

Southern Pain & Neurological

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CERVICAL, THORACIC, AND LUMBAR DISCOGRAPHY

What are the discs?

The discs are cushion-like pads that separate the hard vertebral bones of your spine. A disc may generate pain if it herniates, tears or degenerates. A disc may put pressure on nerves or the spinal cord which can also cause pain. A disc may cause pain in your neck, mid-back, lower back, arms, chest wall, abdomen or legs. Other structures in your spine may also cause similar pain such as the muscles, joints, and nerves. Usually, we have ruled out these other structures as a pain source (through history and physical examination, review of x-rays, CTs, MRIs, myelograms, and/or other diagnostic injections / procedures such as facet injections, sacroiliac joint injections and nerve root blocks) before performing discography.

What is discography and why is it helpful?

Discography helps confirm or deny the disc(s) as a source of your pain. This procedure entails the placement of a needle into each disc followed by an injection of contrast (dye) into the disc during live X-ray guidance. While the contrast is being injected into the disc, you communicate to the physician if your normal pain is reproduced, thus identifying if the disc is or is not involved in your pain problem. CT scans and MRI scans only demonstrate anatomy and cannot absolutely prove your pain source. In many instances, the discs may be abnormal on MRI or CT scans but not be a source of pain. Only discography, can tell if the disc itself is a probable source of pain. Therefore, discography is done to identify which discs are painful and help the surgeon plan the correct surgery or avoid surgery that may not be beneficial. Discography is usually done when your pain is significant enough to consider surgery.

What will happen to me during the procedure?

An IV will be started so that antibiotics (to prevent infection) and sedation can be given. The skin will be cleansed using sterile scrub (soap). Next, the physician will numb a small area of skin with numbing medicine. This medicine stings for several seconds. After the numbing medicine is effective, your doctor will direct a needle, using live x-ray guidance, into the disc space. You may feel temporary discomfort as the needle passes through muscle or near a nerve

root. Your doctor may perform this at more than one disc level.

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After the needles are in their proper locations, a small amount of contrast (dye) is injected into each disc. Your doctor will ask you about your experience as the dye is being injected. It is important that you describe what you feel as accurately as you can. You need to be alert enough to be aware of and describe the sensations you experience. Your doctor will want to know if the discomfort you may experience with the disc injection is the **typical or usual pain** you experience at home everyday.

What will happen after the procedure?

Immediately after the procedure you will be taken back to the recovery area where you will be monitored for 30 - 60 minutes. You will then go to the radiology department for a CT scan. You will not be able to drive the day of the procedure. You should make a follow up appointment 2 weeks after the procedure to review your results.

General Pre/Post Procedure Instructions

You should not eat or drink anything after 12 o'clock the night before the procedure. If you are a diabetic, do not take your insulin or oral medication the morning of the procedure because you have had nothing to eat. If you are taking routine heart or blood pressure medicine, you should take it with a **sip** of water the morning of the procedure. You should not take medications that may give pain relief or lessen your usual pain. These medicines can be restarted after the procedure if they are needed. If you are on Coumadin, Heparin, Plavix, or other blood thinners (including aspirin and all medications that contain aspirin), you must notify the office well in advance so the timing of these medications can be coordinated with your primary physician.

You will be at the hospital / surgery center for a few hours for your procedure.

A driver must accompany you and be responsible for driving you home.

No driving is allowed the day of the procedure. You may return to your normal activities the day after the procedure, including returning to work.

If you are unable to keep this appointment, please give notice as soon as possible and at least 24 hours in advance during regular office hours. Thank you.