



No Pain is A Gain

Stormont-Vail Pain Management Clinic Offers Variety of Treatment Options

Pain: **1: punishment** **2 a:** usually localized physical suffering associated with bodily disorder (as a disease or an injury); also: a basic bodily sensation induced by a noxious stimulus, received by naked nerve endings, characterized by physical discomfort (as pricking, throbbing, or aching), and typically leading to evasive action.

—Merriam-Webster dictionary

According to the National Centers for Health Statistics, 76.2 million Americans deal with pain. As the definition implies, it feels like punishment or grief for those who suffer with it day in and day out. Pain affects people of any age. It's not just seen as a condition for the elderly. Forty-two percent of adults as young as 20 years of age and over who report pain said that it lasted longer than one year. Pain knows no particular race or gender either.

Pain may arise from an accident or injury, cancer, arthritis, other physical ailments or even emotional distress. Whatever its cause and site, pain limits the activities of everyday living and can erode a person's dignity and self-respect.

"People suffering from pain may be preoccupied with their search for relief to the point that normal relationships and activities are adversely effected," said Ian Kucera, M.D., medical director of the Stormont-Vail Pain Management Clinic. "Pain is more than a physical hardship; it is also a psychologically stressful state. But what we want people to know is that there are options available to relieve the pain they have. There is help."

Pain doesn't have to be a life-long sentence. The Stormont-Vail Pain Management Clinic offers an approach to pain management that includes experts in anesthetic block techniques. The anesthesiologist assesses each patient and offers recommendations for treatment, clearly

Procedures offered at the Stormont-Vail Pain Management Clinic

Neurostimulation Therapy Stimulators

Neurostimulation therapy involves the delivery of small electronic signals in the epidural space. Patients with chronic leg pain, peripheral neuropathy and continual pain after back surgeries tend to benefit with this procedure. There is a Pain Therapy Trial offered which provides the opportunity to measure the effectiveness of the stimulators without making a long-term commitment of an implant.

Radiofrequency and Thermo coagulation

Both radiofrequency and thermo coagulation involve a small lesion of nerve to permanently relieve pain in a certain part of the body.

Epidural Steroid Injection

This medication decreases swelling and inflammation in the affected tissues in the spinal column to help relieve pain. Your legs may be weak or numb for several hours. You will need to stay as flat as possible in bed, on a couch or recliner for the remainder of the day. You can be up to the bathroom and for meals. The following day, you may resume your activities and therapies as tolerated. Drink plenty of fluids the afternoon and evening following the procedure to help prevent a possible headache that may occur after the injection. Follow your normal diet.

Blood Patch

Occasionally a spinal headache will develop after an epidural injection. Blood drawn from your arm is used to seal the hole from the spinal needle puncture in the epidural space. After the procedure, keep activity to a minimum and avoid straining, sneezing, coughing, lifting anything over 10 to 15 pounds and driving for the first 24 hours. These activities may increase the pressure of your cerebrospinal fluid causing the blood patch to dislodge and your headache to recur. After 24 hours, you may resume your activities and therapies as tolerated. You may feel the sensation of a slight headache when sitting or standing for the next few days as your body replenishes its cerebrospinal fluid to the normal level.



defining the benefits and risks of each procedure. They then guide the patient through the treatment that is most appropriate. They are always accessible for questions and follow-up.

The Stormont-Vail Pain Management Clinic provides consultations, diagnosis and treatments for headache pain, neck/cervical pain, low back pain/radiculopathy and peripheral nerve pain. Additionally, the Pain Management Clinic provides consultations for inpatients at Stormont-Vail for diagnosis and treatment.

The goals of the Stormont-Vail Pain Management Clinic are to help patients eliminate or reduce their pain level, to return patients to normal activities and relationships, to enhance overall quality of life, and to increase functioning and return to work. The annual cost of chronic pain in the United States, including health care expenses, lost income, and lost productivity, is estimated to be \$100 billion.

“In the Pain Management Clinic, we try to keep the focus on patients and their function,” says Dr. Kucera. “We feel our role is to keep patients as active as possible, whether through physical therapy, home exercise regimens, or simply encouraging them not to give up on things they enjoy like working in their yard. We want people to be able to deal with their pain and get back to enjoying their lives.”

To contact the Stormont-Vail Pain Management Clinic, call (785) 354-5218.

– Linda Ruiz



Disorders treated at the Stormont-Vail Pain Management Clinic

- Facial pain
- Low back and leg pain (Lumbago and Sciatica)
- Herniated disc pain
- Muscle (myofascial) pain
- Neuralgia or pain following a nerve injury
- Pain resulting from shingles
- Reflex sympathetic dystrophy or complex regional pain syndrome (RSD)
- Pain from cancer
- Pain following amputation (phantom limb pain)
- Headache
- Motor vehicle and work related injuries
- Sports injuries
- Chronic pain syndromes
- Neck/shoulder pain

Facet Injection

Just as you can have arthritis in your knees or hips, you can also develop arthritis in your back. There are a series of joints in your back called facet joints, which can become “worn out” as we age. Steroid injections into these joints can decrease inflammation and improve your ability to do activities you enjoy.

Botox

Botulinum toxin is well known for its ability to take away wrinkles. In the Stormont-Vail Pain Management Clinic, it is used to treat conditions such as muscle spasms after strokes and torticollis. Botulinum toxin forces muscles to relax, thereby making physical therapy and stretching more effective.

Trigger Point Injection

The medication numbs the nerve endings. This helps

to relax the tense muscle and break the pain cycle.

Occasionally, a steroid medication is used with the numbing medication. The steroid will decrease swelling and inflammation along the nerve to help relieve the pain. This procedure may need to be completed with a series of three to five visits over several days. You may resume your regular activities, but do nothing strenuous the day of the procedure.

Intercostal Block Injection

The medication numbs the nerve. As the medication wears off and the nerves “wake-up,” the goal is that they will reset at a lesser pain level. Occasionally, a steroid medication is used with the numbing medication. The steroid will decrease swelling and inflammation along the nerve to help reduce the pain. Limit your activities the rest of the day. Normal

activities and therapies may resume the next day as tolerated. Any shortness of breath or difficulty breathing after the procedure should be reported to your doctor.

Stellate Ganglion Block

The medication puts the sympathetic nerves that go to your arm asleep and when the nerves “wake-up,” the goal is that they will reset at a lesser pain level. This injection is often done in a series of visits to achieve maximum reduction of pain. Temporary side effects may include blurred vision, hoarse voice or difficulty swallowing. If difficulty swallowing is experienced, avoid eating or drinking until swallowing returns to normal. Once the pain management procedure is completed, the staff will monitor your blood pressure, pulse and respiratory rate for 30 to 45 minutes before discharging you.