

# Radio Frequency Facet Nerve Ablation or Denervation

An information guide



# Radio Frequency Facet Nerve Ablation or Denervation

If you are on blood thinning medications such as Warfarin, Nicoumalone (Sinthrome), Aspirin, Clopidogrel (Plavix), Ticlopidine (Ticlid) then please contact the Booking and Scheduling Department on 0161 778 2288.

## What is radio frequency facet nerve ablation or denervation?

It involves the destruction, or long term block, of the small nerves of the facet joints of the vertebrae (back bone).

The facet joints are small weight-bearing joints located in pairs on the back, from the neck to the lower back. The radio frequency current is an electrical current, which is applied to the nerves and generates sufficient heat to either destroy or deactivate them.

These nerves are very small nerves and carry only pain sensations.

Sometimes the denervation of the facet joints is combined with facet joint injection, in which a mixture of local anaesthetic (medication that temporarily numbs the nerves) and steroids (anti-inflammatory medication) is injected into the facet joints.

The local anaesthetic in the mixture helps to relieve the pain and the steroids reduce the inflammation. The procedure is carried out carefully, under x-ray guidance, to ensure that the injection is in the correct place.

The injection is given to several of the affected facet joints at any one time. The injection can be given at the back of the neck or in the back, depending in the site of pain.

The anti-inflammatory steroids should not be confused with the anabolic steroids used by athletes for building up muscle mass.

Steroids have been licensed for use in joint spaces and have been in use for many years.

### **Why is the procedure done?**

Your pain may be due to stress to the facet joints. This procedure will help to destroy or block the nerves supplying these joints and reduce the pain. It is performed more commonly for the back/leg pains or neck pains caused by disc problems, inflammation of the nerves or arthritis.

The injection helps to reduce pain, improve mobility, facilitate physiotherapy and thus improve your general functioning. After achieving a reduction in pain we hope that you will take the opportunity to perform regular back strengthening exercises, which are the best way to improve the function of your back over the longer term.

### **How is the procedure done?**

You will be asked to come to the Day Surgery Unit.

A cannula (plastic tube) will be placed at the back of your hand. The procedure is done under local anaesthesia (medication to numb the skin). In some circumstances sedation (medication to relax) and other medications such as pain killers can be given through the cannula.

The injection will be done with you lying on your front. With the help of an x-ray machine, the correct site is marked on the skin and local anaesthetic (medication that numbs the nerves) is given to numb the skin.

The x-ray machine is used to ensure correct placement of the radio frequency needle. In addition, the nerves are electrically stimulated with the needle to confirm correct placement.

The doctor will check with you several times to find out the nature of any sensation you may be experiencing as the nerves are stimulated. After the correct nerves are identified, local anaesthetic is given to numb them before the nerves are deactivated.

Deactivation of the nerves may be combined with facet joint injections with local anaesthetic and steroids.

### **What are the beneficial effects?**

The injections and deactivation of the nerves are helpful in chronic back pain or neck pain. Some patients will have prolonged pain relief and others get relief for shorter periods of time.

Some may not get any benefit from the procedure.

### **What are the side effects?**

Typically there is some pain at the injection site after the procedure and you may initially experience some increase in your pain. This is usually self limiting and easily controllable with painkillers.

Some patients may complain of a slight numbness of the skin overlying the injection site. This is also self-limiting.

There may be some local bruising and tenderness of your skin.

## **Potential side effects with the use of steroids**

There are very few side effects associated with single or occasional use of steroid injections.

Hot flushes, feeling sick or having mild abdominal pain are sometimes felt. Control of diabetes may be difficult, and menstrual irregularities may occur. These settle in a few days.

Repeated and frequent use of steroids has the potential to lead to more serious side effects, but it must be kept in mind that the dose that is used in the injection is very small compared to those taking steroids by mouth on a daily basis for conditions such as asthma or arthritis.

In those circumstances, side effects such as increase in appetite, weight gain, thinning of the bones (osteoporosis), thinning of the skin, eye problems (glaucoma, cataract), weakness, depression, rounded face, high blood pressure and water retention have been seen. Oral contraceptive pills may alter the level of steroids in the blood.

## **Advice/precautions**

- You will be required to stay in hospital following the procedure.
- If there is excessive or persistent numbness, you may be required to stay in hospital overnight.
- A follow-up appointment will be arranged, so that the doctor/nurse can review the effects of the block.
- You should carry on with your normal activities and try to increase the exercises and aim to reduce your painkillers if the effect of the injection appears to have been successful.
- If there are any concerns or queries please contact the pain clinic.

**It is very important that you inform the doctor or secretary in the pain clinic at least one week before the injection if:**

- You are allergic to any medications
- You have an infection near the injection site
- You have had a recent steroid/cortisone injection by another doctor/nurse or if you are on regular steroid joint injections
- You think you might be pregnant
- You are a diabetic on insulin. Your blood sugar may be difficult to control for a few days, with a tendency to be high
- Caution should be exercised if you have had a recent heart attack or vaccination.

## **Contact Details:**

### **Oldham**

Day Surgery 0161 627 8212

Pain Secretary 0161 656 1211

### **Fairfield**

Day Surgery 0161 778 2503

Pain Secretary 0161 778 3622

### **Rochdale**

Day Surgery 01706 517132/517133

Pain Secretary 01706 517705

### **NMGH**

Day Surgery 0161 720 2240

Pain Secretary 0161 720 2520

**If English is not your first language and you need help, please contact the Interpretation and Translation Service**

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

اگر انگریزی آپ کی پہلی زبان نہیں ہے اور آپ کو مدد کی ضرورت ہے تو ، براہ کرم ترجمانی اور ترجمہ خدمت سے رابطہ کریں

Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

ইংরাজী যদি আপনার প্রথম ভাষা না হয় এবং আপনার সাহায্যের প্রয়োজন হয় তবে অনুগ্রহ করে দোভাষী এবং অনুবাদ পরিষেবাটিতে যোগাযোগ করুন

إذا لم تكن الإنجليزية هي لغتك الأولى وتحتاج إلى مساعدة ، فيرجى الاتصال بخدمة الترجمة الشفوية والتحريرية

☎ : 0161 627 8770

@ : interpretation@pat.nhs.uk

To improve our care environment for Patients, Visitors and Staff, **Northern Care Alliance NHS Group** is Smoke Free including buildings, grounds & car parks.

For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

**For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897**

**For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service**

The Northern Care Alliance NHS Group (NCA) is one of the largest NHS organisations in the country, employing 17,000 staff and providing a range of hospital and community healthcare services to around 1 million people across Salford, Oldham, Bury, Rochdale and surrounding areas. Our Care Organisations are responsible for providing our services, delivering safe, high quality and reliable care to the local communities they serve.

The NCA brings together Salford Royal NHS Foundation Trust and the hospitals and community services of The Royal Oldham Hospital, Fairfield General Hospital in Bury, and Rochdale Infirmary (currently part of The Pennine Acute Hospitals NHS Trust).

 [www.facebook.com/NorthernCareAllianceNHSGroup](http://www.facebook.com/NorthernCareAllianceNHSGroup)

 [www.linkedin.com/company/northern-care-alliance-nhs-group](http://www.linkedin.com/company/northern-care-alliance-nhs-group)

 Northern Care Alliance NHS Group (NCA) @NCAlliance\_NHS

**Date of publication: May 2008**

**Date of review: March 2020**

**Date of next review: March 2022**

**Ref: PI\_DS\_451**

© The Northern Care Alliance NHS Group

[www.pat.nhs.uk](http://www.pat.nhs.uk)

[www.northerncarealliance.nhs.uk](http://www.northerncarealliance.nhs.uk)

