Rhizolysis

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Your Doctor has requested that you have a rhizolysis procedure. We hope the following information will answer some of the questions you may have about this procedure.

What is Rhizolysis or radiofrequency lesioning?
This is a technique that deliberately damages the nerve that supplies the facet joint. These nerves are responsible for transmitting the pain that is caused by the facet joints.

Why do I need to have a Rhizolysis treatment?
If you have had success from facet joint injections in the past but the effects have not lasted, this procedure may offer improved long-term pain relief. The effect of this procedure may take longer to act (a few weeks), however could last up to a year and beyond.

The doctor in charge of your case feels this is an appropriate procedure for you. However you will have the opportunity for your opinion to be taken into account; If you do not want the procedure carried out then you can decide against it.
How do I prepare for this procedure?

- There is no preparation for this procedure; you can continue to eat and drink as normal.
- If you are taking any **blood thinning tablets which include anti platelets for example: Aspirin, Clopidogrel, or anti-coagulants for example: Warfarin, Dabigatran, Rivaroxaban and Apixaban** please contact the department before the appointment, as you may need to consult your GP before undergoing this test.

Are there any side effects?

- Occasionally patients may have flare up pain afterwards, which may be short lived but could last a few days. (If this does occur you may take your usual pain relief medication)
- Bleeding or haematoma (a bruise under the skin), this should settle down by itself
- Infection – contact your GP if you experience any redness or tenderness at the injection site
- Failure of the procedure to help

The procedure uses X-rays to confirm that the needle is in the correct place. The amount of radiation used is small, however **female patients who are or who may be pregnant should inform the department before attending the appointment.**
What will happen during the procedure?

- The procedure is performed by a radiologist, under radiological guidance.
- It is performed as an outpatient, which means you will be asked to arrive shortly before the procedure and allowed home 15-30 minutes after it has finished. Please allow up to 3 hours for this procedure.
- A nurse will take a brief history, including medication.
- The radiologist will chat to you before the procedure to ensure you have read this leaflet and understood it. He/she will explain the procedure and answer any questions you have.
- You will be asked to sign a consent form.
- The procedure is performed without general anaesthesia and without sedation.
- You will be then asked to position yourself face down on the X-ray couch. It is important that you are comfortable as you will need to stay in that position for anything between 30-60 minutes.
- The radiologist will image the spine first before starting the procedure.
- The skin will be marked and cleaned with antiseptic solution, which may feel cold.
- The radiologist will use local anaesthetic in the skin first before directing a fine needle using X-ray guidance, into the nerves that supply the facet joints.

- Once in the correct position, a probe will be passed through the needle and more local anaesthetic will be injected, before the probe is heated. The Radiologist will ask you a series of questions to determine the correct position before treatment is performed.

- Local anaesthetic may also be added after the treatment, in order to decrease discomfort caused by the procedure.

- This may occur several times, depending on how many facet joints are being treated.

- At the end, a dry dressing will be placed over the puncture site/s.

After the procedure:

- You will be asked to stay in the department for up to 30 minutes after the procedure has finished, if necessary.

- If you need assistance to your car, there are wheelchairs and porters available at reception.

- You should not drive for 24 hours after as your insurance may not be valid if you are involved in an accident.
What happens next?

- You will be asked to fill in a pain chart, for the next month. This is so that the doctors can track whether the procedure has had an effect.
- The radiologist will send a report to your referring doctor.
- Follow up appointments will be with the doctor who referred you for the procedure.

Finally we hope this information is helpful. If you have any questions either before, during or after the procedure the staff in the X-ray department will be happy to answer them.

The telephone number for the X-ray department can be found on the appointment letter.
References:
1) Journal of spinal disorders and techniques. 2011 Apr;24 (2) 69-75
2) Spine. 2008 May 20; 33 (12): 1291-7

NHS Constitution. Information on your rights and responsibilities. Available at www.nhs.uk/aboutnhs/constitution
If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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