



Radiofrequency Lesioning

Radiofrequency lesioning is a procedure that uses heat to destroy only the pain fibers to the facet or sacroiliac joints. To the patient, radiofrequency lesioning is very similar to a facet injection or medial branch nerve block. The difference is the administration of heat instead of local anesthetic and steroid.

General Pre-Injection Instructions – Please tell your doctor if you have any allergies, particularly to iodine, topical or intravenous. If you are not receiving sedation, you may eat a light meal a few hours before the procedure. If you are an insulin-dependent diabetic, you must not change your normal eating pattern prior to the procedure. You may take your routine medications (i.e., high blood pressure and diabetic medications, e.g. Glucophage). However, you will need to take only half of your usual dose of insulin the day of the procedure. You should continue to take pain medications the day of your procedure. If you are on a blood thinner (Coumadin, Plavix, Lovenox, etc.), you must notify your physician's office so the timing of the discontinuation of these medications can be explained. **A driver must accompany the patient and be responsible for getting him/her home.**

What happens during the procedure? – You are placed on an x-ray table on your stomach. The x-ray machine is positioned so the physician can best visualize the bony areas where the medial branch nerves pass, using x-ray guidance. The skin is scrubbed using antibacterial soap. Next, the physician numbs a small area of skin with numbing medicine. This medicine stings for several seconds. After the numbing medicine has been given time to be effective, the physician directs a very small needle using x-ray guidance near the specific nerve being tested. Once the radiofrequency needle is in the right place, the physician will then attempt to stimulate the pain fibers to your affected joint. The physician will ask you questions such as – “Do you feel a pressure, deep ache, tingling, or reproduction of your usual pain?” It is important that you attempt to report any of these sensations. The physician may ask these questions several times. Your response is used to redirect the needle to the appropriate area to best heat the pain fibers. Once the needles are in the correct area, there will be a test to see if the muscles in your legs can be stimulated. It is important that you tell us if your legs move. If the legs are stimulated, the needles will need to be moved. Once the needles are in the correct position, heat will be applied to lesion the nerve. A small mixture of numbing medicine (local anesthetic) and anti-inflammatory steroid is injected afterwards.

The physician will use an x-ray machine during this procedure. If you are pregnant, it is important to inform your physician.

What happens after the procedure? - Immediately after the procedure, you will be taken to the recovery room. You may eat or drink as you see fit after the procedure. There are no restrictions to activity; just do not overdo it. It is quite common that people have an increase in their pain for 2-3 days after the procedure. This is common and does not represent an emergency.

No driving is allowed on the day of the procedure. You must bring someone to drive you home after the procedure.