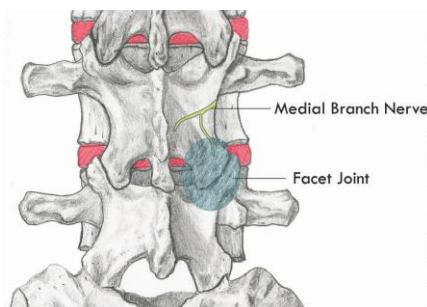


LUMBAR RADIOFREQUENCY ABLATION (RFA)

For Chronic Low Back Pain and Arthritis



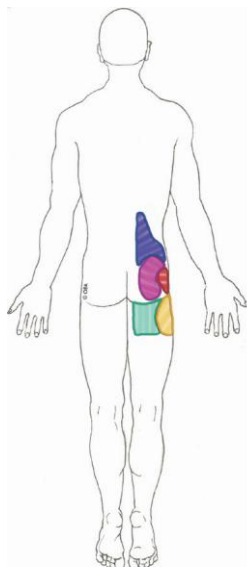
A **lumbar radiofrequency ablation (RFA)** is a procedure for treating **arthritic** low back pain, buttock, hip, and groin pain. It is also called lumbar nerve ablation or rhizotomy. This information sheet will explain what it is. Your doctor can explain if this procedure is appropriate for your symptoms.

What are lumbar facet joints?

Facet joints connect the vertebrae, the bones of the spine. They help guide your spine when you move. These are the joints that commonly develop arthritis, also referred to as **degenerative joint disease (DJD)**.

Facet joints are found on both sides of the spine. Each is about the size of a thumbnail. Lumbar facet joints are named for the vertebrae they connect and the side of the spine where they are found. The right L4-5 facet joint, for example, joins the 4th and 5th lumbar vertebrae on the right side.

Medial branch nerves communicate pain from the facet joint. They tell the brain when facet joints have been injured or inflamed, as in arthritis.



Based on: Fukui, S, Ohtori, K, Shirai, M, Ohno, K, Karasawa, H, Higashino, T. Distribution of referred pain from the lumbar zygapophysial joints and dorsal root. The Clinical Journal of Pain. 1997; 13: 203-207.

What is lumbar facet joint pain?

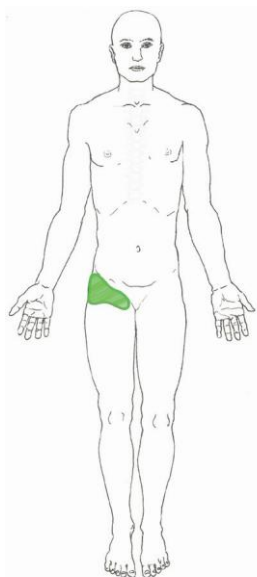
You may feel pain if a lumbar facet joint is injured or arthritic. The pain can range from mild to severe and sometimes radiates into the buttocks or legs. It is typically **worse with activity**. Other common symptoms include **stiffness and limited range of motion**.

Facet pain also depends on which joint is affected. Lumbar facet joint pain can occur in an area from your low back down to your buttocks. The diagram shows areas of pain usually associated with lumbar facet injuries.

How do I know if I have lumbar facet pain?

If you have pain in one or more of these areas, and it has lasted longer than two months, you may have lumbar facet pain.

Common tests such as x-rays or MRIs may not show if a facet joint is causing pain. The best way to diagnose facet pain is to block the pain signal by performing a **medial branch block**.



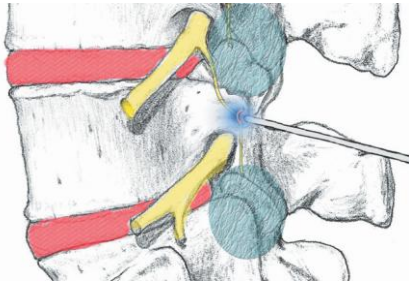
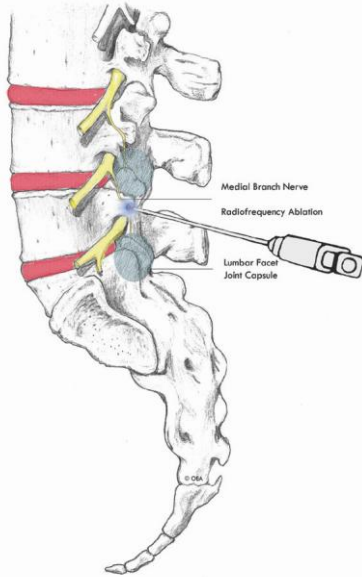
What is a lumbar RFA?

RFA uses radiofrequency energy to disrupt nerve function. When this is done to a lumbar medial branch nerve, the nerve can no longer transmit pain from an injured or arthritic facet joint.

What happens during an RFA?

An RFA may start with an IV (medicine given intravenously) to help you relax. A local anesthetic will be used to numb your skin.

For Chronic Low Back Pain



The doctor will then insert a thin needle near the facet joint. Fluoroscopy, a type of x-ray, will be used to position the needle. The doctor will then check to make sure it is at the correct nerve by stimulating it. This may cause muscle twitching and provoke some of your pain.

Once the needle is properly placed, the area will be numbed. Radiofrequency energy will then be used to disrupt the medial branch nerve. This is often repeated at more than one level of the spine.

What happens after an RFA?

You will be monitored for up to 30 minutes after the RFA. When you are ready to leave, the clinic will give you discharge instructions. You will also be given a pain diary. It is important to fill this out because it helps your doctor know how the RFA is working. Take it easy for the rest of the day.

You may feel sore for several days, typically not more than one week. This is normal. It may be due to muscle and nerve irritation. Your back may feel numb, weak, or itchy for a couple weeks. Full pain relief normally comes in two to three weeks.

How long can I expect pain relief?

The expected duration of pain relief is 6 months to 1 year. The goal is to reduce your pain symptoms by at least 50% or more. The nerves do regenerate after a period of time and symptoms may or may not return. The

What are the possible risks and side effects?

This is procedure is safe and the risk for complications if low. However, as with any medical procedure, there are potential risks which include, but are not limited to, infection, bleeding, allergic reaction, punctured lung, temporary numbness or tingling, weakness, and nerve injury.

Side effects are rare and, when they occur, are usually due to the steroid itself. These include, but are not limited to, pain at the injection site, headache, increased blood sugar, water retention, facial flushing, irritability, sleeplessness, burst of energy, skin discoloration at the injection site.

You should contact your doctor or go to the emergency room if you experience any of the following symptoms: shortness of breath, chest pain, fever greater than 101 degrees, loss of control of bowel or bladder function, severe pain and loss of function or feeling in the arms or legs



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