

Epidurolysis (RACZ) Procedure FAQs

The following Frequently Asked Questions and the answers are for the Lumbar Epidurolysis (RACZ) Procedure. It is one of the most common procedures performed in this pain clinic. **The following material is given as general information only, and is not to be considered as medical advice or consultation.** The information was prepared by TPM staff.

What is an Epidurolysis (RACZ) Procedure?

Epidurolysis (RACZ) Procedure is used to dissolve some of the scar tissue from around entrapped nerves in the Epidural space of spine, so that medications such as cortisone can reach the affected areas. Dr. Gabor Racz pioneered this procedure.

What causes scarring (adhesions)?

Scarring is most commonly caused from bleeding into the Epidural space following back surgery and the subsequent healing process. It is a natural occurrence following surgical intervention. Sometimes scarring can also occur when a disk ruptures and its contents leak out.

What is the purpose of it?

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

How long does the procedure take?

The procedure requires a series of three injections. First, a catheter (small tubing) is inserted in the Epidural space up to the area of scarring. This is done in the operating room under sterile conditions using fluoroscopy (x-ray vision). Injection of medications is made via this catheter.

What is actually injected?

The injection consists of a mixture of local anesthetic (like lidocaine or bupivacaine) and the steroid medication (triamcinolone – Aristocort® or methylprednisolone – Depo-medrol®, as well as x-ray contrast dye to visualize scarred space and hyaluronidase – and concentrated sterile salt solution to soften scar tissue.

Will the injection hurt?

The procedure involves inserting a needle through skin and deeper tissues (like a "tetanus shot"). So, there is some discomfort involved. However, we numb the skin

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and deeper tissues with a local anesthetic using a very thin needle prior to inserting the RACZ needle. The patients also receive intravenous sedation and analgesia, which makes the procedure easy to tolerate.

Will I be "put out" for this procedure?

No. This procedure is done under local anesthesia. The patients also receive intravenous sedation and analgesia, which makes the procedure easy to tolerate. The amount of sedation given generally depends upon the patient tolerance. We like to communicate with the patients during the procedure to help assess the proper location of the catheter tip.

How is the procedure performed?

It is done with the patient lying on their stomach. The patients are monitored with EKG, blood pressure cuff and blood oxygen-monitoring device. The skin in the back is cleaned with antiseptic solution and then the procedure is carried out. After the procedure, you are placed on your back or on your side. X-rays (fluoroscopy) is used to assist the placement of the catheter and perform the epidurogram.

What should I expect after the injection?

Immediately after the injection, you may feel your legs slightly heavy and may be numb. In addition, 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.

When can I return to work?

Unless there are complications, you should be able to return to your work the day after the catheter is removed. 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 5 to 7 days 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.

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Can I have more than three procedures?

In a six-month period, we generally do not perform more than three procedures. This is because the medication injected lasts for about six months. If three procedures have not helped you much, it is very unlikely that you will get any further benefit from more procedures. In addition, giving more procedures will increase the likelihood of side effects from cortisone.

Will the Epidurolysis (RACZ) Procedure help me?

It is very difficult to predict if the procedure will indeed help you or not. Generally speaking, the patients who have recent scarring (e.g. following back surgery) respond better.

What are the risks and side effects?

Generally speaking, this procedure is safe. However, with any procedure there are risks, side effects, and possibility of complications. The most common side effect is pain – which is temporary. The other risks involve spinal puncture with headaches, infection, bleeding inside the Epidural space with nerve damage, worsening of symptoms etc. The other risks are related to the side effects of cortisone: These include weight gain, increase in blood sugar (mainly in diabetics), water retention, suppression of body's own natural production of cortisone etc. Some of the patients may develop allergic reaction to hyaluronidase. Fortunately, the serious side effects and complications are uncommon.

Who should not have this procedure?

If you are allergic to any of the medications to be injected, if you are on a blood thinning medication (e.g. Plavix[®], Coumadin[®]), or if you have an active infection going on, you should not have the injection.