

TPM

Therapeutic Pain Management Medical Clinic

Redding Anesthesia Associates Medical Group

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The following Frequently Asked Questions and the answers are for IntraDiscal ElectroThermal Therapy Procedure. The following material is given as general information only, and is not to be considered as medical advice or consultation.

What is IDET (IntraDiscal ElectroThermal™ Therapy)?

IntraDiscal ElectroThermal Therapy is a recently developed technique for the treatment of pain coming from a spinal disc. A special probe is inserted into the disc and heated. This causes the collagen in the disc wall to contract, thicken, and may numb the nerves in the wall of the disc.

Am I a candidate for IDET?

If you have back pain from a damaged disc (discogenic pain) that does not respond to less invasive therapies, you may benefit from an IDET procedure. Most back pain gets better on its own in the first month or two, so TPM physicians do not consider IDET until at least a month after the onset of back pain. Also, if your back pain is not severe enough to limit your activities, you probably should not have IDET.

Is there anything else I should try before thinking about IDET?

Before considering IDET, you should try less invasive treatments such as anti-inflammatory medications, physical therapy and epidural steroid injections.

How do I know if my pain is from a damaged disc?

With age or from an injury, the wall of the spinal discs can get cracks (fissures). This condition is called Internal Disc Disruption or Degenerative Disc Disease. Also, the wall can weaken and bulge out (a herniated disc). When the disc causes pain, the pain is usually felt as a deep, aching pain in the back and sometimes in the buttocks and into the thigh. However, pain from facet joints in the back and from the sacroiliac joints (SI joints) can be in the same location and feel the same. The best way to tell if the pain is from a damaged disc is with discography. (See TPM's FAQs on discography for more information.)

Is this the same pain as sciatica?

Sciatica is pain that shoots down the leg from an irritated nerve. Often the nerve irritation is caused by a herniated disc. IDET would not directly treat the sciatica and is not currently recommended for patients with sciatica.

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Can all painful discs be treated with IDET?

IDET may not be appropriate if the disc is very narrowed, if the spinal canal is narrowed, if the spine is unstable, or if you have various general health conditions. Painful discs in the neck cannot be treated with IDET, only in the low back.

How long does the IDET take?

It takes about 60 to 90 minutes for IDET on one disc, about 2 hours for two discs.

How is it actually performed?

IDET is usually performed as an outpatient procedure. The procedure is performed in the operating room to maintain sterility. You lie face down on a x-ray table. Local anesthesia and mild sedation will be used to make you more comfortable during the procedure. Using fluoroscopy (x-ray), a needle is inserted into the disc and through the needle a flexible catheter is positioned in the disc. Once in proper position, this catheter is heated for about 17 minutes. When done, the catheter and needle are removed and you are ready to go home about a hour later with a Band-Aid over the needle insertion site.

Will the procedure hurt?

Local anesthesia and mild sedation will be used to make you more comfortable during the procedure. During the heating, you may feel a reproduction of your usual lower back pain. This is an excellent sign that the heating is being done in the correct area.

Will I be "put out" for this procedure?

IDET is usually performed as an outpatient procedure. Local anesthesia and mild sedation will be used to make you more comfortable during the procedure. You will need to be awake enough to tell your physician what you are experiencing during the procedure.

What should I expect after the procedure?

You will probably have a flare-up of your back pain for a few days —sometimes up to a week. You will be advised to use ice packs initially and you may need extra medication during this period. Almost everyone is back to at least their usual level of pain within a week.

When will my pain get better?

Your pain should gradually improve over the weeks and months following the IDET. Improvement can occur as long as 6 to 12 months after the procedure.

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What should I do after the procedure?

This procedure is normally a day-procedure. Some patients may be kept overnight for observation. You will need to have a ride home. You will need to wear a special corset that will support your back and limit your motion. It is very important to limit your activities after the IDET to allow the disc wall to stiffen and heal. You will be given detailed instructions after the procedure.

How successful is IDET?

At this time (Fall, 1999), approximately 5000 patients have had IDET in the US. The national success rate for improvement in pain and function is about 70%. Success is considered at least a 50% improvement in pain. Results in Redding seem to be at least that good.

What are the risks of IDET?

Of the 5000 patients who have had IDET nationally to day, no serious or permanent injuries have been reported. But there are always risks. Infection in the disc is a possibility and is a terrible condition, so very careful sterility is used along with antibiotics. Bleeding requiring emergency surgery and nerve damage are also possible risks. There is also the risk that it may not help your pain or may make it worse. There are always possibilities of unknown risks or reactions. Please discuss your concerns with your physician.

What are the alternatives to IDET?

If you have disc pain, the alternatives are to treat the pain conservatively with medication, physical therapy and epidural steroid injections or to have a surgical spinal fusion.

Who should not have this procedure?

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 procedure.

Where can I get additional information?

Additional information is available at the Oratec® Web Site @ www.oratec.com

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