

Possible Risks and Complications

As with any other invasive test, there are associated risks and possible complications.

- A feared complication is a disc space infection, which can be very difficult to treat and require long term intravenous antibiotics. Fortunately, by using very strict sterile techniques this is a very uncommon complication.
- Nerve injury is possible including weakness and bowel or bladder control problems. This is rare.
- Spinal headache is also a risk.
- Occasionally the procedure may cause an exacerbation of your pain. This may take days to weeks to stabilize. If this occurs your doctor may be able to offer you other treatment to reduce the pain level.

Summary

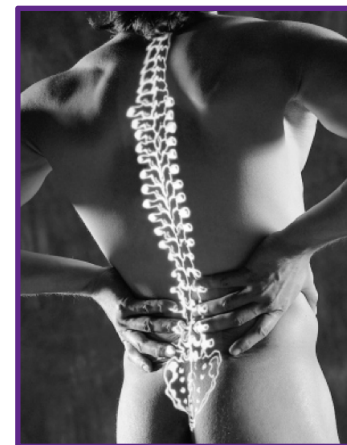
A discogram is a preoperative study designed to determine if an intervertebral disc is a pain generator. The initial needle placement need not be painful. If pressurization of a disc causes a familiar pain, then surgical disc replacement or obliteration (fusion) of the pain generator(s) may be a treatment option for you.



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Discogram Procedure



A discogram is a technique for diagnosis of back and neck pain.

**Pain management is a *process*.
Your treatment is tailored to your special needs.**

A discogram is a diagnostic procedure that allows a doctor to determine the source of a patient's pain. This brochure explains the procedure, why it works, how you can prepare, and how you can expect to feel after the procedure.

**ADVANCED DIAGNOSTIC
PAIN TREATMENT CENTERS**

What is a Discogram?

The discogram is used to confirm or exclude the disc as pain generator. It is the bridge between the anatomy seen on your imaging and your pain. Imaging does not show pain, it shows anatomy. That is the role of the discogram.

The discogram is performed on the degenerative disc levels seen on your imaging. In addition, usually one control level is selected.

A full history and physical examination with emphasis on identifying pain generators and understanding baseline neurological function is performed prior to the study.

The Procedure

The procedure is performed with sedation in a surgical suite. Light sedation is used to make the needle placements more comfortable for you. You must be fully awake for the disc contrast injection to communicate your experiences with the doctor. The sedation may interfere with your memory of the procedure, but even with sedation, you are responsive to questions and external stimuli throughout.

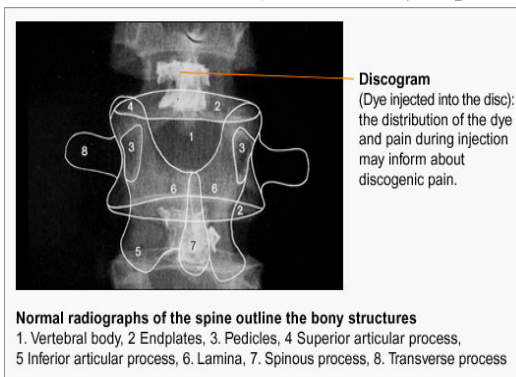
The procedure is performed with a fluoroscopic (x-ray) unit. This provides guidance for the needle placement. Prior to receiving the sedation, care will be taken to position you so that proper images can be obtained. You will be positioned on your stomach.

Then your back is thoroughly cleansed and sterile drapes are applied. Strict sterile procedures will be followed to minimize the risk of infection. A local anesthetic numbs the skin and soft tissue. When these tissues are numbed an introducer needle is directed through the skin. A second needle will be used through this introducer for placement into the disc.

This needle is advanced towards and eventually into the center of the disc. This process may be mildly uncomfortable. Occasionally the nerve root can be touched by the advancing needle. This is not dangerous, but you should let the doctor know if you experience any sensation into the arm (cervical discogram), or leg (lumbar discogram) so that the needle can be repositioned.

Pressurizing the Discs: The Diagnostic Portion of the Procedure

Once the needles are placed, the discs are injected with a solution of sterile contrast dye. Your reaction to his injection is very important.



The injection may provoke pain. We are interested in whether this pain reproduces your usual daily pain. If so it is called **concordant pain**. We will ask you where you feel the injection pain and compare that to your usual pain. **We might ask you to rate the similarity of your pain to the injection pain as a percentage.**

PLEASE BE AS PRECISE AS POSSIBLE.

After the Procedure

After the procedure the needles are removed and usually, a post-discogram CT is obtained to document the internal architecture of the disc. The procedure usually takes about an hour to perform.

You may have soreness from the needle punctures that lasts several days. You may use Tylenol or ibuprofen for this discomfort. You may apply ice for the first 24 hours. If there is strong pain left over from a positive discogram, you may be prescribed short term narcotic pain medication for post procedure use. Please use this medication strictly as prescribed.