

Radiofrequency denervation of lumbar facet joints

REFERRER INFORMATION SHEET

Benson Radiology now provides Radiofrequency denervation – an outpatient procedure that can significantly improve chronic lumbar pain.

bensonradiology.com.au

Radiofrequency denervation

Radiofrequency (RF) denervation is a well established pain management procedure to treat chronic spinal pain.

Referring doctors should consider this procedure for the management of chronic lumbar back pain, of facet joint origin, that has not responded to conservative measures.

A radiofrequency current is used to selectively heat nerve tissue (medial branch posterior primary ramus) and disrupt or interrupt pain signals emanating from those specific nerves.

Patient selection

Careful patient selection is essential to maximise the chance of a successful outcome in terms of back pain reduction.

1. Does the patient have chronic back pain that has not responded to conservative measures?
2. Has a diagnostic imaging scan excluded alternative diagnoses which may alter management? (eg malignancy, fracture, infection).
3. Do the signs and symptoms suggest possible facetogenic origin of lumbar back pain? (ie local paraspinal tenderness, aggravated by extension and rotation, morning back pain and stiffness, +/- hip and buttock pain in non-radicular distribution).

Remember, the degree of arthritis in the facet joints as seen on CT or MRI does not correlate well with pain symptoms.

4. The next step is to refer for diagnostic imaging guided medial branch blocks at the suspected levels of joint involvement (typically L4-5 and L5-S1 unilateral or bilateral).

5. A good response to the medial branch block indicates the patient is a potential candidate for radiofrequency lumbar facet denervation.

What does the procedure involve?

Diagnostic medial branch block

The patient will complete a questionnaire with visual analogue scale rating of back pain prior to the procedure.

Medial branch blocks will be done at selected levels with CT fluoroscopic guidance, which is a well tolerated outpatient procedure with local anaesthesia. A small volume of local anaesthetic is injected at each level.

Patients should not drive home post procedure.

Telephone contact will be made at 2 hours post procedure to gauge effectiveness of pain relief compared to the pre-procedure scores. Significant improvement indicates that the patient is a potential candidate for RF treatment.

Radiofrequency denervation of lumbar facets

RF treatment will be performed under CT fluoroscopic guidance at the levels indicated from successful diagnostic medial branch blocks.

The procedure is well tolerated with local anaesthetic. Neurolept sedation is not routinely required.

The total time on the table is 30 minutes.

Patients can leave our department after about a 15 minute observation period. RF treatment does not limit daily activities – however patients should not drive home post procedure.

Benson
radiology

Experience Precision Care

Radiofrequency denervation of lumbar facet joints

REFERRER INFORMATION SHEET

How long does the treatment last?

Evidence is good for short and long term relief based on seven randomised controlled trials, of which six had positive findings. (*American Society of Interventional Pain Physicians, 2013*).

Careful patient selection is essential.

The extent of pain relief may differ but can last for six to twelve months, which is significantly longer than other pain management methods such as intra-articular corticosteroid injections.

RF treatments can be repeated as required if the pain returns.

Where is RF performed?

The treatment itself is performed by a small group of specialised radiologists at our Ashford Specialist Centre branch.

For more information contact our Ashford branch on 81 13 6700.