HIP COOLED RADIOFREQUENCY ABLATION

Hip radiofrequency ablation is performed on an outpatient basis for treatment of chronic hip pain secondary to osteoarthritis. This information sheet will provide you more information regarding this procedure.

WHAT IS HIP RADIOFREQUENCY ABLATION?
This procedure involves burning of the articular branches to the hip joint, thereby preventing transmission of pain signals from the painful hip joint.

WHAT DO YOU MEAN BY ARTICULAR BRANCHES?
These are small branches of the femoral and obturator nerves which transmit pain signals from the hip joint to the brain. They are not required for the movement of the hip joint.

IS THE RADIOFREQUENCY PROCEDURE PAINFUL?
Unlike surgery, there is no incision and hence the procedure is not very painful. Local anaesthetic inserted into the skin and deeper tissues prior to ablation will help in minimising discomfort during the procedure.

WHAT HAPPENS DURING THE PROCEDURE?
The procedure is performed under fluoroscopy (x-ray) guidance. Local anaesthetic will be used to numb the skin. The doctor will then insert a special radiofrequency needle close to the articular nerves which transmit painful signals from the hip joint. Two nerves are targeted as a part of this procedure. The procedure is performed under local anaesthetic, and you will remain awake throughout the procedure.

WHAT HAPPENS AFTER THE INJECTION?
A nurse will monitor you for up to 30 minutes after the procedure. The nurse will take your pulse rate and blood pressure. Occasionally you may feel your leg to be slightly heavy after the procedure.

You will be instructed not to drive for up to 24 hours after the injection. You will need some one responsible to take you home. The procedure does not work instantly, and generally takes 4-6 weeks to take full effect. Pain relief will come on rather gradually, though in some cases it may work faster.

The procedure may not help in some cases. Your pain may be exacerbated for up to a week or sometimes longer from the injection. We always warn you about serious side effects including infection, nerve damage and bleeding but these are extremely rare.

The doctor will discuss these side effects in more detail when you sign the consent form.

HOW LONG CAN I EXPECT THE PAIN RELIEF TO LAST?
The duration of pain relief is variable and difficult to predict. If the procedure works well it may last between 6 months to 2 years, and sometimes even longer. The procedure can be repeated if pain comes back after several months.

IS THERE ANY THING SPECIFIC THAT I NEED TO INFORM THE DOCTOR ABOUT PRIOR TO THE PROCEDURE?
You should always tell the doctor if you are pregnant or likely to be pregnant.

You should inform the doctor about any blood thinning medications that you might be taking. This includes Aspirin, Clopidogrel, Warfarin, Heparin and some of the newer ones like Rivaroxaban and dabigatran.

Finally always inform the doctor about your allergies. The above information is for general education only.

Please ask specific questions to the doctor during your consultation.

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PROCEDURES WE OFFER

LUMBAR EPIDURAL INJECTION
CAUDAL EPIDURAL INJECTION
LUMBAR FACET JOINT INJECTION
CERVICAL FACET JOINT INJECTION
THORACIC FACET JOINT INJECTION
DORSAL ROOT GANGLION BLOCK
NERVE ROOT BLOCK
LUMBAR FACET RADIOFREQUENCY DENERVATION
CERVICAL FACET RADIOFREQUENCY DENERVATION
TRIGGER POINT INJECTION
Sacroiliac Joint Injection
Coccyx Injection
Ganglion Impar Block
Piriformis Injection
Inguinal Nerve Block
Pudendal Nerve Block
Joint Injection
Occipital Nerve Block
Pulsed Radiofrequency Treatment
Intercostal Nerve Block
Rectus Sheath Block
Trochanteric Bursa Injection
Ischial Bursa Injection
Iliolumboar Ligament Injection
Quadratus Lumborum Injection

ACHILLES TENDON INJECTION
PLANTAR FASCIA INJECTION
GENICULAR NERVE BLOCK & RF NEUROTOMY OF KNEE JOINT
SUPRASCAPULAR NERVE BLOCK
BOTOX INJECTION
PLATELET RICH PLASMA THERAPY
TENNIS ELBOW INJECTION
GOLFER'S ELBOW INJECTION
SUPRASCAPULAR NERVE ABLATION
BOTOX FOR MIGRAINE
CERVICAL MEDIAL BRANCH BLOCKS
LUMBAR MEDIAL BRANCH BLOCKS
STELLATE GANGLION BLOCK
HIP JOINT COOLED RADIOFREQUENCY ABLATION
INGUINAL NERVE ABLATION
LATERAL FEMORAL CUTANEOUS NERVE BLOCK
GREATER AURICULAR NERVE BLOCK
BOTOX FOR BACK PAIN