

Spinal Cord Stimulator/Dorsal Root Ganglion Stimulation Trial

General Information

Your health care provider has determined spinal cord stimulation/dorsal root ganglion stimulation may be helpful in treating your chronic pain condition. Spinal cord stimulation is a method of neuromodulation or changing the perception of your pain by stimulating nerves. The spinal cord stimulation therapy is a pacemaker-like device that can treat your pain by eliminating it, or by replacing the pain with a warm, pleasant, tingling sensation overlying your painful area. The purpose of the trial is to see if it is helpful in treating your pain. Once the trial procedure is performed, you are discharged to home with the trial system for up to a week, with a planned easy and simple removal in the office. The purpose of the trial is to try and answer a few questions:

- Does it help your pain?
- Are you able to function better?
- Are you able to take fewer pain medications?
- Is your mood and/or sleep improved?

Once the trial is over, you and your health care provider will discuss the next steps in your pain care plan.

Spinal cord Stimulation therapy has been used to treat a variety of disorders, including:

- Back pain
- Leg pain/Sciatica
- Neck pain
- Arm pain (radiating from the neck)
- Spinal Stenosis
- Herpes Zoster/Post herpetic Neuralgia
- Disc pain
- Abdominal and pelvic pain
- Face pain
- Headache
- Ischemic pain
- Angina
- Phantom limb pain

Procedure Information: What to Expect

Prior to the injection appointment, there may be some medications that need to be stopped, and your health care provider will discuss these with you. They could include blood-thinning (anticoagulant), antiplatelet medications and/or anti-inflammatory medications such as aspirin, Xarelto, Coumadin, Plavix etc.

You may also undergo blood and urine testing to test for infections prior to proceeding. You will be given a special Hibiclens wipe and soap to use on the day prior to your trial.

The procedure is performed in the office. After arrival and check in, you are brought to the pre-operative area where you will be placed in a gown. An IV will be placed in your arm at that time for preoperative antibiotics. Then, you will be escorted to the procedure room. You will lay on your stomach (facing down) with your back or neck exposed. An X-ray/fluoroscope is used to see the

bones to guide needle placement. After a cold, cleaning solution is placed on your skin, it is important not to touch the area. You will then feel a pinch and a burn (much like a bee sting), which is the local anesthetic (numbing medicine). After that, you will feel a pressure and a poke. Once the epidural space is accessed, the leads are advanced into the epidural space and they are turned on, which will create a tingling sensation. Your doctor and the device representative will talk with you to ensure proper lead placement. Once the area that is painful is confirmed and covered, the leads are secured with small sutures and a sterile dressing is placed. You will have an external battery device located in a small pouch which will be placed on your back. This device allows small electrical energy to be delivered to the leads during your stimulator trial.

You are then escorted to the post-operative area where you will be monitored for up to 30 minutes after the injection. Your device will be programmed by the device representative and you will be shown how to control the device during your trial. When you are ready to leave, the staff will give you discharge instructions and help you make a follow up appointment if one hasn't been made already.

Post-Procedure Instructions

What should I do after the trial?

- Recommend taking it easy for the rest of the day
- You **MAY** do normal routine activities such as return to work, do household tasks etc.
- It is encouraged that you are active and attempt to do the activities that are typically hurtful. **DO NOT** do strenuous activities
- **Limit activities that require repetitive bending at the waist, twisting or lifting >10 lbs. This is to prevent the leads from moving which can impact how well the stimulation works**
- Resume all medications as instructed by your provider. **You will need to continue to stop your blood thinning and antiplatelet medications throughout the trial.**
- Take prescribed oral antibiotics as directed by your provider
- Wear the abdominal binder when doing activities or sleeping to prevent the leads from shifting
- You should **NOT** shower during the trial. **Sponge bath is OK as long as dressing area is kept dry**
- Keep a log of your pain scores, ability to perform activities of daily living (cleaning, showering, eating, climbing stairs etc.), mood, sleep and function
- Keep post-operative appointment to report relief

When will I notice relief?

- You will likely have soreness from the needle placement and thus use of ice, Tylenol, NSAIDs, muscle relaxants may be helpful in the first 24-48 hours after the trial
- Relief from the stimulation may be felt as soon as the first day but can take up to 2-3 days for it to be noticeable
- **Intended relief is >50% improvement in pain and quality of life (sleep, mood, function)**

What follow up do I need?

- Day 2 or 3 of the trial: Mid-trial evaluation to ensure electrodes are still well positioned, dressing is intact and reprogram the device if needed
- Day 5-7: Office visit to remove the electrodes and discuss next steps

Please contact our office (815) 398-9491 if you experience:

- Significant weakness in the arms or legs for more than 24 hours
- Redness or swelling around injection site for more than 24 hours
- Bladder or bowel accidents and/or numbness around the groin
- Fever or chills