



Radiofrequency Neurotomy Information **“Rhizotomy”**

1. What is a lateral branch neurotomy and why is it helpful?

A lateral-branch neurotomy is a non-surgical procedure where a physician lesions (“burns”) the nerves carrying pain from your nerves to your brain. Most likely we have previously numbed the nerves as a “test” to see if you were a candidate for the neurotomy procedure. The neurotomy prevents the pain signal from traveling through these nerves, thereby interrupting the pain signal to your brain. These lateral branch nerves do not control any muscles or sensation in your legs. If effective, the treatment should provide pain relief lasting at least 9-14 months and at times much longer.

2. What will happen to me during the procedure?

An IV will be started and we will give you adequate IV relaxation to keep the procedure comfortable. After lying on an x-ray table, the skin over your low back and buttock will be cleansed. Next, the physician will numb a small area of skin, which may sting for a few seconds. The physician will use x-ray guidance to direct a special (radiofrequency) needle alongside the lateral branch nerves. A small amount of electrical current may then be carefully passed through each needle to assure it is only next to the target nerve. This may briefly recreate your usual pain. The nerves will then be numbed to minimize pain while the nerve is being lesioned. Several lesions are created at each level and the entire procedure usually takes between 60-90 minutes.

3. What should I expect after the procedure?

On the day of the procedure, you should not drive and should avoid any strenuous activities. On the day after the procedure, you may cautiously return to your regular activities, but most require an additional 2 days of rest. Your back and buttock will usually be very sore during the next several days. The pain will slowly improve over several weeks. This pain is usually caused by muscle spasms and irritability while targeted nerves are dying from heat lesion. Your physician will give you medication to treat the expected pain. Pain relief usually is not experienced until about 2-3 weeks after the procedure when the nerves have completely died. On occasion, your back or neck may feel odd or slightly weak for several weeks after the procedure.

The nerves will eventually grow back (regenerate) but the pain may or may not return. If the pain does return, you may want to have the procedure repeated (usually with equal success). Some patients never have a return of their pain, but we cannot predict when this will occur.

There is a rare chance (less than 5%) that you may have increased nerve pain following the procedure for 1-3 months. This may include skin sensitivity or a sunburn sensation in the buttock. It is treated with specific medications and usually resolves within several months.

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