

Pulsed Radiofrequency treatment for the management of pain

The aim of this leaflet is to give you information about Pulsed Radiofrequency (PRF) and to answer some questions that you may have. Please note that different places may do things differently. Your doctor will be able to explain fully what to expect.

What is pulsed radiofrequency (PRF)?

Pulsed radiofrequency is a procedure that aims to change the way pain is transmitted from the nerve to the brain. The nerve is treated by heating it using a special device, called a radiofrequency machine. This causes changes to the nerve which can provide pain relief by preventing pain signals from reaching the brain. Other signals from this nerve are not blocked.

Is this the right treatment for me?

If you had good pain relief, with the diagnostic local anaesthetic injection, it is possible that after pulsed radiofrequency you may experience longer-lasting pain relief. Other treatment options will be discussed with you before deciding to have the procedure and your consent is needed. The decision on whether or not to have the procedure is made together by your doctor and you. Your doctor will be able to provide you with up-to-date information about the chance of this treatment working for you and how it fits in with other care. If you are undecided about whether or not to have the procedure then more advice and information can be given. Please speak to your doctor for more information.

If your health has changed, it is important to let your doctor know.

- ▶ If you have an infection in your body, your doctor may wait until the infection is cleared before giving the treatment
- ▶ If you have been started on anticoagulant or antiplatelet medicines that "thin the blood" such as warfarin, heparin, apixaban, rivaroxaban or clopidogrel, extra preparation may be needed before you have the treatment
- ▶ If you have any allergies
- ▶ If you are pregnant
- ▶ If you have a pacemaker or other electrical implants

Will I experience any side-effects?

Unfortunately, no pain procedure can be risk free. There are also no guarantees that this procedure will relieve your pain.

Side-effects may include:

- ▶ Mild local tenderness and/or bruising at the site of the procedure, that usually gets better over the first few days.
- ▶ A prickling sunburn-like sensation over the skin, that usually gets better with time but may last a few weeks. Very rarely, this procedure can cause skin burns.

- ▶ Very rarely, you may feel numbness and/or weakness in the area supplied by the target nerve, because of the local anaesthetic spreading. If this happens, the feeling is temporary and will quickly get better over minutes or hours.
- ▶ Infection. This is rare. You should seek medical help if there is local warmth or redness over where you had your treatment with tenderness. Or if you feel hot and unwell. This may need antibiotic treatment.
- ▶ Serious nerve injury is very rare. Great care is taken during the procedure to avoid this complication by placing the needles carefully under either ultrasound or x-ray guidance and only treating the nerve when the doctor is confident that the needles are in the right position.
- ▶ Serious complications such as allergic reactions, significant bleeding or infection are very rare.



People vary in how they interpret words and numbers.
This scale is provided to help.



What should I know before the procedure?

- ▶ You will have the treatment as a day case at the Day Surgery Unit, Nevill Hall Hospital, Abergavenny.
- ▶ You should arrange for someone to drive you home after your procedure.
- ▶ Your stay may vary between two and four hours.
- ▶ You will be asked to undress and put on a theatre gown. You can keep your underwear on.
- ▶ Your doctor will discuss the procedure with you and ask you to sign a consent form. If there is any possibility that you may be pregnant, please inform the doctor or nurse.

What will happen to me during the procedure?

- ▶ The procedure is carried out under either ultrasound or X-ray guidance. This allows the doctor to identify the target to be treated.
- ▶ A healthcare professional will get you ready for the procedure. Your blood pressure and pulse rate will be checked.
- ▶ A small self-adhesive foil plate will be placed on your body.
- ▶ Once you are in the correct position the doctor will clean the target area on your body with an antiseptic solution or spray which may feel very cold.
- ▶ A local anaesthetic is injected at the site of the procedure. This may sting initially, before the skin goes numb.
- ▶ It is important that you keep still during the procedure as a special needle will be carefully inserted into the correct position. This may feel a bit uncomfortable.

- ▶ The doctor may ask you to say when you can feel a mild pain or a muscle twitch as the machine settings are adjusted. This is very important as it makes sure that the needle is in the right place.
- ▶ The machine settings will then be set to treat the nerve by heating it. During this period, you may experience some pain at the site of the procedure.
- ▶ A small dressing will be placed over the treatment site.

What will happen to me after the procedure?

After the procedure, you will be taken to a recovery or ward area where nursing staff will check on you. Your blood pressure and pulse will be checked. Please ensure that it is safe to mobilise before resuming usual activities. You will be given more advice when you are ready to go home.

What can I expect in the days afterwards?

You may feel some soreness or aching at the treatment site. Please keep the area of the treatment dry for 24 hours following the procedure. Your pain may feel worse for a few days as this sometimes happens. Take your regular pain killers and medications as normal and this should get better. Try to keep on the move about the house while avoiding anything too difficult.

What can I do after my procedure?

Ideally, you should arrange for someone to stay with you for 24 hours but, if you cannot, you should at least have access to a telephone. You should not drive, operate machinery, sign legal documents, provide childcare without help or drink alcohol until fit to do so.

If you are not sure, please ask your doctor for more advice.

When can I return to work after the procedure?

This will be different for different people and may depend on the type of work you do. It is difficult to give general advice and so you should discuss this with your doctor

What should I do in the weeks after the procedure?

As your pain decreases, you should try to gently increase your exercise. It is best to increase your activities slowly. Try not to do too much as you may have more pain the next day. Your doctor can provide more specific advice.

What follow-up will be arranged?

A letter will usually be sent to your GP and your doctor will tell you what to do after the procedure. You may be asked to make a call to the pain department, be given a form to fill in, or given a telephone review or other appointment.

Is there anything else I need to think about before the procedure?

- ▶ Please bring your glasses if you need them for reading.
- ▶ Bring any other devices you may need, such as hearing aids, mobility aids etc.
- ▶ Always bring a list of all current medication.
- ▶ Continue to take your medication as usual on the treatment day, unless advised otherwise.
- ▶ It is recommended that these procedures are avoided 2 weeks on either side of vaccination.

Finally...

The information in this leaflet is not intended to replace your doctor's or health care team's advice. If you need more information or have any questions or concerns, please speak to your GP or contact your Pain Clinic.

After your procedure, if you have any questions or concerns, please contact your GP/Minor Injuries Unit/Accident & Emergency

or

Contact the Chronic Pain Service at **01495-768699** or **01495-765701** (09:00 to 16:00 Monday to Friday)

Adapted from Faculty of Pain Medicine (FPM) Patient Information Leaflet for Radiofrequency Lesioning

**This document is available in Welsh/
Mae'r ddogfen hon ar gael yn Gymraeg**