

RADIO-FREQUENCY NEUROTOMY (RFN)

Patient Information Sheet

Introduction

The body contains a network of nerves that form a network with the hub in the brain and the main pathway via the spinal cord. From time to time for and for various reasons nerves may become inflamed and cause chronic pain.

Diagnosis of pain

A clinical history and a thorough physical examination can give a clue to the source of the pain. In addition, there can be other factors that mimic or cause chronic pain.

There are no blood tests to diagnose the causes of chronic pain. Although imaging tests such as x-rays, CT or MRI can demonstrate abnormalities; they cannot always confirm a source of pain. Also, if there are multiple factors involved, none of the tests can isolate the actual cause producing the pain.

Therapy for pain

There are three main methods of treating pain.

Conservative methods

The conservative method relies on medication, physiotherapy, and day-to-day practical methods to manage the pain. In many instances, this is enough.

Invasive methods

This consists of an injection of drugs into and around the area of pains. The commonest is an injection of a combination of local anaesthetic and steroid. This is a good initial therapy for improvement of symptoms from chronic pain.

Radio-Frequency Neurotomy

This method of therapy has the largest body of evidence showing its efficacy (how effective the treatment is). The procedure consists of burning the nerves supplying the area and sending the pain messages to the brain.

How is the procedure performed?

Prior to the procedure, thorough imaging of the area needs to be completed and reviewed.

Blood thinning medication DO NOT need to be stopped. If you have a pacemaker, this needs to be reviewed by a physician/cardiologist prior to the procedure to ensure that it will not function incorrectly during the procedure.

Local anaesthetic is injected around the area to be treated. Under imaging guidance, a heating probe (Radiofrequency probe) is introduced into the region of the nerves identified as causing the pain. The probe is heated and “burns” the nerves.

The burning of the nerve part of the procedure can take 2-3 minutes to perform and is relatively well tolerated.

What to expect after the procedure?

After the procedure, you may experience some pain for up to 2-4 weeks.

If you are concerned, please contact your GP or our practice for advice.