

## Epidural Lysis of Adhesions

<b><i>What is it?</i></b>	Lysis of adhesions is a procedure to reduce the compressive effects of scar tissue (adhesions) in the spinal canal. This technique is accomplished by the use of a catheter (tube) which physically breaks up scar tissue as well as medications that help to soften scar tissue. It is done with the use of a fluoroscope (x-ray machine) to assist the physician in placement of the catheter.
<b><i>Why is it done?</i></b>	The procedure is performed when scarring is suspected to be the cause of lower back and leg pain. Most patients who undergo this procedure have had prior lumbar (lower) spine surgery. Patients who have developed scarring in the spinal canal due to other medical conditions may also benefit from this procedure. Patients usually undergo an epidural injection (the donut shaped space that surrounds the spinal canal) that reveals an obstruction to the flow of dye seen under x-ray. If the obstruction (blockage) of dye corresponds to the specific nerve the pain is coming from, then they may be a candidate for this procedure.
<b><i>How is it done?</i></b>	Prior to the start of the procedure an intravenous (IV) catheter (tube) is placed in your vein. When you are in the procedure room, you will be asked to lie on your stomach on a cushioned x-ray table. You will receive conscious sedation through your IV. Conscious sedation includes medication to help you relax, but it will not put you to sleep. A small needle is used to inject a local anesthetic (numbing medication) to numb the skin; this may sting for a few seconds. Next, a needle will be placed either near the tailbone or to the side of the spine in the low back area. A small catheter is then guided through to where the obstruction is. Next, there will be mechanical agitation of the area to try to break up the scar tissue. Then a solution of local anesthetic, cortisone derivative (anti-inflammatory medication) and saline is injected to maintain patency after the lysis. Normally, dye injected after the procedure will show good flow through the previously described defect.
<b><i>Is there any preparation?</i></b>	You will be receiving conscious sedation medication through your intravenous (IV) to help you relax. You <b>MUST NOT EAT OR DRINK AFTER MIDNIGHT</b> . You may, however, take your medication with a <b>small sip of water</b> .
<b><i>What to wear?</i></b>	Please wear loose, comfortable clothing. Please leave all jewelry and other valuables at home.
<b><i>How long does it take?</i></b>	We ask that you arrive 30-45 minutes before the scheduled time of your procedure. The procedure lasts about 30 to 45 minutes, and you will be in the recovery area about 30 to 60 minutes.
<b><i>What are the possible side effects of steroid medication?</i></b>	Administration of steroid medication can cause side effects. They include, but not limited to: hyperglycemia (increased blood sugar), sweats, hot/cold flashes, flushing of the face, hypertension (increased blood pressure), osteoporosis, insomnia, mood swings and Cushing's Syndrome.
<b><i>Risks of this procedure include, but are not limited to:</i></b>	<ul style="list-style-type: none"> <li>*Pain in the area where the needle(s) was inserted, this can last for two to three days. This can be treated by using ice and mild analgesics (pain medication) such as Motrin, Naprosyn or Tylenol.</li> <li>*If you ever had an allergic reaction to contrast or anesthesia, you must tell your doctor before the procedure is done.</li> <li>*Tell your doctor before the procedure if taking blood thinners, have a blood disease that affects clotting, have a bowel obstruction and or have an uncontrolled infection.</li> <li>*A reaction to the local anesthetic or dye. These reactions usually do not require further treatment.</li> <li>* Temporary numbness or weakness in one or both legs. This is normal. You should have assistance with walking and should not drive for 24 hours.</li> <li>*Shearing of the catheter which could result in surgical removal.</li> <li>* Bleeding in the injection area.</li> <li>* Infection in the injection area.</li> <li>* Increased pain</li> <li>* Nerve damage, paralysis, stroke and even death.</li> </ul>

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**PLEASE SEE THE BACK FOR YOUR INSTRUCTIONS**

## Instructions Regarding Your Procedure

### **Epidural Lysis of Adhesions**

Will I receive a pre-procedure phone call?	A nurse from our office will call you 24-48 hours prior to your procedure. She will ask you a few important medical questions, <b>AND</b> she will confirm your appointment. We must have <b><u>a verbal confirmation from you 24-48 hours prior to your procedure.</u></b> Failure to return our call could result in your procedure being rescheduled.
Where can I obtain more procedure information?	Please visit our website <a href="http://www.nyspineandwellness.com">www.nyspineandwellness.com</a> . It contains demonstrations of some of the procedures we offer. We also have other helpful information.
Can I drive home from the procedure? <i>*the box with a check applies to you</i>	<input type="checkbox"/> You <b><u>MUST</u></b> have a ride home, and your driver should remain on site. You must not drive or operate heavy machinery for 24 hours.
Can I eat Breakfast?	<input type="checkbox"/> No, <b><u>DO NOT EAT OR DRINK AFTER MIDNIGHT.</u></b> You may, however, take your medications with a <b><u>small sip of water</u></b>
Should I stop taking aspirin?	<b>If you take ASPIRIN or products containing ASPIRIN in doses greater than 325 mg/per day, you must stop taking it 7 days prior to your procedure (examples of ASPIRIN-containing products include but are not limited to: EXCEDRIN, FIORINAL, AND ALKA SELTZER, etc).</b>
Can I take the aspirin prescribed for <u>cardiac</u> and or <u>stroke prevention</u> ?	<input type="checkbox"/> Yes, you can continue to take your aspirin for cardiac or stroke prevention, not to exceed 325mg per day.
Can I take my blood thinner? <i>*the box with a check applies to you</i>	<input type="checkbox"/> Our provider has advised you on the number of days to hold the blood thinner you take. <input type="checkbox"/> Our provider will have to contact the Doctor who has prescribed the blood thinner for you to learn how long it is safe for you to be off the medicine prior to your procedure. One of our nurses will call you when we have obtained that information.
Can I take my other medications? <i>*the box with a check applies to you</i>	<input type="checkbox"/> Yes, except for <b>blood thinners.</b> <input type="checkbox"/> Yes, only with a <b><u>small sip of water,(you must not take your blood thinner)</u></b>
What time is my procedure?	You will receive a phone call one or two business days prior to your procedure to remind you of the time you should arrive for your procedure (usually 30-40 minutes prior to the scheduled time) and the location. <b>PLEASE BE ON TIME.</b> <i>*some patients may receive a call to confirm insurance information.</i>
How long will it take?	We ask that you plan <b><u>1½ -3 hours</u></b> from the time you arrive at the center to the time you are discharged. Please understand that circumstances sometimes arise that are out of our control, which cause a longer delay. Please plan accordingly.
What do I bring?	You <b><i>must</i></b> bring the following <b><u>each time</u></b> you have a procedure: 1. Your current insurance information 2. <b>A <i>written</i> list of all your current medications including the strength and frequency you take them.</b> Please include over the counter medication, vitamins and herbal supplements.
What shall I wear?	Please wear comfortable loose fitting clothing.
Can I wear jewelry?	No. Please leave all jewelry and other valuables at home. We are unable to store them safely. Any body- piercing jewelry must be completely removed, as this may interfere with the x-ray machine.
What do I do if I am ill or have to cancel?	Please call the office 24 hours in advance if you are unable to keep your appointment. (315) 552-6700. We do charge patients for no shows.