



Information for adult patients undergoing

Facet Joint Rhizolysis/ Radio Frequency Lesioning (Denervation) for the Treatment of Pain

The aim of this leaflet is to give you information about Rhizolysis/ Radio Frequency Lesioning (Denervation) and to answer some questions that you may have. Please note that places may do things differently. Your doctor will be able to explain fully what to expect.

What is Rhizolysis/Radio Frequency Lesioning (Denervation)?

Rhizolysis/Radio Frequency Lesioning (Denervation) is a procedure where nerves to facet joints (medial branch nerves) are destroyed (sometimes called lesioning or denervation). The procedure is usually done when medial branch blocks (see patient information leaflet of medial branch block) produce a lot of pain relief for a short amount of time. The purpose is to try to give pain relief that lasts longer, sometimes even lasting a number of years.

Usually, several injections are done during the same procedure. It is used for localised spinal pain in the lumbar, thoracic or cervical area where simpler measures have not helped.

Is this the right treatment for me?

Other treatment options will be discussed with you before deciding to have the procedure and your consent is needed. The decision on whether or not to have the procedure is made together by you and your doctor. Your doctor will be able to provide you with up-to-date information about the chance of this treatment working for you and how it fits in with other care. If you are undecided about whether or not to have the procedure then more advice and information can be given. Please speak to your doctor for more information.

If your health has changed, it is important to let your doctor know.

- ▶ If you have an infection in your body, your doctor may wait until the infection is cleared before giving the treatment.
- ▶ If you have been started on anticoagulant or antiplatelet medicines that “thin the blood” such as warfarin, heparin, apixaban, rivaroxaban or clopidogrel, extra preparation may be needed before you have the treatment.
- ▶ If you have any allergies.

You must also tell the doctor if there is any chance that you could be pregnant.

Finally, if you are planning to travel abroad or fly within 5 to 7 days after the procedure, please let your doctor know as it may be best to change the date of the procedure.

What will happen to me during the treatment?

Before the injection, your doctor will discuss the procedure with you. Your doctor will either ask for your consent or ask you to confirm that you have already given consent and are still happy to have the injection. The treatment will take place in a dedicated area with a trained person. An X-ray machine (or other forms of image guidance) will be used to make sure the injection is accurate.

Not all doctors give these injections in exactly the same way but this is what usually happens:

- ▶ A medical professional will get you ready for the procedure.
- ▶ Your blood pressure and pulse rate may be checked.
- ▶ A small needle (cannula) will be placed in the back of your hand.
- ▶ You will be carefully positioned and the skin around the injection site(s) will be cleaned with an antiseptic solution or spray; this can feel very cold.
- ▶ You will feel a stinging sensation as local anaesthetic is injected to numb the skin and surrounding tissues. Your doctor will warn you of this first.
- ▶ The doctor will direct the special needles to the area(s) suspected to be a source of pain.
- ▶ RF current is applied to the needle tip to test if the needle is correctly placed next to the nerve. You will be asked to say when you feel a tingling feeling as the doctor tests the radio frequency machine on different settings, though some doctors do things a different way and

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this step is not needed. It is common to get twitching of the muscles in and around the area where the needles are placed.

For treatments in the lower back, you will be asked whether you are feeling any tingling or discomfort or twitching in your leg to make sure that the needle is not too close to these nerves. The doctor will also look for any movements of muscles in your foot or leg, which may show that the needle needs repositioning.

For treatment in the neck, you will be asked whether you are feeling any tingling or discomfort or twitching in your arm to make sure that the needle is not too close to these nerves. The doctor will also look for any movements of muscles in your arm or fingers, which may show that the needle needs repositioning

- ▶ Injections of local anaesthetic are made. You may feel pressure, tightness or a pushing sensation. The doctor will then treat the nerves. If it is uncomfortable, do let the doctor know. It is important to keep very still during this part of the treatment.

What will happen to me after the injections?

After treatment you will be taken to a recovery or ward area where nursing staff will check on you. Sometimes you will be asked to lie flat for about 30 minutes or longer. You may be helped to sit up and your blood pressure and pulse may be checked. You will be told when to get dressed and be given help to make sure that you can stand safely after the procedure.

When will I be able to go home from hospital after my injections?

You will usually be able to go home a few hours after the injection and in some cases much sooner, depending on how long your doctor or nurse want you to stay. Please make sure that you have someone to collect you after the procedure. It is unsafe for you to drive home straight after the procedure. If you do so your motor insurance will be invalid.

What can I do after my procedure?

Ideally, you should arrange for someone to stay with you for 24 hours but, if you can't, you should at least have access to a telephone. You should not drive, operate machinery, sign legal documents, provide childcare without help or drink alcohol until fit to do so.

If you are not sure, please ask your doctor for more advice.

When can I return to work after the procedure?

This will be different for different people and may depend on the type of work you do. It is difficult to give general advice and so you should discuss this with your doctor.

Will I experience any side-effects?

As with any procedure, there may be side effects. However, these are usually minor and there is little risk of serious harm.

Side-effects may include:

- ▶ Mild local tenderness and / or bruising at the site of the injection, that usually gets better over the first few days.
- ▶ A prickling sunburn-like sensation over the skin of the back or neck, that usually gets better with time but may last a few months.
- ▶ Very rarely, you may feel numbness and/or weakness in your legs for lumbar procedures (or arms for neck procedures), because of the local anaesthetic spreading. If this happens, the feeling is temporary and will quickly get better over minutes or hours.
- ▶ Infection. This is rare. You should seek medical help if there is local warmth or redness over where you had your injection with tenderness. Or if you feel hot and unwell. This may need antibiotic treatment.
- ▶ There are important nerves in the spine, but serious nerve injury is very rare. Injury to nerves that supply muscles to your leg can lead to foot drop for lumbar injections, causing you to be unable to lift your foot up. Injury to nerves that supply muscles to your arms for neck procedures can lead you to be unable to lift your arms. Great care is taken during the procedure to avoid this complication by placing the needles carefully under x-ray and only treating the nerves when the doctor is confident that they are in the right position.
- ▶ Injection treatments do not always work and may not help your pain.
- ▶ Injury or collapse of the lung may occur (pneumothorax) from injections in the thoracic area. This is very rare. If you get chest pain or breathlessness, you should seek immediate medical help.



People vary in how they interpret words and numbers.
This scale is provided to help.



What can I expect in the days afterwards?

You may find your pain gets worse for a few weeks before it gets better. You may notice a feeling of numbness, heaviness or pins and needles. This is normal and will wear off. Take your regular painkillers and try and move about the house, but do not do anything too physically difficult. Please keep the area of the injections dry for 24 hours following the procedure. Take your regular pain killers and medications as normal and this should get better. Try to keep on the move about the house while avoiding anything too difficult.

What should I do in the weeks after the injections?

As your pain decreases, you should try to gently increase your exercise. Simple activities like a daily walk, using an exercise bike or swimming on your back will help. It is best to increase your activities slowly. Try not to do too much as you may have more pain the next day. Your doctor will give specific advice which may be different depending on which nerves are treated e.g. nerves in your back or neck.

What follow-up will be arranged?

A letter will usually be sent to your GP and your doctor will tell you what to do after the procedure. You may be asked to make a call to the pain department, be given a form to fill in, given a telephone review or other appointment or be discharged from the pain clinic.

Is there anything else I need to think about before the procedure?

- ▶ Please bring your glasses if you need them for reading.
- ▶ Bring any other devices you may need, such as hearing aids, mobility aids etc.
- ▶ Always bring a list of all current medication.
- ▶ Continue to take your medication as usual on the treatment day.
- ▶ Avoid vaccinations including COVID-19 jabs for 2 weeks on either side of the procedure.

Finally...

The information in this leaflet is not intended to replace your doctor's or health care team's advice. If you need more information or have any questions or concerns please speak to your GP or contact your Pain Clinic.

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Name	
Pain Service	
Address	
Contact Numbers	

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S.Kanakarajan and G. Baranidharan. Professional Standards Committee of the Faculty of Pain Medicine.

Acknowledgements:

Members of the Professional Standards Committee.