POST PROCEDURE ADVICE

Essential Guidance

Recovery

Once the procedure has been completed, you will be taken to the Recovery Area and, when you are more awake, to your private room. Once you are up, about and able to eat and drink, you will be able to go home. You should allow at least 1-3 hours before leaving the hospital after your procedure. You may well feel tired for the rest of the day following your procedure as a result of the sedation.

Benefits

The main benefits of pain management procedures include pain relief (or a reduction in pain), improved mobility and range of movement and an increase in quality of life.

Adverse Effects

There is the possibility of adverse effects with any medical procedure. However, minimally invasive pain management procedures have relatively few adverse effects. Occasionally, patients may have some discomfort at the site of injection - this is quite common and can last from a few hours to a few days, even a couple of weeks. This is usually amenable to over the counter preparations, including Paracetamol, Codeine, Ibuprofen or similar. If you require further information regarding this, please ask your nurse or medical practitioner. Temporary numbness, weakness, pins and needles in the affected limb and mild discomfort at the treatment site can all occur for a couple of days following the procedure. Patients often have a small bruise at the site of the injection.

Uncommon Adverse Effects

These are temporary and self-limiting adverse effects and include the following:

Local pain at the site of the injection

This can occasionally occur due to local bruising or muscle spasm and will settle down in a few days.

Myositis

Myositis is inflammation of the muscle. This can occasionally occur following injection with Botulinum Toxin A.

Worse Pain that occurs rarely:

As with all treatments, there is a possibility that your pain may worsen, particularly in the first few days following the injection. However, these are rare.

Headache

Very occasionally, 1 in 2000 people may experience a special type of headache, called a 'spinal headache'. This occurs if the membrane, called the dura, is punctured and there is a leak of fluid from around the spine. This adverse effect is not dangerous but it can lead to a headache following the injection. It is most important that you remain absolutely still during the procedure to reduce the risk of this occurring. If you experience this type of headache

please contact the London Pain Clinic, as soon as possible or your local healthcare services, if out of office hours.

Steroid effects

Very occasionally, patients can suffer with facial flushing, increased appetite and raised blood glucose (in diabetics), although these tend to be self-limiting and may only last a day or two following the injection.

Infection (occurring in less than 0.01% of cases)

Serious infections include the development of an epidural abscess. This is a rare risk and is completely minimised by the use of strict sterile techniques including antiseptic sprays, sterile procedure packs, sterile gloves and gowns etc.

Bleeding

For those patients taking blood thinning agents (for example Aspirin, Warfarin, Clopidogrel, Heparin, Rivaroxaban) they are more likely to bleed/bruise locally from the puncture sites.

Haematoma

Very rarely excessive bleeding can occur in the epidural space. In this instance, an epidural haematoma can form. Again, this is far more likely in those patients who are either on blood thinning agents (for example Aspirin, Warfarin, Clopidogrel, Heparin, Rivaroxaban) or who have abnormal blood clotting.

Nerve damage

There is a risk of damage to nerves by these procedures. However, the risk is very low and the incidents of permanent nerve damage are extremely rare.

Spinal anaesthesia

This is a rare complication in which local anaesthetic mixes with the fluid around the spine. Should this happen, you may experience temporary reduction in power and sensation in the limbs and occasionally patients may have a reduction in the level of consciousness. This is a very rare occurrence. However, where it does occur, the full facilities are immediately available to manage this. Where this does occur, patients will have to stay longer in hospital before being discharged.

Anaphylaxis

This is a severe but extremely rare allergic reaction caused by injection of local anaesthetic. If you have any drug allergies, in particular to local anaesthetics, please inform your nurse and medical practitioner prior to your procedure.

Failure

An injection failing to provide symptomatic relief.

After your procedure

Take things easy for the rest of the day. Do not participate in excessive exercise or heavy work/activity in the first few days. Continue to take your analgesic medication until you notice improvement in your symptoms, which may take 10-14 days, or sometimes longer.

If your pain management procedure is part of a wider treatment plan including physical therapy and/or pain psychology, ensure that you continue with this in order to derive the maximum possible benefit from your treatment. You should refrain from physical therapy for around 10-15 days following your procedure to allow your body to rest and recover.

As a general rule, where patients have a good response to their minimally invasive procedure, pain relief should normally last at least 6 months and radiofrequency denervation 9-12 months. Sometimes, it may be necessary to repeat the procedure.

A follow up appointment will usually be arranged in clinic 4-6 weeks following your procedure, when your Consultant will review your progress and symptoms.

You should contact the London Pain Clinic Team on 0207 118 0250 if you have a persistent headache, pain that is not controllable with your prescribed medication, if you feel nauseous or if you experience bowel or bladder problems.

If your symptoms worsen or become severe, out of normal London Pain Clinic office hours, please contact your local GP or Accident and Emergency department for advice.

Yours sincerely,

The London Pain Clinic Team