

Racz Epidurolysis Procedure

Information

What is an Epidurolysis (RACZ) Procedure?

Epidurolysis, also known as the RACZ Procedure is a technique used to dissolve some of the scar tissue from around entrapped nerves in the epidural space of spine. There are number of ways that this can be undertaken.

What causes this scarring (adhesions) around the nerve fiber?

Scarring or healing tissue is a normal response to any surgical intervention. Scarring is most commonly caused from bleeding into the epidural space following back surgery and the subsequent healing process.

Sometimes scarring can also occur when a disk ruptures and its contents leak out. This material causes a local reaction. This issue occurs when this scarring tissue forms around or near the nerve fibers

What is the purpose of the RACZ procedure?

The aim is to allow medications to reach affected nerves so that pain and other symptoms may be diminished.

How long does the procedure take?

This procedure takes up to 30 minutes. You will need to rest for approximately 30 minutes before you will be allowed move around and to go home

What is actually injected?

The injection consists of a mixture of local anesthetic (like lidocaine or bupivacaine) and the steroid medication. In additional as well as x-ray contrast dye to visualize scarred space and hyaluronidase—and concentrated sterile salt solution to soften scar tissue will be used.

Will the injection hurt?

The procedure involves inserting a needle through skin and deeper tissues, there is some discomfort involved. However, we numb the skin and deeper tissues with a local anesthetic using a very thin needle prior to inserting the RACZ needle. The patients will not receive intravenous sedation as your doctor will need to ensure he is targeting the most painful area to maximize the outcome.

What should I expect after the injection?

Immediately after the injection, you may feel your legs / arm slightly heavy and you may feel a “numb” sensation. Also, you may notice that your pain may be gone or quite less. This is due to the local anesthetic injected. This will last only for a few hours.

Typically the procedure involves the following steps:

- ✓ **This procedure takes about 30 minutes**
- ✓ **Sedation it is not used as you need to confirm the correct and safe position of the device in for your physician in order to maximise the long-term outcome.**
- ✓ **You will lie on an examination table and the area examined under x-ray guidance.**
- ✓ **The area's to be injected will be cleansed with antiseptic solution then numbed with a local anaesthetic. This will help numb the area**
- ✓ **A needle will be inserted with x-ray guidance to ensure proper needle placement after which a mixture of local anaesthetic and steroids are injected.**
- ✓ **Once the needles are positioned you will be asked some simple questions about what you feel (pressure / pins& needles) in the affected area. This will help your consultant ensure the needle is in the best position to treat your pain**
- ✓ **Often the patient will experience immediate relief merely from the local anaesthetic, but this wears off in a few hours.**
- ✓ **After the injection the patient is placed in an observation area for 20 minutes to watch for adverse reactions.**
- ✓ **Once you are able to stand and walk you will be able to leave**

Important things to remember about your procedure

- a) Your buttock / legs / arm may feel “heavy”. This is from the local anaesthesia. It will wear off gradually but walking may seem difficult.
- b) It is normal that the pain may increase in intensity over the first 10 days after the injection.
- c) Bruising may be present in the area where the injection was placed
- d) Infection is rare but if it feel hot / swollen please ask your GP to review.
- e) Allergy to injected medication is unusual.
- f) The steroid may result in facial flushing (redness), altered menstrual cycle, raised blood glucose level (if you are a diabetic) and sometimes insomnia.
- g) Generally you can return to light activity within 24 hours. Avoid excessive activity / heavy work for 48 hours after the procedure.
- h) Be sure to use you analgesics during this time to help recovery.
- i) Remember it may take 4 weeks before you feel any improvement

What risks or side effects are there?

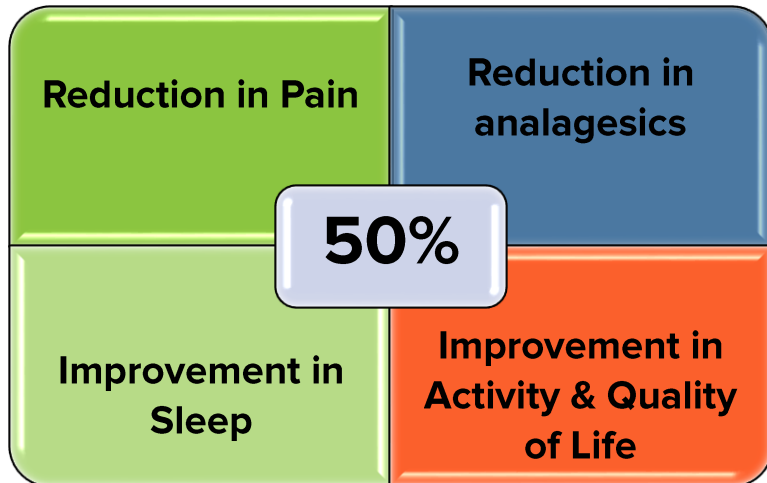
Following Epidurolysis there is a risk of:

- ✓ 20% risk of increased pain following the procedure that may last 3-5 days
- ✓ 5% Transient numbness or leg heaviness
- ✓ 2% Low blood pressure
- ✓ <1% Headache
- ✓ <1% Infection
- ✓ Other minor issues bruising and swelling in the injection area, light bleeding at the injection site, tissue deterioration from the steroid over a period of time if the same location is injected repeatedly, and there is a small risk of infection if the injection site is not kept clean until it heals.

What are the long-term Goals?

Your consultant will give you guidance on what the expected outcome might be after your procedure.

In general, there can be a number of positive outcomes which might include:



Other issues:

When can I return to work?

- ✓ You should be able to return to your work the day after the procedure. The most common thing you may feel is a sore back.

How long the effects of the medication last?

- ✓ The immediate effect is usually from the local anesthetic injected. This wears off in a few hours. The cortisone starts working in about 24 to 48 hours and its effect can last for several days to a few months.

How many times do I need to have this procedure performed?

- ✓ If the first procedure does not relieve your symptoms in about a week to two weeks, you may be recommended to have one more procedure. If you respond to the second procedure and still have residual pain, you may be recommended for a third procedure.

Who should not have this procedure?

- ✓ Each case will be assessed on its own merits. In general, if you are allergic to any of the medications to be injected, if you are on a blood thinning medication (e.g. Coumadin®), or if you have an active infection going on, you should not have the injection.

What should you do next?

If you feel you suffer this chronic pain please contact us and we can start to make a plan to help you get back in control

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Disclaimer: This information is to assist individuals understand the procedure and it should not replace the opinion of the pain consultant