

Pain Management Service

Sacroiliac joint denervation

What is a sacroiliac joint denervation?

The sacrum is a large, triangular bone at the base of your spine. It connects the hip bones and tailbone to form the back of your pelvis. Part of the pelvis where the sacrum and hip bone are joined together is known as the sacroiliac joint. There are two sacroiliac joints, one on either side of your pelvis.

A **denervation** is a procedure that aims to change the way pain is transmitted from nerves supplying the sacroiliac joints to the brain. These nerves are interrupted by heating (cauterising) them with an electrical current from a special device called a radio-frequency machine.

This treatment is usually carried out after other procedures, such as sacroiliac joint steroid injections, have been done.

Benefits

If with sacroiliac joint injections you had temporary pain relief, it is possible that following the denervation procedure you may experience longer-lasting pain relief (between 6-18 months).

Risks

Unfortunately no pain procedure can be risk free. There is also no guarantee that this procedure will relieve your pain.

Short term side effects include:

- Pain and discomfort at the site of the injection, which may last up to three weeks.
- Infection, bruising and bleeding



Patient Information

- There is a possibility that you may have an allergic reaction to the drugs used
- The procedure can cause numbness or a burning sensation in the buttocks and legs. This is temporary and will usually resolve.

Long term effects are uncommon and include:

- The possibility of an increase in pain
- The possibility of permanent nerve damage leading to problems such as numbness and weakness

Please discuss these with your consultant if you have any concerns

Before the procedure

- You will have the treatment as a day case.
- You will be sent an appointment to attend the Surgical Day Unit at University Hospital Coventry and Warwickshire at Walsgrave, Coventry
- You should arrange for someone to drive you home after your injection.
- Your stay on the unit may vary between one to five hours.
- Please bring a list of your current medications with you.
- You will be asked to undress and put on a theatre gown. You can keep your underwear on.
- Your doctor will discuss the procedure with you and ask you to sign a consent form. As the procedure involves the use of X-rays, female patients will be asked for details of their last menstrual period. If there is any possibility that you may be pregnant please inform the doctor or nurse.

The procedure

- The procedure is carried out under X-ray screening. This allows the doctor to identify the specific level to be treated.
- A self adhesive foil plate will be placed on your thigh; this is connected to the radiofrequency machine to make an electric circuit.
- Once you are laying in the correct position, the doctor will clean your back with an antiseptic solution which may feel cold.
- A local anaesthetic is injected at the site of the procedure. This may sting initially, before the skin goes numb. Multiple injections may be needed.

Patient Information

- It is important that you keep still during the procedure as a special hollow needle will be carefully inserted under X-ray control into the correct position. A very thin wire will then be threaded down the needle. Occasionally two needles may be used
- The doctor may ask you to say when you can feel a mild pain or twitching sensation as the machine settings are adjusted. This is very important as it makes sure that the tip of the needle is in the right place
- The machine settings will then be set to cauterise and burn the nerve by heating it for about a minute. During this period, you may experience some pain at the site of the procedure
- This process may be repeated at different levels
- A small dressing will be placed over the injection sites. This can be removed in the evening

Following the procedure

- After the procedure you will be taken to an area to recover.
- The nursing staff will observe you before going home.
- Take your regular medication and pain killers as normal.
- There may be an initial increase in discomfort before you start experiencing the pain relief. During this period you may need to increase your pain killers or require stronger pain killers. Please see your GP if your current pain killers are not working.

Please ensure that you have arranged for someone to drive you home after this procedure.

The information in this leaflet is not intended to replace your doctor's advice. If you require more information or have any questions, please speak to your doctor prior to the consent for the procedure.

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact the pain management secretaries on 024 7696 5880 and we will do our best to meet your needs.

Document History

Department:	Pain Management
Contact:	25879
Updated:	June 2022
Review:	June 2025
Version:	2.4
Reference:	HIC/LFT/1827/14

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