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PROCEDURE NAME

Pulsed radiofrequency (PRF)

PROCEDURE CODE

5612

INTRODUCTION

This leaflet will provide you with information about Pulsed Radiofrequency (PRF) procedure which is a well-established treatment for joint and nerve pain. It includes information on the treatment, the risks and benefits of the procedure involved.

RADICULAR AND DISCOGENIC PAIN

Radiating pain and midline pain from the neck or back from degenerated disc is a common chronic pain condition and associated with significant disability. The procedure differs from radiofrequency neurotomy (rfn) treatment where the probe is heated. Pulsed Radiofrequency treatment applies an intermittent electrical pulse to the probe, thereby avoiding heating the nerve. This in turn minimises further nerve damage. It uses an electromagnetic current to reset the nerves and change the conduction characteristics to reduce pain signal transmission. PRF treatment doesn't cause weakness or loss of normal sensations and has been shown to reduce pain. The average duration of pain relief is between 4 and 26 months, depending on which nerve is being treated. However, pain relief may range from anywhere between four weeks to 18 months. In some cases however, there is no benefit.

Generally, you will be discharged from the hospital within two hours and may resume normal activities on the following day. Simple analgesics are often required for a few days. If you've been using stronger analgesics, you may require stronger analgesia for a few days.

PRF PROCEDURE

A small electric current (Medically safe) is applied to the nerve station for 2 minutes.

BENEFITS

This treatment for radicular pain has become increasingly accepted as a safe and minimally invasive day-care therapy with low complication rates and longer pain relief. Surgical discectomy carries markedly higher complication and failure rates.

SIDE EFFECTS/RISKS

- Bruising and tenderness at the site of injection is common. You may experience an increase in your pain after a few hours, however this is usually transient and will settle.
- Allergic reaction to the medications used in the procedure or sedation is possible but can be treated on the day: nausea is not uncommon following sedation.
- Infection is extremely unlikely with the possibility minimised by the use of sterile techniques in an operating theatre. The needles are all disposable.
- It is uncommon for more than a day of work to be lost; however, if there was an infection or excessive pain, there is a possibility of some time off work. Some soreness after the procedure is normal and may last for 24-48 hours.
- Bleeding, infection, nerve damage and allergy are all very rare.

BEFORE THE PROCEDURE

- You will be required to fast for 6 hours prior to your admission from food.
- You will be required to fast for 2 hours prior to admission from water.
- Take your normal medications on the morning of your procedure.
- Please contact my office immediately if you are currently taking blood thinners such as **Xarelto (Rivaroxaban), Eliquis (Apixaban), Plavix (Clopidogrel), Pradaxa (Dabigatran) or if you are pregnant.**
- Please also advise if you are taking any diabetic medication.
- Upon admission, the procedure will be discussed with you again and you will be asked to sign a consent form.

THE PROCEDURE (15-20 MINUTES)

- This is carried out in the theatre while you are awake.
- You will be offered sedation through an injection into the back of your hand to help you to relax.
- Your injection site will be cleaned with an antiseptic solution. Sterile sheets will then be placed around the area. A local anaesthetic will be injected to numb the area.



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- X-ray / ultrasound will be used to ensure proper positioning of the injecting needle. You may feel a bit of pressure and a stinging in the area. Dye will be used to confirm the correct position of the needles and before administration of medications which will normally include a steroid for longer-term relief and sometimes alcohol or phenol.
- Application of Pulsed Radiofrequency (PRF) will give you additional benefit.
- If you feel any discomfort during the procedure, please tell a member of the theatre team.
- Once completed, a plaster will be placed over the injection site, and you will then be taken to the recovery area.

AFTER THE PROCEDURE

- In the recovery area, you will be observed for 30 to 60 minutes.
- You need to have somebody to accompany you home.
- Do not stop your usual pain killers.
- The plaster can be removed after 24 hours, and you can then have a bath or shower as normal. Before the plaster is removed, avoid getting the injection site wet.
- Re-engage in physical activities as soon as you can.
- You will be contacted about a follow-up appointment for 4-6 weeks' time, or you can book directly by visiting www.drdeborahgalvin.ie

Please report immediately to your GP / my office or attend the Emergency Department if you have serious concerns outside office hours.