

# Southern Pain & Neurological

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## **STEP 1: Diagnostic Medial Branch Blocks (Facet Nerve Blocks)**

### **What are the medial branch nerves? Why are medial branch blocks helpful?**

Medial branch nerves are the very small nerve branches that communicate pain caused by the facet joints in the spine. These nerves do not control any muscles or sensation in the arms or legs. They are located along a bony groove in the spine.

If this procedure has been scheduled, there is strong evidence to suspect that the facet joints are the source of your pain. Benefit may be obtained from having these medial branch nerves temporarily blocked with an anesthetic to see if a more permanent way of blocking these nerves would provide pain relief for a longer term. Blocking these medial branch nerves temporarily stops the transmission of pain signals from the facet joints to the brain. If you receive temporary relief of a portion of your pain after these injections you will likely benefit from radiofrequency ablation of the same nerves. Radiofrequency ablation provides the same amount of relief as the diagnostic blocks but lasts approximately 6 – 12 months.

### **What happens during the medial branch blocks?**

An IV will be started, so that sedation can be given. You will be placed on the x-ray table and positioned in such a way that the physician can best visualize the bony areas where the medial branch nerves pass. The skin is cleansed using sterile scrub (soap). Next, the physician numbs a small area of skin with numbing medicine. This medicine stings for several seconds. Using x-ray guidance, your physician directs a small needle, near the specific nerve or nerves being tested. A small mixture of numbing medicine (anesthetic) and anti-inflammatory (cortisone/steroid) is then injected.

### **What happens after the procedure?**

Immediately after the procedure, you will go back to the recovery area where you will be monitored for 30-60 minutes. You will be asked to report the immediate percentage of pain relief and record the relief experienced during that day on a post injection evaluation sheet ("pain diary"). You must call and set up a follow-up appointment for two weeks after the procedure to discuss the results from this block and to determine if you will proceed to step 2 of the treatment of your facet nerves.

## STEP 2: Radiofrequency Ablation Medial Branches/Facet Nerves

### What is radiofrequency (RF) ablation of the facet nerves? Why is it Helpful?

Radiofrequency ablation is accomplished by sending a radiofrequency signal to the medial branch that provides sensation to the facet joint. This radiofrequency signal interrupts the pain signal going from the facet nerve to the brain. The relief from the radiofrequency ablation should mimic that of the diagnostic medial branch blocks but last approximately 6 – 12 months. The purpose of RF ablation of the facet nerves is to decrease pain from the facet joint and improve function. This is done only if pain is temporarily relieved by prior diagnostic facet nerve (medial branch nerve) blocks.

### How is it done?

An IV will be started so that short acting sedation can be given during placement of needles near the facet nerves using x-ray guidance. The number of needles that will be placed depends on the number of levels that are being treated. After the needles are placed, you will then be awakened and a controlled radiofrequency signal will be sent to a facet nerve. The needles proper location in proximity to the nerve is confirmed by your identification of a **change** in sensation produced by the radiofrequency signal. Patients describe this sensation as a tightness, squeezing, pain, pressure, tingling, burning, etc. By successfully identifying this **change** in sensation the doctor confirms that the needle is close enough to the nerve so the best outcome of this procedure can be obtained. Your ability to identify the **change** in sensation determines the quality of the block. A radiofrequency signal is then used to decrease the sensation of the facet joints to improve your pain. The procedure will take approximately 40-60 minutes. You will be monitored for an additional hour after the procedure. All measures will be taken to ensure your comfort and safety. After you return home, you may use ice packs to relieve any discomfort. **You will not be able to drive the day of your procedure because you received sedation.** You must call and set up a follow-up appointment for two weeks after the procedure.

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### General Pre/Post 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 for a few hours for your procedure. **A driver must accompany you and be responsible for getting 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.*