



# University Pain Medicine Center

MINIMALLY INVASIVE PAIN SPECIALISTS Vol. 5

## CONTINUING RELIEF

**ALSO INSIDE:**

Healthy Recipes p.2 Finding Relief p.4 Staff Spotlight p.9

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Dr. Didier Demesmin



At University Pain Medicine Center, we are excited that you chose Dr. Demesmin and the outstandingly committed team of health care professionals to either eliminate or effectively manage your pain. We treat a variety of pain syndromes and incorporate innovations in research and technology with the most compassionate, cutting edge treatment therapies. Each patient is treated as an individual with a unique condition set requiring a customized therapeutic approach. We invite you to peruse our periodical where you will find answers to your questions regarding procedures, alternative therapies and delicious anti-inflammatory recipes. Please feel free to visit our website [www.upmcj.com](http://www.upmcj.com) and share your success story with us!

From our families to yours,

Dr. Demesmin

Founder, University Pain Medicine Center

Director of Pain Medicine, Saint Peter's University Hospital

Clinical Assistant Professor Rutgers Robert Wood Johnson Medical School, New Brunswick, N.J.

Program Director of the Multidisciplinary Interventional Pain Fellowship at JFK Medical Center in Edison, N.J.



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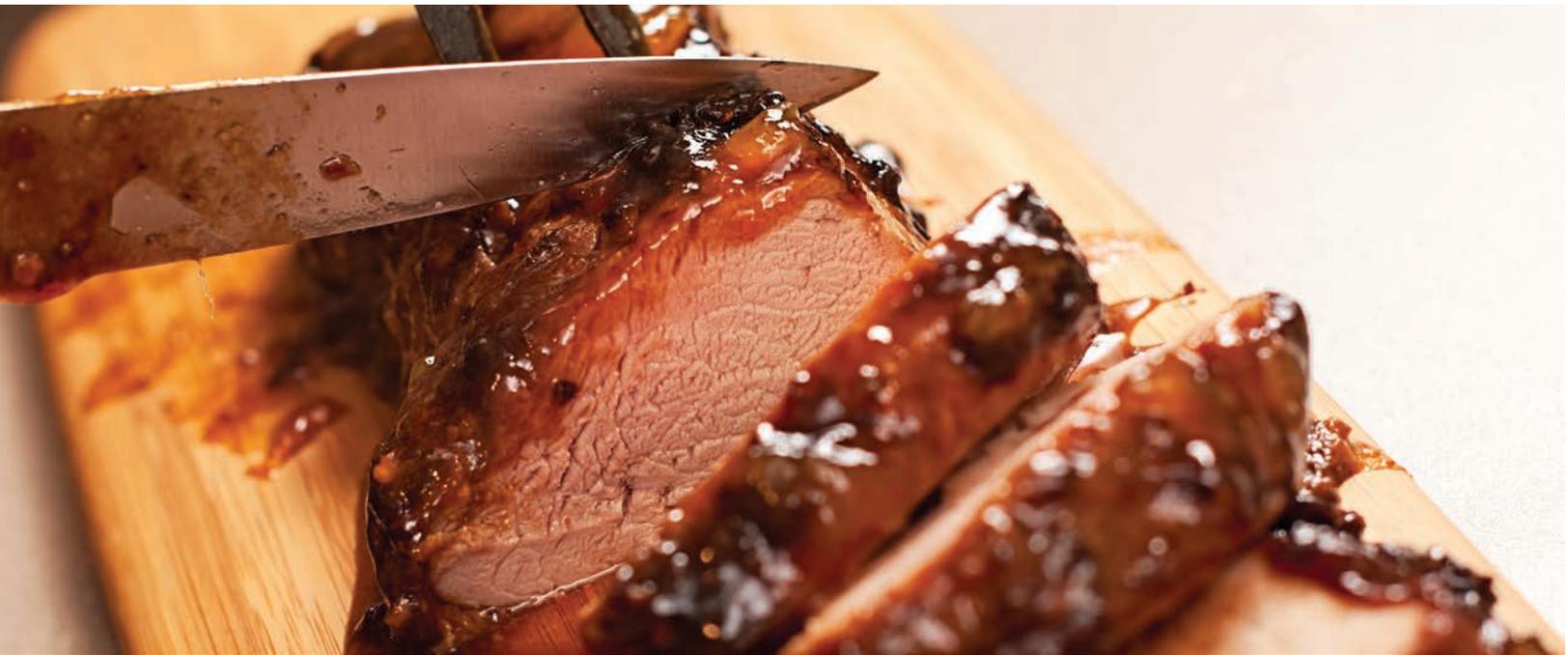
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# DELICIOUSLY HEALTHY & EASY RECIPES

## Pork Tenderloin with Balsamic Glaze

1. Heat oven to 425°
2. Brush sheet pan with 2 tsp olive oil.
3. Bring 1 cup Balsamic Vinegar to a simmer in a small saucepan. Cook until thickened and reduced by half, about 10 minutes. Place half of mixture into bowl and set aside.
4. Season 1 Organic Pork Tenderloin (about 1 1/4 lb) with 1 tsp each kosher salt and black pepper.
5. Place on baking sheet and brush with glaze from saucepan.
6. Roast, brushing every 5 minutes with more glaze, 18 to 20 minutes, until meat thermometer reads 140° when inserted into thickest part.
7. Slice and sprinkle with chopped parsley and thyme. Serve with reserved glaze!

## Garlicky Sautéed Swiss Chard

1. Heat 4 tsp olive oil, 2 sliced cloves garlic, and 1/4 tsp crushed red-pepper flakes in large skillet over medium heat.
2. Add 8 cups organic swiss chard and cook until wilted.
3. Season with 1/4 tsp each kosher salt and black pepper.

## Herbed Grain Pilaf

1. Heat 1 Tbsp olive oil in Medium saucepan over medium heat.
2. Add 1 medium chopped yellow onion, 1 bay leaf, and 1/2 tsp each kosher salt and black pepper. Cook until onion is soft, about 5 minutes.
3. Add 1 cup pearl barley and cook 3 minutes. Add 2 1/2 cups organic reduced-sodium chicken

broth and bring to a boil over high heat.

4. Reduce heat to low, cover, and cook until barley is tender about 30 minutes.
5. Stir in 1 Tbsp chopped fresh parsley and 1 tsp freshly grated lemon zest.

### Wilted Brussels Sprouts with Hazelnuts and Shallots

1. Heat 1 Tbsp olive oil in large skillet over medium heat.
2. Add 1 sliced shallot and cook until soft, about 4 minutes. Add 1 lb shredded organic brussels sprouts and cook until wilted, about 3 minutes.
3. Serve topped with 2 Tbsp chopped toasted hazelnuts.

### Nut-and-Seed-Crusted Fish Fillets

1. Heat oven to 400°.
2. Combine 1/2 cup finely chopped raw almonds,

3 Tbsp sesame seeds, 1 Tbsp crushed fennel seeds, 1/4 tsp cayenne pepper and 1/2 tsp each ground cumin, kosher salt and black pepper on large plate.

3. Mix 4 tsp Dijon mustard and 2 tsp honey in small bowl. Brush 4 Atlantic or Pacific hand-line-caught cod fillets (about 1 1/4 lb total) with mustard honey mixture, then press into nut-seed mixture. Place on lightly oiled sheet pan and bake until cooked through and flaky 12-15 minutes.

### Arugula, Lime and Pepita Salad

1. Whisk 2 Tbsp olive oil, 1 Tbsp fresh lime juice, 1/2 tsp Dijon mustard, and 1/4 tsp each kosher salt and black pepper in large bowl.
2. Add 4 cups organic baby arugula and 1/2 small sliced red onion and toss well to coat.
3. Serve topped with 3 Tbsp pepitas.





# CONQUERING NECK AND BACK PAIN Though Facet Joint Injections

**F**acet joint injections for neck or low back pain offer patients superior relief from pain and discomfort. Sometimes, due to a variety of acute and chronic conditions, the facet joints can become inflamed. A facet joint injection is an injection of an anti-inflammatory medicine in the facet joints. The facet joints, also known as the zygapophysial joints, are part of the bony framework of the spine. They are small bony projections from one vertebra meeting with similar bony projections from the vertebra above or below. For low back (lumbar) facet joints, the pattern of pain is commonly an achiness in the

low back, radiating across the lower back and slightly down the back of the buttocks and upper thighs. Usually, bending backward or standing worsens the pain. For neck (cervical) facet joints, the pattern of pain is an achiness in the neck, slight radiation across the neck and shoulders, and worsening symptoms with turning the head from side to side or looking up.

The actual injection takes only a few minutes. Your physician will more than likely ask you to allow an hour for the completion of the procedure--this includes talking before the procedure, getting properly positioned in the treatment room and observations after the injections.

The injection consists of a mixture of anti-inflammatory medicine and a local anesthetic chosen specifically by your physician for the best solution to your condition.

It is typically done with you lying on your stomach. Your blood pressure and oxygenation will be monitored. The skin on the back is cleaned with antiseptic solution and then the procedure is done. Tiny needles are placed within the joint capsule and a small volume (about 1 mL) is placed in each joint. It can feel like a little “pinch” and then a slight tingling sensation as the local anesthetic begins numbing the skin. After the skin is numb, the procedure needle feels like a bit of pressure at the injection site. If you experience any pain during the procedure, your doctor will inject more local anesthetic as necessary.

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**The medicine starts working in about 2-7 days after the injection and its effect can last for quite some time.**

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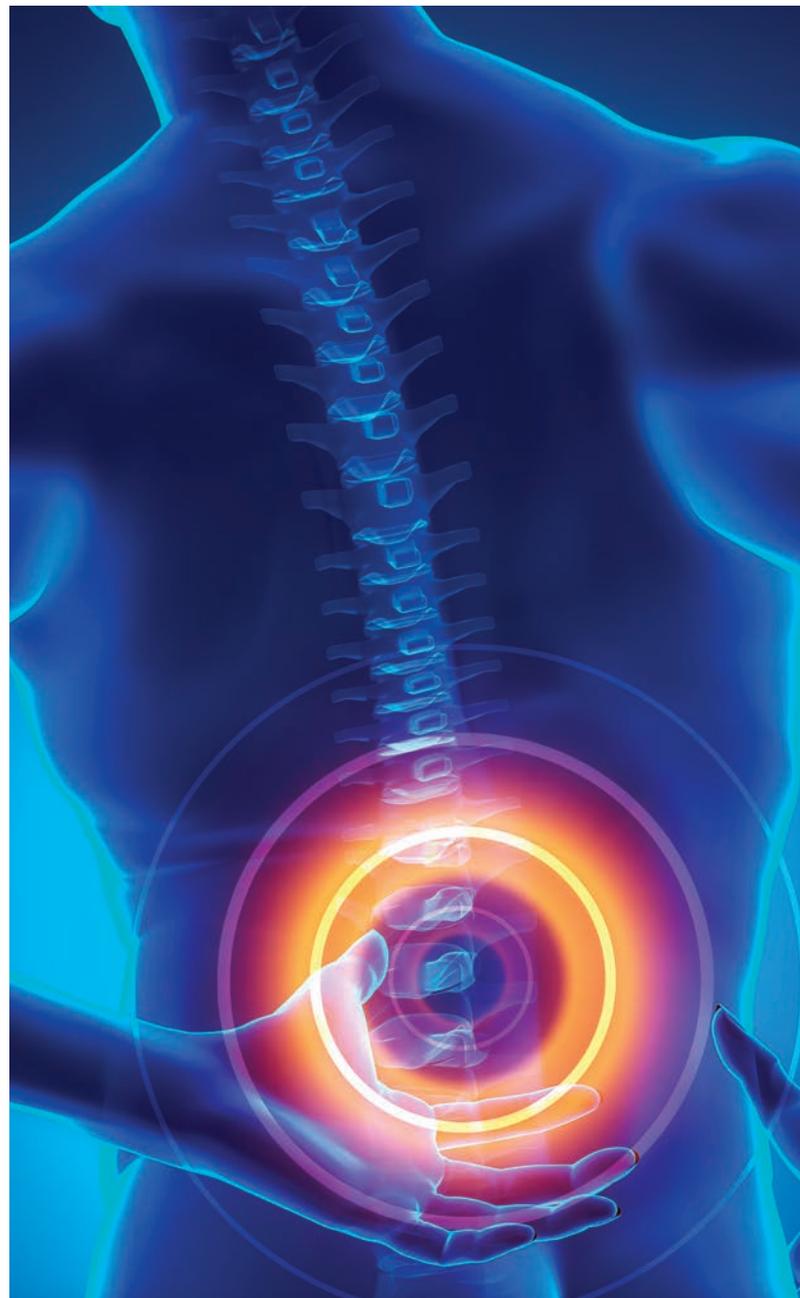
Shortly after the injection, you may notice that your pain may be gone or considerably less. This is due to the effect of the local anesthetic and lasts only a few hours. You may have a bit of soreness at the injection site for a day or so. The good news is that you should start noticing a significant reduction in pain 1-2 days following the procedure!

After the procedure, it is best to take it easy for a day or so. Perform the activities that you can best tolerate without putting strain on yourself.

The frequency of the injection varies from patient to patient and your doctor will thoroughly discuss this with you. The medicine starts working in about 2-7 days after the injection and its effect can last for quite

some time. If the first injection is successful but the pain returns, you may be eligible for another injection, if you experienced relief for a reasonable period of time. You and your doctor will also cover this with you in detail.

Overall, facet joint injections can provide long term relief from pain and inflammation with minimal invasiveness. You can find this process a fresh approach to living a life free from low back and neck pain.





# TRIGEMINAL NEURALGIA TREATMENT

**T**rigeminal Neuralgia is a rare neurological disease that causes sudden, severe, brief, stabbing recurrent episodes of facial pain in one or more branches of the trigeminal nerve. If you have trigeminal neuralgia, sometimes even slight stimulation of your face--like brushing your teeth or putting on makeup--may trigger a jolt of excruciating pain. It can be provoked when the trigeminal nerve is being compressed by an artery or a vein, but can also be present with no apparent cause. It is often misdiagnosed as a jaw or dental problem or dismissed as a psychological disorder. Once correctly diagnosed, there are several medical and surgical treatment options to reduce or relieve the debilitating pain caused by this disorder. Frequently, patients with trigeminal neuralgia can be given high priority in scheduling their evaluation.

Symptoms may include one or more of the following patterns:

- Spontaneous attacks of pain or attacks triggered by things such as touching the face, chewing, speaking and brushing teeth
- Episodes of several attacks lasting days, weeks, months or longer--some people have periods when they experience no pain
- Episodes of severe, jabbing or shooting pain that can feel like a shock of electricity
- Constant aching, burning sensation that is less intense than the spasm-like pain
- Pain affecting one side of the face at a time, though it may rarely affect both sides of the face
- Pain focused in one spot or spread in a wider pattern
- Pain in areas supplied by the trigeminal nerve,

including the cheek, jaw, teeth, gums, lips or less often the eye and forehead

- Attacks that become more frequent and intense over time

If you experience facial pain, particularly prolonged or recurring pain or pain that is not relieved by over-the-counter pain relievers, see your doctor.

In trigeminal neuralgia, usually the problem is contact between a normal blood vessel--in this case--an artery or a vein--and the trigeminal nerve at the base of your brain. This contact puts pressure on the nerve and causes it to malfunction.

Trigeminal neuralgia can occur as a result of aging, or it can be related to multiple sclerosis or a similar disorder that damages the myelin sheath protecting certain nerves. Less commonly, trigeminal neuralgia can be caused by a tumor compressing the trigeminal nerve.

Some people may experience trigeminal neuralgia due to a brain lesion or other abnormalities. In other cases, surgical injuries, stroke or facial trauma may be responsible for trigeminal neuralgia.

There are a variety of "triggers" that can set off the pain of trigeminal neuralgia including:

- Touching your face
- Eating
- Drinking
- Talking
- Brushing your teeth
- Applying makeup
- Smiling
- Washing your face
- Encountering a breeze

Prior to seeking medical attention, be sure to make a note of any/all triggers that bring on your attacks of facial pain. Make a list of your key medical information including any other conditions for which you're being treated and the names of the medications, vitamins

or supplements you're taking. Take a friend or family member along, if possible. Someone who accompanies you may remember something that you missed or forgot. Write down questions in advance to ask your physician at the appointment. Creating a list of questions can assist you in making the most of your time with your doctor.

Your physician may conduct several tests to diagnose trigeminal neuralgia and determine the underlying cause of your condition. Because your facial pain can be exacerbated by many different conditions, it is important to receive an accurate diagnosis.

There are several treatment options for trigeminal neuralgia. Your physician will discuss the options and select the best plan for you. Therapies include:

- Anticonvulsants, Antispasmodic agents, Botox Injections
- Microvascular decompression
- Gamma Knife Radiosurgery
- Glycerol Injection
- Balloon compression
- Radiofrequency thermal lesioning

Alternative treatments that have been successfully employed for trigeminal neuralgia include:

- Acupuncture
- Biofeedback
- Nutritional Therapy
- Trigger Point Injections
- Vitamin Therapy
- Chiropractic Therapy

You may also find excellent and encouraging support groups. Group members are often aware of the latest treatments and tend to share their own experiences. Your University Pain Medicine Center physician--in addition to developing an individualized comprehensive treatment plan may also be able to recommend a support group in your area.



# 5 SOOTHING TECHNIQUES For Continuing Relief

**I**f you have ever spent time on the device commonly known as a foam roller, you know the physical benefits that often bring tears to your eyes and demand that you spend more time strengthening areas of your body that call for comfort. Your physical therapy may seem unbearable when you are in pain--but engaging in these active healing techniques typically provides immediate--and lasting--results.

Check out these tips that work best on patients and healthcare providers alike.

**Find the root cause of your pain.** Just because you experience pain in a localized area doesn't mean the source of trouble is not elsewhere. It is crucial to consider other contributors to a painful area beyond

the area itself. Tight calves can trigger heel pain, for example, and inflexible hips can make knees ache. Choose whole-body stretching programs to find the source of your trouble. Lots of times, headaches can come from muscle "knots" known as trigger points, which can be found in your neck or head. If you have a headache, move your neck forward and back, bring your ear down to your shoulder and turn your head left and right. Often times, we forget to move gently when we are in pain--this begins the process of tightness, which lead to pain if left untreated.

**Avoid pushing through the pain.** Sometimes with a new or nagging injury, people turn to yoga to stretch it out or they foam roll the sore area to work out the muscle. This can add insult to injury. When pain first hits,

what you really need is rest. And if your symptoms do not heal in a few days with rest and modification in your activities, it is time for a professional evaluation.

**Snag plenty of sleep.** Getting the proper amount of shut-eye each night is crucial when it comes to helping your body fight inflammation, which plays a big role in pain moderation. People who get less than 6 hours of sleep a night--or those who have disrupted sleep have higher levels of C-reactive protein in the body, which is directly linked to inflammation. Drinking a warm cup of chamomile tea or milk can naturally assist the body in gently drifting off to sleep.

**Get moving.** When you're stiff, it is common to immobilize the area to protect it and prevent further injury or pain. This can be necessary for healing at first--or with serious injuries. But stopping movement for too long can have detrimental effects. Inactivity

leads to muscles getting short and tight, and joints get locked up and become stiff. Moving helps lubricate joints, stimulates circulation, and keeps muscles mobile and strong. If you experience too much discomfort to do mild exercise, you might try getting in a pool, which reduces the pressure of gravity and can help you move with less pain.

**Load up on inflammation reducing foods.** What you eat has a direct impact on increasing or decreasing pain-promoting inflammation throughout the body. Foods that are considered anti-inflammatory include vegetables, fish, cherries, blueberries, blackberries, and pomegranates. Foods that it is best to steer clear of include red and processed meats, sweets and refined grains. You can also opt for anti-inflammatory supplements such as fish oil, ginger, curcumin, and zinc which have been shown to fight chronic inflammation.

# STAFF SPOTLIGHT

## Meet Jennifer Esena



ennifer  
Esena, MSN,  
APN-C is a  
Nationally

Certified Advanced Nurse Practitioner. After obtaining her Master of Science in Nursing at Seton Hall University, Jennifer worked as a Board Certified Registered Nurse specializing in Neurology. She then graduated from Monmouth University as an Advanced Nurse Practitioner. As of November 2015, she is excited to join University Pain Medicine Center in providing



state of the art care.

Ms. Esena works with the guidance of Dr. Demesmin seeing patients in the office and inpatients at Saint Peter's University Hospital and Robert Wood Johnson University Hospital.

Ms. Esena believes in treating each patient with compassion and is experienced in creating quality treatment plans that are unique to the individual needs of her patients. Her interests include fitness, attending her monthly book club, traveling, and spending time with her puppy, family, and friends.



# PUDENDAL NERVE BLOCK FOR RELIEF OF PELVIC PAIN

**W**

hat could possibly be worse than struggling with a painful condition and feeling ashamed to discuss the problem due to the intimacy of its nature? Such is the case for several suffering with pudendal neuralgia, a little-known disease that affects one of the most sensitive areas of the body. This area is innervated by the pudendal nerve, which is located deep in the pelvis and follows a path that comes from the sacral area and later separates into three branches, one going to the rectal area, one to the perineum, and one to the penis or clitoris. Because pudendal neuralgia is uncommon and can be similar to other diseases, it is often misdiagnosed, leading some to have inappropriate and unnecessary surgery. Early in the diagnosis process, it is crucially important to undergo an MRI of the lumbar-sacral and pelvic regions to determine that no tumors or cysts are pressing on the nerve. An accurate history is needed to assess whether there has been a trauma or an injury to the nerve from surgery, childbirth, or exercise.

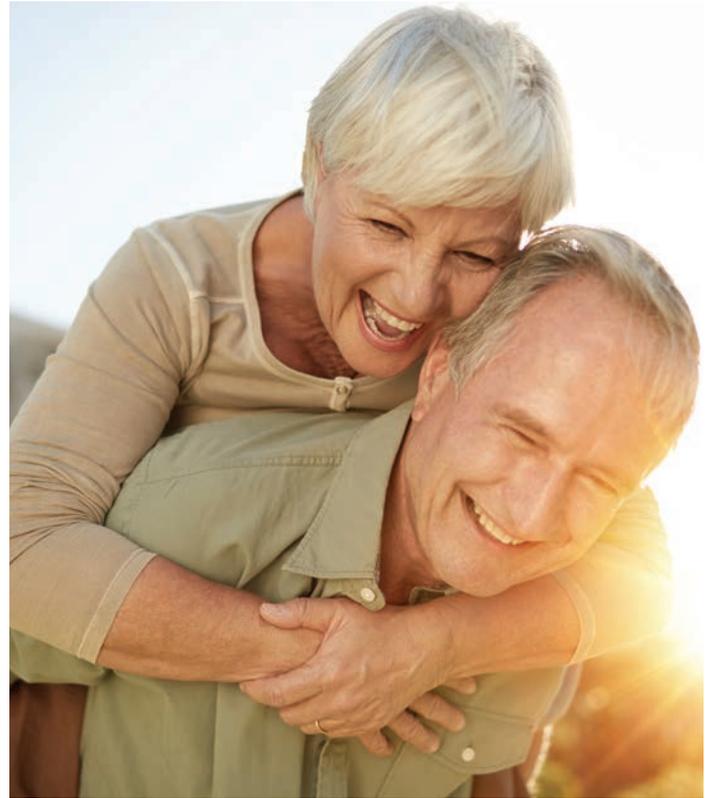
So what exactly are the primary symptoms? The main symptom is pain while sitting. You may feel amazing in the morning until you sit for coffee or drive to work. You get better with lying down.

Pain can be stinging, burning, stabbing, aching, knife-like, irritation, cramping, spasm, tightness, crawling on the skin, twisting, pins and needles, numbness and hypersensitivity. The initial constriction is often caused by pressure or trauma. As the nerve swells, it encounters a natural constraint. Stretching or rubbing of the pudendal nerve can also cause pudendal nerve entrapment.

What are the treatment options? One of the best treatment options for non-surgical relief for this chronic pain is the Pudendal Nerve Block. Pudendal nerve blocks are minimally invasive and can help not only provide comfort to pelvic pain, but this pain management technique can provide therapeutic relief by reducing pain signals originating from this nerve bundle. For cyclists, pudendal nerve blocks can offer a stable solution to pain associated with long-distance riding. Patients who have systemic conditions such as diabetes and multiple sclerosis may also benefit from the Pudendal Nerve Block procedure.

How does it work? A pudendal nerve block is performed with X-ray guidance to increase the accuracy and safety of this procedure.

- You will be asked to lie on your stomach
- Your lower back and buttocks will be cleaned with an antiseptic, and a sterile drape will be placed
- Your physician will direct a guide needle toward the intended target area under X-ray guidance. Bony landmarks easily visible under live X-ray guidance will help facilitate safe placement of the needle.
- A local anesthetic and a steroid medicine will be administered in close proximity to the nerve to block signals from reaching the brain. The cortisone serves as an anti-inflammatory under the assumption the nerve is inflamed or irritated.



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**This procedure is safe. The most common side effect is temporary pain at the injection site. Fortunately, serious side effects and complications are uncommon.**

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- The needle is then flushed and withdrawn, and a dressing is placed over the point of the needle entry.

Are there any risks? This procedure is safe. The most common side effect is temporary pain at the injection site. Fortunately, serious side effects and complications are uncommon.

Don't suffer in silence any longer! Friends, family and close loved ones can play a huge role in helping you cope, thereby maintaining the best quality of life possible. Remember to talk to your University Pain Medicine Center Physician to seek the solution you desire!

# BARE NECESSITIES: Combatting Arthritis in Winter

**I**f you have arthritis in your hands, winter is often the worst time of year. Your wrists and hands contain more than 25 joints combined, and the more joints an area has, the more structures arthritis can affect.

When your hands are cold, muscles, ligaments, tendons and joints do not move as easily as they do when they are warm. Arthritic joints can become stiff because joint fluid isn't moving as freely as it is supposed to. Joint fluid reacts to cold just like the oil in our vehicles: As it gets chillier, the fluid becomes thicker and does not move as easily.

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**Having liners in the mittens will keep your hands nice and warm in temperatures well below zero.**

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Winter weather often exaggerates the painful sensations for a number of reasons. But, there are many things you can do to prevent pain and discomfort from settling in your hands during the winter. Some of these are common sense, while others require more effort to prevent arthritis discomfort.

Here are three excellent tips for reducing arthritis pain throughout the cold winter months.

## Select Mittens Over Gloves

First, keeping your hands warm during the winter is the best way to prevent arthritic flare-ups. If you need to go outside, always wear adequate hand protection. Begin wearing gloves when the temperature gets below

50 degrees Fahrenheit to maintain the warmth of your hands and combat joint stiffness. Mittens are often better than gloves for optimal heat maintenance. Gloves separate your fingers and can lose their effectiveness in temperatures below about 25 degrees. Having liners in the mittens will keep your hands nice and warm in temperatures well below zero.

## Slather on Medicated Creams and Lotions

Your joints, muscles and ligaments in your hands and wrists are quite close to the skin. Using lotion to keep your skin moist and prevent cracking during the winter also helps prevent joint discomfort. Medicated creams may also help, because they usually have additives that help decrease pain. Aspirin cream and creams that contain anti-inflammatory agents, can be extremely effective for hand joint pain; they have minimal to no systemic effect on the body and are safe when taken with other medications, like blood thinners. For significant relief of hand pain, use medicated creams up to four times per day.

## Warm Water

For relief and to help your blood circulate quickly in your hands, head over to the sink and soak your hands in warm water. Doing the dishes or simply running warm water over your hands and rubbing them together will loosen them up--making them more comfortable. If warm water works well for you, consider investing in a home hot-paraffin bath, or treat yourself to a warm-wax hand treatment. The wax has a small amount of oil in it that moisturizes your skin and keeps your hands supple.



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# Are you constantly in pain? Still searching for relief?

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