

PATIENT INFORMATION



PROLOTHERAPY

Prolotherapy is a treatment that may be offered for lumbar instability, discogenic pain, sacro-iliac instability or whiplash injury.

Ligaments help to provide stability in the joints. They prevent the joint from moving more than the 'normal range'. Of course what is 'normal' varies from one individual to another. Some people have lax ligaments that allow more than 'normal' movement and they are often referred to as 'double-jointed'.

In the spine there is a complex arrangements of ligaments both between each vertebral segment and between the spine and pelvis, which allows flexibility in some directions and produces restraint in other directions. Sometimes ligaments can be over-stretched or even torn as in for instance a sprained ankle. The ligament may then not control the joint adequately thus leading to 'instability' which may put abnormal stresses on the joints and discs in the spine.

In women the pelvic joints need to be supple for child bearing and so the ligaments soften and stretch more readily. Sometimes they do not tighten up after childbirth and therefore allow too much movement causing sacro-iliac instability.

Prolotherapy works by stimulating the body to make new fibres which are then laid down in the substance of the ligaments, thickening and strengthening them. The solution Phenol 2%, Dextrose 30% and Glycerol 30% is mixed with local anaesthetic and a small amount of 0.5 cc is injected into each end of the ligament close to it's attachment to the bone. This initially provokes inflammation which attracts cells making collagen fibre to the area.

Over the ensuing weeks the fibre is incorporated into the existing ligament. Sometimes in order to produce sound fibrous development the injections can be given as a course of treatment.

As the organic compounds in the solution are rapidly disposed of by the body it is safe to have a repeated course of treatment should it be thought necessary.

The solutions used for the injections is also used in other treatments, for example varicose vein treatment, so it is known to be safe. However you should be aware that because Prolotherapy used for treatment of ligaments is not yet widely practiced, it has not yet been licensed for this particular treatment.

Prolotherapy does not create scar tissue but healthy collagen fibres in the lax ligaments. Injections are commonly given in the lumbar, sacro-iliac, thoracic and cervical spine regions. Also they can be very useful in treatment of ankle and shoulder area.

At Spineworks we tend to carry out this treatment under intravenous sedation so that you are in a relaxed and sleepy state whilst undergoing the procedure.

However the treatment can also be carried out under local anaesthetic.

The benefit of treatment by Prolotherapy is not seen immediately but gradually becoming noticeable after 6-8 weeks increasing up to 12 weeks.



BEFORE

Please advise us of any medical conditions you have prior to your admission, such as high blood pressure, diabetes, asthma, heart problems etc.

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, as you may need to stop taking some medication before the procedure. This includes homeopathic remedies.

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

Please follow the fasting instructions that you have been given by Mr Quaile's office and/or the hospital.

Do not hesitate to call Spineworks if you have any questions or concerns beforehand.

ON THE DAY

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

We request that you bring x rays and scans of your back and neck unless you have been investigated in a BMI hospital, in which case they are on the system & accessible to us.

At the time of your admission you will be asked to complete various forms and paperwork. Mr Quaile will visit you on the ward prior to your procedure, where he will explain the treatment in full and then will ask you to sign the consent form if you are happy to proceed. Again do not hesitate to ask any questions or mention any concerns you may have at this time. If necessary Mr Quaile will examine your back to identify the painful areas and will ask you to re-confirm where your pain is and he may then mark up the area with a pen to ensure accuracy.

You will be taken to an operating theatre as this procedure needs to be carried out in a clean area. The nurses in the operating theatre will conduct various checks to confirm patient identity then, if you are not having the procedure under local anaesthetic, the anaesthetist will introduce themselves. They will give you sedation which will make you very sleepy and you may not remember much about the procedure. A small needle may be placed in a vein on the back of your hand to give you the sedation and the fluid or other medicines necessary.

After the procedure you will be taken to a recovery bay where the staff will look after you until you are fully awake and comfortable. Once you are back on the ward and feeling ok you will be offered something to eat or drink. You will be able to get up and about once fully recovered. All being well you can go home around 2–3 hours after the procedure.



AFTER

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

We recommend that you rest for the next 24 hours and in particular to try and avoid bending, twisting or lifting. We also advise that, due to the effects of sedation, you should not drive a car, drink alcohol, operate any 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 procedure may stir things up for a while.

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

You should return to work as soon as you feel able to cope with your normal daily activities.

Avoid any strenuous exercise for a week after the procedure.

A follow up appointment will be made for you three weeks after your treatment.

WHAT SHOULD I EXPECT

Prolotherapy injections do cause some aching and stiffness for two to three days. Rest is not necessary and normal activities should be continued. Paracetamol rather than Aspirin or anti inflammatory medications such as Nurofen, can be taken for patient relief.

It can take six to eight weeks or so before you feel 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 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 stability. 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

Complications are very rare since the injection is not placed into the spinal canal or near the spinal nerves. Infection is the main complication and occurs in 1:17,000 cases. There is a small risk of bleeding, nerve damage, allergic reaction to the medication given and blood clots. There is also a very rare complication of the local anaesthetic interfering with your breathing which would be temporary as the effects wear off.



EMERGENCY INFORMATION

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

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

CONTACT

Please contact us if you have any problems or questions.

email: support@spine-works.com



telephone: 01256 377653

