River Cities Interventional Pain Specialists

Since 2004 Dr. Randall P. Brewer has been in clinical private practice in Shreveport, Louisiana and maintains academic appointments at Duke University and Louisiana State University, where he routinely lectures in the areas of Pain Medicine and clinical Neuroscience in the Department of Neurology and the Medical school. He is board certified by the American Society of Anesthesiologists, the American Board of Pain Medicine, and the American Board of Psychiatry and Neurology.

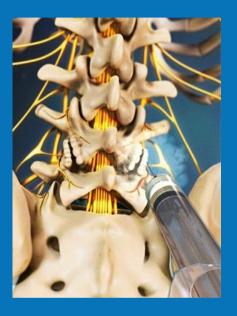
Dr. Brewer and his multi-disciplinary team of highly skilled nurses and physician extenders provide comprehensive pain management treatment solutions to treat chronic pain disorders. The team works collaboratively with patients and area providers to develop individualized treatment plans and attainable goals. These strategies help patients to effectively address a wide range of chronic pain disorders.

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TOP TEN QUESTIONS ABOUT...



FACET NERVE BLOCKS

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1. What is a facet joint?

Facet joints are the joints in the spine that help to connect the bones of the spine together for support and movement. Like other mobile joints in the body, facet joints can develop arthritis. The most common locations for pain due to facet joint arthritis is in the lower back and neck. It can also occur in the thoracic region (mid back).

2. What is a "facet block?"

A "facet block" or "medial branch block" is the injection of local anesthetic around the nerves that supply the facet joints. The injection is considered the primary way that doctors use to diagnose facet joint pain.

3. How are facet blocks helpful to doctors?

While symptoms of back (or neck) pain, physical examination findings, and the results of imaging tests can steer doctors in the right direction towards the source of pain, the established method of proving a diagnosis of pain due to facet joint arthritis requires a series of diagnostic injections known as facet nerve ("medial branch") blocks. Facet nerve blocks enable doctors to identify which joints are responsible for some or all of the pain coming from a region in the spine. The localization of the source of pain can help doctors to determine whether "ablation" of the joint's nerve supply can produce longer lasting benefits.

4. I have a "herniated disc", how will a nerve block help?

Herniated discs are common and can lead to pressure on important nerves in the spine (back and neck) causing either back or neck pain with some elements of arm or leg pain. With time, herniated discs often also have associated arthritis of the facet joints, that further contributes to pain.

5. How is the doctor going to block the nerve?

Nerve blocks involve the precise placement of a solution of "local anesthetic" around the nerve very precisely using a fluoroscopy machine. Local anesthetics, like "novacaine" work by temporarily blocking the electrical signals in the nerve. When these signals are blocked, the transmission of pain signals to the brain are temporarily interrupted. Your provider will need to know about pain relief as well as an improvement in activities that were difficult or painful prior to the procedure that may be easier following the procedure.

6. How long will the nerve block work?

The amount of time that a nerve block works depends upon the type of local anesthetic that your doctor uses. Some local anesthetics (for example, lidocaine) only last one to two hours, while other local anesthetics (for example, bupivacaine) will last longer (3-4 hours).

7. Will I be weak or numb from the nerve block?

Facet nerves do not supply any major muscles or areas of skin that result in numbness or weakness. Uncommonly, the local anesthetic from the diagnostic block also spreads to larger nerves affecting the extremities. If this happens, the numbness and/or weakness is a temporary effect from the local anesthetic.

8. Can the nerve block help to treat my pain?

Many people experience improvements in their pain for a significant period of time (2 or more weeks) after any numbness or weakness has gone away. If your doctor elects to include a steroid solution with your nerve block, the injection may provide pain relief from the steroid injection in addition to the local anesthetic. The benefit of the nerve block may last days to months depending upon your particular condition.

9. If the nerve block helps, how do know if it was the local anesthetic or the steroid?

Being informed of the types of medications in your nerve block is very important for you to understand how your pain may respond. Generally, the early relief of pain following nerve block (within one hour after the procedure) is a result of the "local anesthetic effect." The relief from the steroid solution generally begins to appear sometime after the injection (2-5 days or more). Occasionally, possibly due to "breaking the pain cycle", the local anesthetic and steroid effects are indistinguishable.

10. If the nerve block helps, can the doctor just "kill the nerve?"

Facet nerve blocks are usually performed in a series of two in which local anesthetic (with or without steroid) is injected at the levels suspected to be causing pain. You will be asked to carefully observe your pain level, and your activity tolerance during the first few hours following the nerve block. Your provider will discuss the option of "nerve ablation" if the diagnostic injection is helpful.

