

Radiofrequency Ablation: If medial branch blocks provide temporary relief, then a slightly more invasive procedure may be performed to provide longer lasting pain relief. The doctor guides a needle to proper level along the spine and threads a small wire into the needle. The wire is then heated to treat the medial branch nerve.

Discography: This is a diagnostic procedure to determine if the cause of pain is coming from the degenerated disc. Dye is injected into the disc and imaging studies as well as your responses are recorded.

Spinal Cord Stimulator Trial: This procedure is reserved to treat pain that has not responded to more traditional interventional procedures.

What are the risks involved?

As with any procedure, certain risks exist. Serious complications can occur and your doctor will address these prior to your procedure. These complications are quite rare and every effort is made to avoid them.

Comprehensive?

Pain is best treated with a comprehensive plan that includes therapy, exercise prescription, medication, and integrative medicine techniques. No single injection will truly fix the situation. Rather, it is important to accurately diagnose the source of pain, prescribe the best treatment, and prevent recurrence. This approach requires a bit more time and participation, but offers long term improvement.

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X-Ray Guided Procedures

X-ray guided procedures are performed for a number of purposes including the treatment of and diagnosis of pain.

Some common symptoms for which these procedures may be recommended include:

- *Low back pain*
- *Neck pain*
- *Radicular pain (arm pain/sciatica)*
- *Hip pain*

Why are x-rays used?

X-rays, or fluoroscopy, is used to help guide the physician in performing the procedure. X-rays allow the doctor to visualize the boney structures. A “picture” is taken at several angles to insure proper needle placement. This increases patient safety and comfort.

Are x-rays safe?

Although x-rays are a form of radiation, research demonstrates that the amount of radiation a patient is exposed to during the procedures is relatively small. Your doctor will make every attempt to expose you to the least amount of radiation possible while maintaining a clear image of the procedure. The amount of radiation used during these injections is typically far less than that used in a standard spine x-ray series.

Where are the injections performed?

The injections require a room designed especially for x-ray equipment. Doctors at EGSS prefer to perform the procedures at Kent Hospital in the outpatient procedure suite. This provides greater safety by for the patient. All procedures are performed with a radiology technologist and registered nurse in the room to monitor the patient and assist the physician

Will I be sedated?

All patients receive an IV as an added safety measure. Some patients prefer to receive sedation through the IV to help cope with the fear/anxiety and to ease the pain of the injection. This is mild sedation and patients are never “knocked out”. If you choose to have sedation, you will not be able to drive for 24 hours after the procedure.

Will the injection hurt?

Before the actual procedure begins, a small gauge needle is used to inject local anesthetic to numb the area. This causes a sensation much like a bee sting and lasts for a very short period. After that, one typically feels some pressure. If necessary, your doctor can inject additional anesthetic to the deeper soft tissue if necessary.

You may feel some increased discomfort temporarily as the doctor injects the medication into the given region. Some patients describe this sensation as an inflating balloon. An electrical type feeling may be felt during certain procedures as well.

What causes ‘sciatica’?

Sciatica is a term that means leg pain caused by an injury or irritation of a

spinal nerve in the low back. This is referred to as radiculopathy or radiculitis. Pain comes from either compression of the nerve from a herniated or protruding disc, or from an inflammatory process that follows from a herniated disc. Similar pain can present in the neck or arm as well from nerve irritation in the cervical spine (neck).

This inflammatory process can be treated by directly injecting powerful anti-inflammatory medication (i.e. steroid). The body will most often resorb the herniated disc over time.

What procedures are performed?

Joint Injections: Peripheral joints such as the hip or shoulder may require the use of x-ray guidance to insure proper placement.

Epidural Steroid Injections: These injections can be performed in the neck, mid back or low back using different techniques. The steroid disrupts the inflammation at the proper spinal level.

Facet Joint/Sacroiliac Joint Injections: Inflammation within these joints is a common cause of low back pain.

Medial Branch Blocks: These are diagnostic procedures to identify the cause of neck or back pain. Local anesthetic blocks the nerves responsible for pain around the facet joints.