

## INFORMATION ABOUT YOUR PROCEDURE

### **THORACIC FACET OR COSTOVERTEBRAL JOINT BLOCK**

#### **How we do the procedure**

A thoracic facet or costovertebral joint (rib joint) block is done to treat inflammation of the facet or costovertebral joints which can cause upper back and chest wall pain. The thoracic costovertebral and facet joints are often involved in injuries from car accidents or after disk or thoracotomy surgery that can cause increased stress on the joints. The block can be performed at any level of the upper back (thorax).. You will be lying face down on the procedure table with a pillow under your chest. Your back will be cleansed with betadine and a sterile drape will cover the area.

The doctor will inject the skin with local anesthetic to make you more comfortable during the procedure. A small needle is inserted alongside the spine and advanced to the position of the specific costovertebral or facet joint to be blocked, either by inserting the needle into the joint or by blocking the nerve that takes care of sensation from the joint. We will use an x-ray (fluoroscope) machine so that we can be sure of where the needle is placed. Once in position, a local anesthetic agent is injected into the joint. Occasionally a long-acting steroid (NOT the kind that increases muscle size in athletes) is injected to decrease inflammation in the joint in hopes of decreasing your pain.

#### **What to expect**

Due to the local anesthetic, it is possible that you may notice a numb area in the upper back or chest wall. As soon as you get off the table, we will ask you about your pain score. Once the local anesthetic has worn off, typically after several hours, your pain may return. If steroid was injected, it will start working in 1-5 days to reduce inflammation. Depending on your response, we may also discuss a radiofrequency approach to cauterize the facet nerves. This new technique has a good chance of giving you long-term relief of your pain, from 1-2 years. We will schedule you for another injection in 2 weeks. If no substantial effects are obtained after one or two injections, we will discuss other alternatives.

#### **Risks**

The risks include bleeding, infection and a reaction to any of the medications used for the procedure. We use sterile technique to avoid infections. If you are taking a "blood thinner" (anticoagulant), we will give you special instructions before the procedure to avoid excess bleeding.

Rarely, a pneumothorax or lung collapse may occur from a small hole having been made in the lung lining. This is usually not dangerous, but may require a chest tube to be placed for a while to reexpand the lung until the air leak heals over.

#### **Safety Precautions**

Since your ability to drive may be impaired for a few hours, we ask that you have someone drive you home.

Injected steroids occasionally cause nervousness, difficulty sleeping, a flushed feeling (like hot flashes), an increased appetite, an elevated blood sugar, or a "moon face" (rounded face) for several days.