

# The Kent Centre for Pain Medicine and Neuromodulation

## Medial branch blocks (fast-track denervation pathway)

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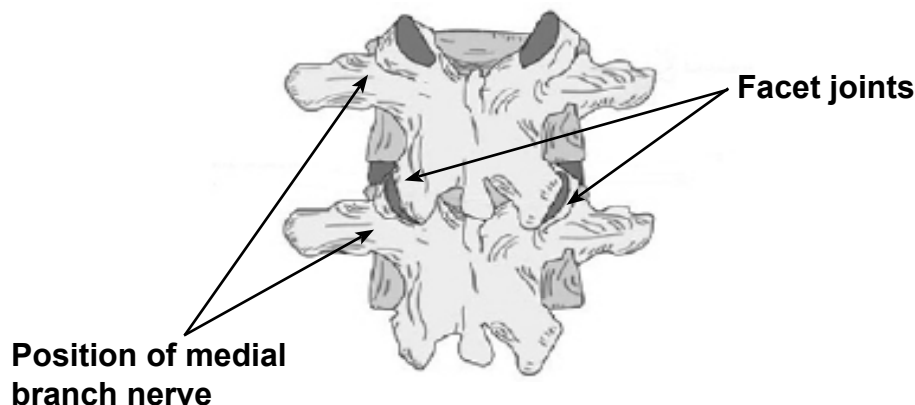
### Information for patients

#### What is a medial branch block?

A medial branch block is a procedure where pain-blocking medicine is injected around a specific facet joint. The nerve block temporarily prevents the pain signal from being carried by the medial branch nerves that supply this facet joint.

Facet joints are small linking joints that connect the bones of the spine, also known as vertebrae. They work with the discs, and are responsible for controlling the twisting and sideways movements of the whole spine. Facet joints are found on each side of the spine.

Usually these joints cause no pain at all, however if they become inflamed or arthritic (also known as 'wear and tear') they can then become painful.



Medial branch nerves are very small nerves that allow you to feel pain from facet joints. These nerves do not control any muscles or feeling in your arms or legs. They are located along a bony groove in your lower back, neck, and over a bone in your mid-back. These nerves carry the pain signals to your spinal cord and the signals eventually reach your brain, where the pain is noticed.

### How will medial branch blocks help?

Medial branch blocks are used as a diagnostic test, to see whether your pain started from particular facet joints. These blocks are not a cure but they may reduce your pain temporarily.

If the pain does not go away at all, this means that the pain is probably not coming from your facet joints. This can help diagnose your problem and guide us with any future treatment.

If the pain goes away for a few hours or days then comes back and does not improve, this would mean the block was also of diagnostic value. The pain is probably coming from your joints.

### What happens during my procedure?

Medial branch blocks are carried out as a day case procedure (you can go home on the same day). The procedure is carried out in one of the theatres in Day Surgery to minimise your risk of getting an infection. Shortly before your procedure you will be asked to change in to a theatre gown.

### The procedure

- The procedure is carried out under x-ray. This allows the doctor to identify the specific area to be treated. **It is important that you tell your consultant if there is any possibility that you may be pregnant, as x-rays may harm your baby.**
- You will be asked to lie down on your front. Once you are laying in the correct position, your doctor will prepare the area to be treated with an antiseptic solution which may feel cold.
- A local anaesthetic is injected at the site of the procedure. This may sting to start with, before your skin goes numb.
- It is important that you keep still during the procedure, as a special hollow needle will be carefully inserted under x-ray control in to the correct position. A local anaesthetic is then injected over the nerve.
- The above may be repeated at different levels on your spine.
- A small dressing will be used to cover the injection sites. This can be removed after 24 hours. Do not worry if it falls off sooner.

## What are the possible risks and side effects?

- There may be some **pain and bruising** at the needle site, which should settle over a few days.
- You may **feel a little unsteady** when you first stand.
- The injections may **make your pain worse**. This should settle within a few weeks.
- There is a small risk of **infection** at the site of your injections.
- You may have some **leg weakness or numbness**, which should settle within a few hours. If this happens you may have to stay in Day Surgery until this goes away.

## Should I continue to take my prescribed pain relieving medication?

Yes. If you are not currently taking anything for pain relief, you could take pain relieving tablets such as paracetamol if needed.

## What will happen after my injections?

- You will be discharged home one to two hours after your procedure.
- You must not drive for 24 hours following your procedure, please arrange for someone to drive you home from the hospital. We also strongly recommend that you have someone stay at home with you until the following day.
- You should start your normal activities as soon as possible. However, you should avoid any strenuous activities for at least one day after your injections.

### Will I need a follow-up appointment?

A telephone appointment will be made for a nurse to call you, and you will be told the date and time for the appointment after your procedure. At this appointment the nurse will need to know how much your pain has been reduced, for example:

Pain has gone 100% - 75% - 50% - 25% - 0% Pain not changed

The nurse will also need to know how long any pain relief from this procedure lasted, for example:

- no pain relief
- a few hours of pain relief
- one or two days pain relief
- pain relief continues.

You may find it helpful to complete this pain diary after your procedure. It will help you when answering the nurse's questions during your telephone follow-up appointment, but it will also help the pain team assess how well the injection has worked.

Date of procedure: \_\_\_\_\_

Pain reduction (%)	Bedtime	1st day	2nd day	3rd day	4th day	5th day	6th day	7th day
100								
90								
80								
70								
60								
50								
40								
30								
20								
10								
0								

(0 = pain not changed, 100 = pain has gone completely)

The nurse will review the outcome of this procedure to plan what happens next in regard to any future treatment.

## What happens next?

If this treatment has offered you any pain relief that was thought to be significant by you and your doctor or nurse, then you will be offered another procedure called **Radiofrequency denervation of the facet joints** (see patient leaflet Kent Centre for Pain Medicine and Neuromodulation: radiofrequency denervation of facet joints).

Radiofrequency treatment can last much longer than injections. If the relief you had from the medial branch blocks was good, the chances are that radiofrequency treatment will work as well but this cannot be guaranteed.

This procedure will be carried out within four to six weeks of the medial branch blocks.

## Further information

If you have any concerns regarding the information in this leaflet or your procedure, please phone the Pain Clinic.

## Kent Centre for Pain Medicine and Neuromodulation (direct lines)

- Kent and Canterbury Hospital, Canterbury Telephone: 01227 78 30 49
- Queen Elizabeth the Queen Mother Hospital, Margate Telephone: 01843 23 50 94
- William Harvey Hospital, Ashford Telephone: 01233 61 66 91

## Useful information

For further information on chronic pain and its treatment options, please go to the East Kent Hospitals Chronic Pain web page [www.ekhufft.nhs.uk/chronic-pain-leaflets](http://www.ekhufft.nhs.uk/chronic-pain-leaflets)

- Faculty of Pain Medicine of the Royal College of Anaesthetists. Information sheet for adult patients undergoing: Facet Joint Medial Branch Blocks for the treatment of pain.

Web: [fpm.ac.uk/sites/fpm/files/documents/2019-11/FPM-PIL-Facet-joint-medial-branch-block-Sep-2019-ed.pdf](http://fpm.ac.uk/sites/fpm/files/documents/2019-11/FPM-PIL-Facet-joint-medial-branch-block-Sep-2019-ed.pdf)

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

**Any complaints, comments, concerns, or compliments** please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email [ekh-tr.pals@nhs.net](mailto:ekh-tr.pals@nhs.net)

**Patients should not bring in large sums of money or valuables into hospital.** Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.