

PATIENT INFORMATION

Suprascapular Nerve Denervation (Pain Leaflet 6)

What is the procedure for?

The procedure is to try and give long term relief for pain in your shoulder joint.

How does the procedure work?

The nerves are burnt using a special needle whose tip can be heated. This produces a small burn (approximately the size of your little finger nail). Before burning the nerve, we inject some local anaesthetic around the nerve, so that you cannot feel this.

What are the risks and side effects associated with the procedure?

- The injections may not make your pain better. If this happens, we will know that the shoulder joint may not be the cause of your pain.
- You may find it more difficult to raise your arm above your shoulder, and other movements of the shoulder joint may be restricted for a few hours.
- Bruising to the injected area is reasonably common.
- A sun-burn like sensation can occur in the overlying skin. This can last for several weeks and is common.
- Bad flare up of your pain for several days. This is uncommon.
- Permanent worsening of the range of movement in your arm is very rare
- Permanent worsening of pain is rare.
- Allergy to injected medication is very rare.
- Lung puncture (rare) causing breathing difficulties.

What will happen on the day?

You may eat and drink as normal. Please take all your tablets as normal, apart from anticoagulants such as Warfarin and Clopidogrel. You will not need to get undressed as long as you are wearing loose fitting clothing so that the skin of your shoulder can be easily exposed.

The procedure takes 20-30 minutes. Your skin will be cleaned with alcohol that will feel very cold. Local anaesthetic is injected to numb the skin and this stings a bit. An x-ray machine can be used to help with the correct placement of the needle.

In order to find the nerve, we pass a small electric current down the needle. If we are close to the nerve, you will feel a strange sensation (often described as a pressure sensation) in your shoulder. The closer the needle tip is to the nerve, the less current we need to pass, before you feel something.

What happens after the procedure?

After the procedure you will need to stay in the department for thirty minutes or so, until you are fit for discharge. You may not be able to drive home if your arm movements are restricted (unlikely but happens once or twice a year). You are allowed to go home by taxi.

The day surgery nurses will give you a discharge letter, briefly explaining what you have had done. Usually another letter will arrive in the post from the Consultant who has done your procedure. The day surgery letter will contain contact details so that you can phone someone day or night if you have a problem related to your injection.

You will be asked to keep a pain diary (this will be supplied) and to post this back to the pain service after 3 months. It is very important that you do this. What to do next is based upon the pain diary.

Continue to take your pain tablets until you notice any improvement.

After your injection take things easy for the rest of the day. Do not do any hard exercise or heavy work for the first few days.

Important information

Please inform the Day Surgery Unit if you are diabetic, have a cough or cold, or have any kind of infection.

You must inform us if you are taking antibiotics, aspirin, or anticoagulants such as Warfarin or Clopidogrel before attending. Some of these may need to be stopped some days prior to your appointment. Warfarin is usually stopped for 5 days before the injection if you have Atrial Fibrillation. If you are taking it for any other reasons please consult your doctor or the pain clinic.

Information for females

You will be asked if there is any chance that you could be pregnant prior to having x-rays.

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.