

Lumbar Spinal Image-Guided Pain Management Injections

Low Back Pain is a common ailment, accounting for one-third of worker's compensation costs. Most episodes of back pain (up to 90 percent) improve on their own within a month or so, with about six to ten percent going on to have chronic pain. However, patients can experience significant pain and suffering. We provide a range of image-guided techniques to help the clinician manage back pain and shorten recovery time.

Overview of Techniques

Transforaminal epidural

Medication is delivered to the epidural space through the neural foramen. This approach targets the affected nerve root to decrease pain and inflammation. This procedure is useful for low back pain with or without radicular symptoms. One study showed 85 percent improvement at one week; 43 percent at three months. (Photo 1)



Prone oblique view of right L4-L5 facet injection

Facet joint injection

Paraspinal back pain with non-radicular extension to buttock or thigh may be due to irritated facets. In one study, pain relief was immediate in 54 percent and long-term in 21 percent.

(Photo 2)



Prone view of right L4-L5 transforaminal epidural injection

Caudal epidural injection

Injection via the sacral hiatus provides an alternative route in patients with prior spinal fusion or for multi-level lumbosacral symptoms. (Photo 3)



Prone view of caudal epidural injection

Continued on reverse...

Dear Colleague:

I'm pleased to send you the latest issue of "Update" from Everett Radia Imaging Center. Six times a year, we will send you information about the benefit of the state-of-the-art technology and expertise we provide. Your questions/comments are welcome. My cell phone number is (425) 422-0300.

Ben Harmon, M.D., Medical Director

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Indications

- Diagnostic maneuver to determine if a single compressed or deformed nerve root is the source of pain. Nerve root compression on MRI does not always mean the compressed nerve root is the source of pain.
- Assessment of degenerated lumbar spine facets. Some degenerated facets cause pain - some don't. Injecting an abnormal facet will help determine if it is the source of pain.
- Better results from physical therapy. If the patient's pain is alleviated, they are better able to cooperate with therapy.
- Short-term pain relief. With acute pain relief, some patients may be fully rehabilitated without the need for surgery.
- Ongoing treatment for patient with focal spine pain who have contraindications for surgery. Some patients have long-term relief with a single spinal injection.

Injection of steroid and anesthetic agents provide rapid relief of pain for many patients. With imaging guidance, each procedure is customized to meet your patient's specific needs.

Benefits include:

- Decreased pain and suffering
- Early return to work
- Improved cooperation with physical therapy
- Pre-surgical evaluation
- Chronic pain management with periodic injection

Patient experience

- Convenient free parking, close to entrance
- Little or no waiting
- NEW Saturday hours for MRI
- Every patient treated with respect and dignity by our dedicated, experienced staff

Most insurances cover lumbar spine pain injections. Radia accepts most insurance plans. In addition, we perform ALL insurance verification and preauthorization for EVERY PROCEDURE at Everett Radia.

Did You Know...?

New combined PET/CT scanning technology shows significant improvement over CT and PET in staging tumors.

In one study, 260 patients, 84% (218 patients) were correctly staged with FDG-PET/CT, as compared to 76% (197 patients) in PET and CT side-by-side analysis, 63% (163 patients) in CT alone, and 64% (166 patients) in PET alone. The findings were presented at the Society of Nuclear Medicine's 51st Annual Meeting in June 2004.

— www.brightsurf.com/news/june_04/SNM_news_062104.php

PET/CT is available at Evergreen Radia Imaging Center, 11521 NE 128th Kirkland, WA. Call (425) 952-6111 to schedule.



New research indicates that MRI is more sensitive than mammography, ultrasound, or clinical breast examination (CBE) for detecting breast cancer in women with BRCA1 or BRCA2 mutations.

In a study of 236 women, 22 cancers were detected, including 16 invasive and six in situ lesions. MRI detected 17 (77%) of these malignancies, whereas mammography, ultrasound, and CBE only detected eight (36%), seven (33%), and two (9.1%), respectively. "Our results support the position that MRI-based screening is likely to become the cornerstone of breast cancer surveillance for BRCA1 and BRCA2 mutation carriers," the researchers conclude.

— *JAMA* 2004;292:1317-1325.

Everett Radia offers MRI Monday through Friday, 7:15 a.m. to 5 p.m. and Saturday, non-contrast, 9 a.m. to 2 p.m. Call (425) 787-5660 to schedule.



"Thank you! I have always been graciously received and treated courteously."

Patient P.B. - Abdominal Ultrasound - July 2004

"Everyone was very nice and professional. I received valuable information."

Patient B.M. - MRI for lower back pain - July 2004

Need patient information? Referral forms? Directions? Check out our new website: www.radia.net

To schedule a patient at Everett Radia, please call (425) 787-5660.

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