

Medial Branch Blocks

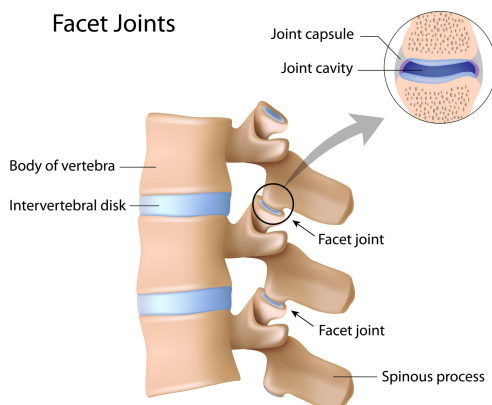
A guide for patients

What is the medial branch?

Medial branch nerves are very small nerves that carry pain signals from facet joints to the brain. They are located in the cervical, thoracic and lumbar spine.

What are facet joints?

The facet joints are paired joints lined by cartilage toward the back of the spinal column that provide a connection between the vertebral arch of one vertebra to the arch of the adjacent vertebra. They are also known as zygapophyseal joints. There are two facet joints in each spinal segment and each have dual innervation being supplied by 2 medial branch nerves. Each facet joint contains a joint space that can accommodate 1-1.5mL of fluid, hyaline cartilage surfaces, synovial membrane and a fibrous capsule.



Before the Procedure

You will need to fast before the procedure. This means:

- No food 6 hours before
- No liquids (other than water) 6 hours before (this includes coffee, tea, orange juice etc)

You can drink water up to 2 hours before the procedure.

Take your usual medications with a small sip of water. Please contact us if you are taking any blood thinning medications, diabetes medication, pregnant, or unwell.

Can facet joints cause pain?

All joints undergo degenerative changes with wear and tear of age. This is especially true for the facet joints in the spine (known as facet joint arthropathy). Facet joint pain often presents as a dull ache across the neck, upper back or lower back. The pain can also be referred to other parts of your body (ie from neck to shoulders and arms, or lower back to buttocks and legs)

When is a medial branch block performed?

Medial branch blocks are performed to determine whether your pain is originating from the facet joints itself. If the facet joints are the main source of your pain, injections with local anaesthetic and steroid to the medial branch nerve can provide relief for a period of time. The duration of relief varies from person-to-person. A pulsed radiofrequency ablation may also be performed at the same time to provide potential therapeutic benefit.

The Procedure

The procedure itself takes 15-30 minutes. It is a day case, meaning no overnight stay is required.

An Anaesthetist will provide sedation and monitor you during the procedure.

The procedure is performed in the operating room with fluoroscopy (X-ray) to ensure accurate needle placement. The needle is guided to the medial branch which lies adjacent to the facet joint. Local anaesthetic and steroid are injected to provide pain relief.

A pulsed rhizotomy can be performed at the same time to provide potentially longer-lasting benefit.

After the Procedure

- You will be taken to recovery and monitored until you are ready for discharge.
- You will not be able to drive, so ensure someone can drive you home safely.
- Avoid over-exerting yourself immediately after the procedure.
- You may gradually return to your day-to-day activities.

If you develop any symptoms (fever, swelling, worsening weakness or numbness, bleeding, loss of bowel or bladder control) after the procedure or have any other concerns, please contact us, your GP, or your local Emergency Dept.

You will be reviewed by our pain nurse via telephone a few days after the procedure.



What are the risks?

No procedure is risk-free but the risks for this procedure are considered to be relatively low.

Possible risks include infection, bruising, haematoma, nerve injury and allergic reactions.

Infection is minimized with appropriate sterile and aseptic precautions.

Bleeding risk is minimized by stopping blood-thinning medications a few days prior. If this applies to you, our pain nurse will remind you to stop your blood-thinning medications a few days prior to your procedure.

Risk of nerve injury is minimized as we use fluoroscopy to guide accurate needle placement.

Severe allergic reactions to the injectates (ie local anaesthetic, steroids) are very uncommon.

Steroids may produce side effects including stomach irritation, insomnia, mood swings, flushing, palpitations.

Patients need to be aware that the outcome of the procedure is variable between individuals and they may not receive the desired benefits. The therapeutic benefits of the procedure are transient, and repeat injections may be required.

A: Suite 14, Level 1, Murdoch Medical Clinic, SJOG Murdoch Hospital, 100 Murdoch Drive, MURDOCH 6150
T: 08 6317 9627
F: 08 6323 1888 (enter all 10 digits)
E: admin@wpain.com.au
w: www.wpain.com.au