Radiofrequency is a procedure that uses heat to block a nerve. This is not a permanent block as the nerve, once successfully heated, can still grow and thus the pain may come back in the future. Success varies in patients and a radiofrequency ablation requires a prior successful facet joint injection and/or a median branch block. Radiofrequency uses a heating element from the high radio frequency signals (much like a microwave heats food).

WHAT ARE THE RISKS?

- Bleeding.
- Infection.
- Long-term numbness.
- Paralysis.
- Nerve injury.

HOW DOES THE PROCEDURE WORK?

The procedure is performed much like a facet joint injection. The needle is placed near the area of the joint where the nerve is located. A stimulator unit is placed over the nerve to reproduce the pain. If the stimulation does not give a strong response, the needle is repositioned and the nerve is again re-stimulated. This may take a few attempts to ensure that the nerve that is responsible for the pain is identified. Once the appropriate location of the needle is found, a medication is placed to prevent inflammation and pain when the radiofrequency is turned on. The radiofrequency is done for 90 seconds. A warmth or heat may be felt during the procedure. If the procedure is successful, pain relief may vary from four to six months or more. If the pain returns before this time, the radiofrequency did not cover the entire nerve. The procedure can then be repeated to attempt further blocking the nerve.