

PATIENT INFORMATION

FACET JOINT AND SACROILIAC JOINT INJECTION

Facet joint and Sacroiliac Joint Injections are offered to people suffering with significant pain that is interfering with their everyday life. The aim of the injection is to reduce pain, swelling, pressure and inflammation around the joints. It can also be a useful diagnostic tool to not only identify the site of your pain but also to assess whether it is coming from the facet joints or sacroiliac joints or indeed elsewhere.

The spine is composed of 24 bones called vertebrae. These are block shaped bones with rigid discs in between them. The facet joints are the articulating surfaces between the vertebrae which enable stability and movement. The sacroiliac joints are in the pelvis and generally do not move so often except during pregnancy and delivery. However, the sacroiliac joints can be the source of symptoms in the pelvic area, sometimes causing referred pain in the back or legs.

Inflammation, degenerative change and abnormal loading of the spine can cause pain in the facet



joints and sacroiliac joints leading also to pain in the back, buttocks and the outer sides of the thighs. There are often muscle spasms around the affected facet joints and sacroiliac joints that can make moving very stiff and painful.

Although relatively mobile, sacroiliac joints can cause pain which can mimic facet joint symptoms. Typically if the facet joints are the source of the pain then it will be painful to bend backwards. Also there is pain associated with stiffness first thing in the morning or after prolonged immobility such as sitting or standing for long periods of time. It is possible to irritate the nerve roots that pass immediately in front of the facet joint, which can produce symptoms very much like sciatica. This presents as pain down the leg on the same side as the affected facet joint.

Should examination, history and investigation suggest that much of the pain comes from the facet joints or sacroiliac joints, they can be injected with a mix of local anaesthetic and slow release steroids with the aim of reducing inflammation, irritation and pain around the affected area. The procedure is done under x-ray control to allow accurate needle placement. The injection is given whilst you are under sedation so there is very little or no discomfort felt during the procedure.

BEFORE

Please advise us of any medical conditions you have prior to your admission such as high blood pressure, diabetes, asthma, heart problems etc. To avoid bleeding around the spinal nerves it is important to stop blood-thinning medication such



as Warfarin. This needs to be discussed with Mr Quaile before your procedure takes place.

Also it is very important that we have a complete list of medications that you have been prescribed by your doctor or have bought at the chemist and are currently taking. This includes homeopathic remedies.

If you feel unwell on the day then please contact Mr Quaile's office or the hospital before you make the journey in, as it may be necessary to re-schedule the procedure.

Follow the fasting instructions that you have been given by Mr Quaile's office or the hospital.

ON THE DAY

On the day of your procedure please arrive promptly. Please remember you will not be able to drive home after the procedure and if you are taking a taxi you will need to be accompanied. You are very welcome to bring someone along with you for company.

Please try not to take pain medication before the injection so that you have some of your usual pain present.

Please bring x rays or scans of the spine with you unless you have been investigated in a BMI hospital, in which case these are accessible to us.

At the time of admission you will be asked to complete various forms. Mr Quaile will visit you on the ward prior to treatment and he will explain the procedure to you in full and then ask you to sign the consent form to confirm you are happy to proceed. Please do not hesitate to ask any

questions or mention concerns that you may have at this time. If necessary, Mr Quaile will feel around your back to identify the painful levels and will ask you to re-confirm where your pain is and mark up the area to ensure accuracy.

You will be taken to the operating theatre as facet joint injections need to be done in a clean area. The procedure takes about 15-30 minutes depending upon how many facet joints are being injected and whether a caudal epidural is being performed at the same time. A small needle may be placed in a vein on the back of your hand to give you the sedation and fluid or other medicines if necessary.

Sedation will then be given, which will make you feel very sleepy so that you may not remember the procedure. The injection site will be cleaned with antiseptic solution and then x-rays will be used to guide the correct placement of the needle into the facet joint after the area has been numbed with local anaesthetic. A mix of local anaesthetic and slow release steroids will be injected.

Once you are back on the ward and awake you will be offered something to eat and drink. After that you should be able to get up and walk unaided. You may experience some temporary numbness, tingling and heaviness in your back or legs after this procedure. This is normal and should go after 2-3 hours, as the local anaesthetic wears off. You are required to stay in hospital for 2-3 hours after the procedure depending on your recovery.



AFTER

You will need someone to take you home and you should have a responsible adult to care for you on your first night at home.

We recommend that you rest for the next 24 hours and in particular try to avoid bending, twisting or lifting. We also advise that, due to the effects of sedation, you should not drive a car, drink any alcohol, operate equipment or sign legal documents during this time.

If you have a small dressing or plaster over the injection area this can be removed the next day.

You may find that you feel more pain for a few days afterwards as initially the injection may stir things up before the slow release steroids start to work. It can take between seven days to six weeks before the full effects of the injection are known. This is normal, however please do not hesitate to call us if you are worried.

We advise you to keep a daily record of your pain, marking down the activities and exercise you were able to perform, for your review appointment.

You should continue to take your usual medication and analgesia as required.

You can return to work as soon as you feel you can cope.

Avoid any strenuous exercise for a week after the procedure.

A follow up appointment will be made for you three weeks post injection.

WHAT SHOULD I EXPECT

Some people experience immediate relief of their symptoms that can last for weeks or months, others find it takes about six weeks or so before they find any relief and for others regrettably there is little or no benefit. No treatment is guaranteed to work for all. However it can be the start of an effective treatment plan in improving pain by allowing you a 'window of opportunity' for rehabilitation via physical therapy to occur. We advise that you start or return to a good exercise plan as soon as possible as this will hopefully reduce your symptoms and strengthen your core. Mr Quaile may recommend a short course of physiotherapy as the physiotherapist will be able to advise you regarding the most appropriate exercises for you.

SIDE EFFECTS AND RISKS

Rarely some people develop a headache after the injection due to a spinal fluid leak. This is treated by bed rest or by a blood patch if the headache persists. Please let the nursing staff know immediately if this happens on the ward or telephone your GP if you are at home.

There are very small risks of infection, bleeding, nerve damage, allergic reaction to the medication given and blood clots. Whilst these risks are very small, the consequences may be serious. There is also a very rare complication of the local anaesthetic interfering with breathing which would be temporary as the effects wear off.



EMERGENCY INFORMATION

If you develop any of these following symptoms following your discharge please contact your general practitioner immediately:

- Severe headache or pain
- Fever or chills
- Redness and swelling around the injection site
- Loss of bladder or bowel control
- Numbness in the saddle area
- Numbness in legs or arms
- Weakness in legs or arms
- Pins and needles in legs or arms

CONTACT

Please contact us if you have any problems or questions.

email: support@spine-works.com



telephone: 01256 377653

