What is rhizolysis? (rye-zo-lie-sis)

Rhizolysis is a specialized form of treatment and is also known as RF (radiofrequency) Lesioning. The aim is to cause heat damage to the nerves that supply the facet or sacroiliac joints. Each facet joint is supplied by two nerves, so several nerves may need to be treated. The nerves transmit pain sensation from the joints and have little other function. By causing a heat lesion, pain from the joints is not transmitted, thus giving relief from the pain.

What does the treatment involve?

You will be lying on your front for the procedure, which usually takes 30-60 minutes. Local anaesthetic is injected into the skin and fine, hollow needles are passed toward the nerves under x-ray guidance. When the needle is in the right place a probe (thin wire) is then passed through the needle. The position of the probe is very important so it is checked by two tests:

- Sensation – You may feel tightness, pressure or tingling in your back
- Motor (movement) – You may feel some throbbing in your back. If there is throbbing into the leg then the probe is repositioned.

When the probe is in the correct place, the tip is then heated to 80 degrees centigrade to cause a heat lesion to the nerve.

What is injected?

- Local anaesthetic – is injected before the probe is heated to relieve any discomfort during the procedure.
- Local anaesthetic – is injected after the probe has been heated to relieve discomfort after the procedure.

Does it work and are there any alternatives?

You would already have had a good response to diagnostic injections so rhizolysis offers you a realistic chance of good, long-term pain relief.

You may not feel any benefit for 2 – 3 weeks. Symptoms can be relieved for between 3 months to a year in about half of all patients. Unfortunately
the nerve can regrow so your pain may come back. However, a repeat procedure is likely to be beneficial if you responded to the first procedure.

It is very likely that you will have already tried other treatments, such as pain killers and physiotherapy before being referred for this treatment. Your consultant will discuss any alternatives available to you.

**What are the risks or possible complications?**

As with all procedures, there are some risks. Precautions are always taken to reduce the risks as far as possible, but the following may occur:

- failure of the procedure to help
- worsening of pain (temporary or permanent)
- bleeding or bruising in the injected area
- infection in the injected area
- numbness of the injected area
- facial flushing for a few days
- leg numbness and weakness are very rare side effects.

**What will happen next?**

You will be given a date to come to hospital for the injection. This will take place in the Day Surgery Unit. You should arrange for someone to bring you to the Unit and to collect you afterwards.

Before your procedure you will be seen and assessed by a nurse. The procedure will be explained to you and the nurse will check that you have signed a consent form.

**Is there anything I need to do before the procedure?**

Please inform the Day Surgery Unit if you are diabetic, have a cough or cold or have any kind of infection.

**If you take any drugs to thin your blood** (anticoagulants or platelet inhibitors), it is very important to **let the consultant know in advance**. Failure to do so could result in your treatment being cancelled on the day. These types of drugs include warfarin, dabigatran and clopidogrel (Plavix™). If you are unsure, please speak to your consultant or contact the Day Surgery Unit on 01722 336262 ext 4554 before your appointment.

The injection is carried out using X-rays to find the correct position for the injection. Since X-rays can be harmful in high doses, we will keep the dose to a minimum. If you are unsure whether you are or if there is any chance of your being pregnant, you must tell us before coming to hospital.
What happens on the day of the appointment?

- you can eat and drink as normal on the day of your appointment.
- take all your tablets as normal. Bring a list of your tablets with you.
- please bring a dressing gown and sensible footwear with you. You will be asked to walk to the treatment room on the Day Surgery Unit.
- a nurse will take some details from you to check that you are fit for your procedure.
- you will be asked to sign a consent form. The doctor will be able to answer any questions you may have at this time.
- you should expect to remain in the Day Surgery Unit for about 2 - 4 hours.
- after you have had your procedure, you will need to stay with us for about 30 minutes before you can go home.
- you must NOT drive home or go home on public transport. Please arrange for someone to collect you from the Day Unit. You are allowed to go home by taxi.

What should I do once I get home?

It is important that you rest for a couple of hours before you start to resume your normal activities. Do not do any excessive exercise or heavy work for the first few days.

Continue to take your pain tablets until you notice any improvement in your symptoms. You can remove the dressing over the injection site the following morning.

If you have any concerns when you get home please contact the Day Surgery Unit on 01722 336262 ext 4554 or contact your GP and tell them that you have had this procedure.

Follow-up

There will be no routine follow-up after a rhizolysis procedure. Your name will be added to an ‘SOS’ waiting list for an appointment. If you experience any difficulties after the procedure please contact orthopaedic outpatients on 01722 429176 to arrange a review.

This waiting list will remain active for 3 months. If after that time we have not heard from you, we will remove your name from the waiting list. Any further advice you may need thereafter should be sought from your family doctor and a further referral sent back into the spinal service.