For Neck Pain & Headache

A cervical radiofrequency denervation (RFD) is an outpatient procedure for treating neck, head, shoulder, and upper back pain. It is also called cervical facet thermal coagulation or rhizotomy or radiofrequency ablation. This information sheet will explain what it is. Your doctor can explain if it is for you.

What are cervical facet joints?
Facet joints connect the vertebrae, the bones of the spine. They help guide your spine when you move. The neck area of the spine is called the cervical region. It contains seven vertebrae.

Facet joints are found on both sides of the spine. Each is about the size of a thumbnail. Cervical facet joints are named for the vertebrae they connect and the side of the spine where they are found. The right C2-3 facet joint, for example, joins the 2nd and 3rd cervical vertebrae on the right side.

Medial branch nerves are found near facet joints. They communicate pain from the facet joints. They tell the brain when a facet joint has been injured or is inflamed.

What is cervical facet joint pain?
You may feel pain if a cervical facet joint is injured or inflamed. Sometimes it feels like muscle tension. Other times it can be severe pain.

The cartilage inside the joint may be injured. Other times only connecting ligaments or nerves surrounding the joint are injured.

Facet pain also depends on which joint is affected. Cervical facet joint pain can occur in an area from your head down to your shoulder blade. The diagram shows areas of pain usually associated with cervical facet injuries.

How do I know if I have cervical facet pain?
If you have pain in one or more of these areas you may have cervical facet pain. Common tests such as x-rays or MRIs may not show if a facet joint is causing pain. The best way to diagnose facet pain is to block the pain signal in a medial branch nerve. This is an outpatient procedure.

What is a cervical RFD?
RFD uses radiofrequency energy to disrupt nerve function. When this is done to a cervical medial branch nerve, the nerve can no longer transmit pain from an injured facet joint.

What happens during an RFD?
An RFD may start with an IV (medicine given intravenously) to help you relax and put you into a twilight sleep. A local anesthetic will be used to numb your skin.
The doctor will then insert a thin needle near the facet joint. Fluoroscopy, a type of x-ray, will be used to position the needle. The doctor will then check to make sure it is at the correct nerve by stimulating it. This may cause muscle twitching and provoke some of your pain.

Once the needle is properly placed, the area will be numbed. Radiofrequency energy will then be used to disrupt the medial branch nerve. This is often repeated at more than one level of the spine.

**What happens after an RFD?**

You will be monitored for at least 30 minutes after the RFD. When you are ready to leave, the clinic will give you discharge instructions. Take it easy for the rest of the day and do not drive.

You may feel sore for one to four days. This is normal. It may be due to muscle and nerve irritation. Your neck may feel numb, weak, sensitive or itchy for a couple weeks. Full pain relief normally comes in two to three weeks.

**How long can I expect pain relief?**

Nerves regenerate (grow) after an RFD, but how long this takes varies. Your pain may or may not return when the nerves regenerate. If it does, another RFD can be done.

*This pamphlet is for general education only. Specific questions or concerns should always be directed to your doctor. Your doctor can explain possible risks or side effects.*