lesioning.
- ◆ Local anaesthetic is injected onto the nerves before performing the heat lesion. Long lasting local anaesthetic, sometimes mixed with steroid, is injected after the procedure to reduce discomfort in the first 24 hours.

ARE THERE ANY RISKS OR SIDE-EFFECTS?

As with any procedure, side-effects may occur. However, these are usually minor and there is little risk of serious harm.

Side-effects may include;

- ◆ Mild local tenderness and / or bruising at the site of the injection,. This usually settles over the first few days
- ◆ A prickling sunburn-like sensation over the skin of the back, that usually settles with time but may last a few months. Occasionally the procedure may cause numbness of the skin.
- ◆ Numbness and/or weakness in your legs for lumbar injections, due to the local anaesthetic spread, which may happen very rarely. This is temporary and will rapidly resolve over minutes or rarely hours
- ◆ Infection. This is rare. You should seek medical help if there is local warmth or redness over the site of injection with tenderness and/or you feel hot and unwell. This may require antibiotic treatment
- ◆ There are important nerves in the spine, but serious nerve injury is extremely rare (less than 1 in 10,000 cases). Injury to nerves that supply muscles to your leg can lead to foot drop for lumbar injections causing you to be unable to lift your foot up. Great care is taken during the procedure to avoid this very rare complication by placing the needles carefully under x-ray and only treating the nerves when the doctor is confident that they are in the right position
- ◆ Injection treatments are not always effective and may not help your pain

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FOLLOWING THE PROCEDURE

A nurse will monitor you for up to 30 minutes after the procedure.

You will be instructed not to drive for up to 24 hours after the injection or longer if you feel unsafe. You will need some one responsible to take you home.

You can generally return to work the next day but you should avoid heavy work and strenuous activity for up to 48 hours.

You may find your pain gets worse for a few weeks before it gets better. You may notice a feeling of numbness, heaviness or pins and needles. This is normal and will wear off. Take your regular painkillers and try and move about the house, but do not do anything too strenuous. Please keep the area of the injections dry for 24 hours following the procedure.

The procedure can take up to 6 weeks to become fully effective.

As your pain decreases, you should try to gently increase your exercise. Simple activities like a daily walk, using an exercise bike or swimming on your back will help to improve your muscle tone. It is best to increase your activities slowly. Your doctor or physiotherapist will give specific advice which may differ depending on which nerves are treated e.g. nerves in your back or neck.

