

Pain Interventions are provided for

- Painful spinal pathologies (facet joint cortisone vs rhizolysis, epidurals etc)
- Nerve blocks (occipital, ilioinguinal, stellate ganglion, intercostal etc).
- Neurolytic procedures for vascular problem including phenol lumbar sympathectomy (also helps some lower leg CRPS case) and cryolesioning (for scar neuroma)
- Implantable devices including spinal cord/peripheral nerve stimulators or intrathecal drug delivery system after case discussion and if funding permits.

This will not work for chronic widespread pain without clear organic pathology (“fibromyalgia”, predominant muscular pain, non specific visceral pain) or clients with significant psychosocial factors. Outcomes are poor where there is severe personality disorder, untreated psychiatric condition, drug seeking, poor pacing, unmotivated or unrealistic client expectations.

A biomedical assessment prior to consent will be completed on day of procedure.

Information Required

- Type of intervention
 - **Spinal** : epidural (radicular arm or leg pain), facet joint procedures (axial > radicular limb pain, usually one sided with positive facet loading test)
 - **Vascular** : phenol lumbar sympathectomy (PVD pain, chronic ulcer healing)
 - **Nerve blocks** : shoulder pain, occipital neuralgia, inguinal neuralgia, recalcitrant angina, CRPS
- Relevant history : diabetes, blood thinners including fish oil, NSAID
- Allergic reaction
- Previous trialled interventions / Physio or psychological input

Investigations Required

- If indicated to rule out red flags (see below)
- INR < 1.5 if warfarin need to be ceased
- Imaging has poor diagnostic utility for cause of pain unless clinically indicated and correlated

Fax Referrals to (with request for specific interventions)

Flinders Medical Centre Fax: 8374 1758 **Repatriation General Hospital** Fax: 8277 9476

Red Flags (for not having interventions)

- 🚩 Active bleeding, infection
- 🚩 Medically unstable (AMI, CVA, recuperating from major surgery)

Suggested GP Management

- Physio input for musculoskeletal pain aiming at low grade self stretches and strengthening exercise. This will minimise muscular component of pain, allowing less painful procedure and post procedural muscular pain.
- Psychology support
- [Patient procedural education](#)

Clinical Resources

- [Flinders Pain Unit Procedural information](#)
- [SAHLN Pain Management Unit Service Description](#)

General Information to assist with referrals and the and Referral templates for FMC and RGH are available to download from the SALHN Outpatient Services website www.sahealth.sa.gov.au/SALHNoutpatients

Version	Date from	Date to	Amendment
1.0	November 2014	November 2016	Original