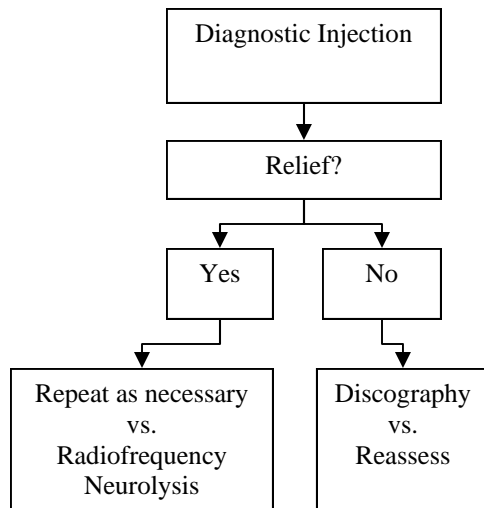


# Lumbar Facet Syndrome

Lumbar facet syndrome is a very common cause of low back pain. The facets are small joints between the bones that cover and protect the spinal cord. Pain coming from these joints is made worse by twisting, lateral flexion, and arching the back backwards thereby stressing the joint. Common causes of facet syndrome are degenerative arthritis, degeneration or herniation of the discs between the bones in the vertebral column, or abnormal movement of the bones with respect to the vertebral column.

Conservative treatment includes the use of non-steroidal analgesics and physical therapy. If conservative treatment is inadequate in controlling the pain, interventional injections are indicated. The diagnosis is confirmed by injecting a small amount of local anesthetic and steroid on the nerve that supplies sensation to the facet joint. This injection is meant to be diagnostic but may provide a significant amount of pain relief.



### Treatment Protocol:

- 1) Diagnostic injection—This procedure generally takes approximately 15 minutes to perform. It is performed in an operating room under sterile conditions. After numbing the skin with local anesthetic, a small needle is guided using x-rays to the nerve that gives sensation to the facet joint. A small amount of local anesthetic and steroid is injected.
- 2) Depending on the amount and duration of pain relief, these injections can be repeated as needed.
- 3) If the amount of relief is greater than 50% but the duration is short, the same injection can be repeated using a different technology called Radiofrequency. Heat is applied to the nerve through the needle to inactivate the nerve.
- 4) If no relief is obtained, assuming a successful injection, reassessment for another cause of back pain must be sought.

Your procedure is scheduled with Dr.: \_\_\_\_\_

On: \_\_\_\_\_ at: \_\_\_\_\_ (am/pm)

Please arrive by: \_\_\_\_\_ (am/pm)

Other Comments: \_\_\_\_\_

## What to Expect

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### Prior to Procedure

- 1) Nothing to eat or drink (except medications) after \_\_\_\_ (am/pm) the day of your procedure.

### Day of Procedure

- 1) Arrive one hour prior to your scheduled appointment.
- 2) You will be evaluated by the nursing staff and a physician.
- 3) An I.V. may or may not be placed.
- 4) A consent form for the procedure must be signed.
- 5) You will be taken into the operating room and asked to lay on your stomach.
- 6) X-rays will be taken to determine the injection site.
- 7) A small amount of local anesthetic will be injected to numb the skin and deeper tissues.
- 8) A small needle will be directed under X-ray guidance into close proximity to the joint and the nerve that innervates the joint. This will be repeated for each joint that needs to be injected.
- 9) Local anesthetic and a small amount of corticosteroid will be injected.
- 10) The needle is removed and you will be taken to the recovery area for discharge.
- 11) Pain relief should start within one week of the injection. Do not be discouraged if you do not experience relief right away. The medication takes at least 2 days to even start working.

**Risks of the Procedure**—Although considered very safe compared to other injections, the following risks may be associated with diagnostic facet injections.

- 1) Infection—very rare when done with strict attention to sterile protocol. Symptoms and signs include increasing pain from the site of the injection site, fever, or chills usually starting three days to one week after the procedure. In the rare case of infection, oral or intravenous antibiotics may need to be given. Very rarely surgical drainage may be necessary in the case of abscess formation.
- 2) Allergic reaction to medications used for the injection. Please let your physician or nurse know if you are allergic to any medications and how your allergy manifests (rash, shortness of breath, etc.).
- 3) Nerve root irritation—usually manifests as pain or weakness in the distribution of the nerve. This is usually short lived and resolves within hours.
- 4) Failed block—if you receive no benefit from the procedure, either the procedure was unable to be completed due to technical difficulties or anatomical barriers. If the procedure was completed satisfactorily and you still receive no benefit, this casts doubt on whether the facet joint is truly the generator of your pain. You will need to be reassessed for another cause of your pain.

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If you have any questions or concerns regarding this procedure, please call us at: