



Facet joint injections for pain relief

Introduction

Facet joints are small joints in spinal column. There is one pair (left/right) of them for each vertebral body, arranged in levels between neck and lower back.

The sacroiliac joints are two major joints in your pelvic bones, underlying both buttocks.

'Wear and tear', irritation and inflammation of these joints (arthritis) and the surrounding capsule and ligaments can cause back pain. Painful facet/ sacroiliac (SI) joints can also cause muscle spasms in the neck, middle or lower back or buttocks. Pain from these joints can radiate into the shoulder regions, buttocks, groins and down the leg to knee level.

Facet and/or sacroiliac joint injections can temporarily improve pain from inflammation as a source of back or neck pain. The injections are sometimes called "diagnostic" when they are done to confirm (or exclude) the source of back pain.

Please be aware that public funding for pain relief injections has been reduced by clinical commissioning groups. The Isle of Wight CCG currently (2018) funds only one single set of facet or SI joint injections for patients who have had ongoing pain for at least one year. It does not fund repeat repeat injections.

What is injected?

Usually, a combination of cortisone ('steroid') and local anaesthetic is injected together. Local anaesthetic mildly numbs and can provide rapid onset relief, lasting for a number of hours only.

Cortisone reduces swelling and inflammation and can make the relief effect last for longer, on average several months. The effect of facet and SI joint injections is temporary; there is no long term curative effect.

X-rays and Iodine

X-rays as well as an **iodine**-containing dye may be used to guide the injection. Since X-rays can be harmful in higher doses, we try to keep the dose to a minimum. Please tell us if you have a known allergy to iodine or have recently diagnosed over- or under-active thyroid.

For Female patients age 13-55

X rays can harm unborn children during pregnancy; by regulation we are required to exclude pregnancy in all women of child-bearing age and for this reason should use X-rays only within ten days following your monthly bleeding. If you are not within these 10 days you will be asked to do a pregnancy test on the day the procedure (please be aware that the standard urine tests have a tiny chance of failing to detect an existing pregnancy)

If you are unsure, or if there is any chance of you being pregnant you need to tell us **before** coming to hospital (ring 01983 526699), and we will re-schedule your procedure.

If you have Diabetes

Your blood sugar may increase after this procedure. Diabetic control should be at optimum when having facet/ SI joint injections, so please ask your GP or Diabetes specialist to check this before having the procedure.

If there is a very high blood sugar level on the day of the injection (more 15mmol/L) it may not be safe to proceed. You should plan to monitor your blood sugar concentration carefully for the first few days after the injection and should know how to adjust your anti-diabetic medication.

How is are facet/SI joint injections carried out?

Facet/SI joint injections are done as Day case procedures without the need for General Anaesthesia or sedation.. They take about 30 minutes to do.

A local anaesthetic injection will numb your skin in multiple places prior to inserting injections needles. Die to stinging It is not entirely painless to have this treatment but most people find it quite tolerable.

You can expect to return home 1-2 hours after the injections have been completed.

What you need to arrange

You must arrange a friend or relative to take you home afterwards. And you must have an adult with you at home for the first night after the injection who is able to physically support you. If you cannot arrange these two, please bring this to this to the attention of the Mottistone secretaries (526699). Without these arrangements in place your procedure cannot go ahead.

Medicines you need to stop some time before having an injections

Your blood clotting needs to be near normal to safely have and these injections.

If you take medicines that reduce clotting these usually need to be stopped 5-7 days in advance. Please make your doctor aware of this so that you can receive suitable instructions when to stop, and whether to replace with other treatment.

The following medicines usually need to be discontinued 5-7 days before this procedure:

Aspirin (any dose), Clopidogrel (Plavix), Prasugrel, Abciximab (ReoPro), Dipyridamole (Persantin, Asasantin), Eptifibatide (Integriline), Tirofiban (Aggrastat), Ticagrelor, Warfarin, Acenocoumarol (Sinthrome), Phenindione, Dabigatran (Pradaxa), Epixaban (Eliquis), Rivaroxaban (Xarelto)

Outcomes and what to do after the injection

Some people (10-20%) find that their pain is a little worse right after the injections. This is completely normal and should be expected. It usually takes a few days to settle down but sometimes can last for several weeks. During this time take regular pain killers and do a little less than you would do normally. Other than standard painkillers, there is no additional treatment to improve this pain increase.

Around 60% of patients find the injections helpful (>50% pain relief). The effect lasts for 2-4 months on average, with a range from a few days only to a year or more.

If you had a good effect from facet/SI joint injections you are likely to later benefit from an RFD ('nerve burning') procedure after your pain has returned.

You should think ahead about what to change if you are better afterwards. For most patients it is important to increase or start new exercises in planned way, and reduce or wean off long term pain killers, particular morphine-like drugs. It can also be important to plan your phased return to work or arrange social events for which your pain has been a barrier.

Tracking symptom changes

It is a good idea to keep a pain diary for some time before and after having injection treatment.

This can help you and your doctor to document the effect and make decisions about the next steps of your treatment.

While a pen and paper diary is an option, there are a number of Pain Diary Apps available that you can use with a laptop, tablets or mobile phones.



If you have an iPhone or iPad take a look at the **Alogea** App in the Apple App store. This has been developed by AppToolFactory and Dr Michael Luckmann to help you track and better manage pain medicines.

It's free to download and use for one medicine and symptom.