HOW RADIOFREQUENCY TREATMENT RELIEVES CHRONIC HIP PAIN

1. Branches of the femoral and obturator nerves transmit pain signals from the hip joint.



2. A needle is inserted at each treatment site. Stimulation is used to locate the nerve.



3. Radiofrequency current heats nearby nerve tissue.







The Cosman Radiofrequency Generators, associated Radiofrequency Lesion Probes and RF Cannula are indicated for use in procedures to create radiofrequency lesions for the treatment of pain or for lesioning nerve tissue for functional neurosurgical procedures. The Cosman RF Injection Electrodes are used for percutaneous nerve blocks with local anesthetic solution or for radiofrequency lesioning. Refer to the Instructions for Use provided with Cosman generators, electrodes and cannulas for potential adverse effects, warnings and precautions prior to using these products. Caution: Federal (U.S.) law restricts this device to sale by or on the order of a physician.

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RADIOFREQUENCY PAIN MANAGEMENT

for Chronic Hip Pain



PAIN MANAGEMENT WITH RADIOFREQUENCY

Chronic hip joint pain is a common problem among adults of advanced age.¹

Imagine an outpatient procedure that could treat your hip pain, and allow you to quickly return to your normal activities. All this is possible using the Radiofrequency (RF) technology from Boston Scientific.

RADIOFREQUENCY TREATMENT

Radiofrequency ablation (RFA) is a safe, proven means of interrupting pain signals, such as those coming from irritated branches of the femoral and obturator nerves in the hip. Radiofrequency current is used to heat up a small volume of nerve tissue, thereby interrupting pain signals from that specific area. Clinical data shows that radiofrequency treatment can effectively provide lasting pain relief.^{1,2,3}

Radiofrequency Ablation (RFA) Therapy is a simple and effective treatment for chronic pain originating from the hip joint. RFA is also known as denervation or thermocoagulation. Your doctor can determine if RFA treatment is right for you.

DURING THE PROCEDURE

A radiofrequency nerve ablation procedure is performed by a doctor in a treatment room setting. Both local anesthesia and a mild sedative may be used to reduce discomfort during the procedure.

During the procedure you will be lying on your back. Your doctor will insert several small needles in your hip. Using x-ray imaging, the doctor will guide the needles to the treatment locations near the joint. Electrodes are inserted through the needles to stimulate nearby sensory and motor nerves. During stimulation, your doctor will ask if you are able to feel a tingling sensation. The object of stimulation is to determine the optimal treatment locations for pain relief.

Once the needle and electrode placement is verified, a small RF current will travel through the electrodes into the surrounding tissue, which is designed to cause the tissue to heat and interrupt pain signals. You should alert your doctor if you experience discomfort at any time during the procedure.

Your doctor may treat more than one location during the same procedure to minimize treatment time.



This pamphlet is for general education only. All medical questions and concerns should be addressed with your doctor. Your doctor can explain possible outcomes of treatment including risks and side effects.

AFTER THE PROCEDURE

You may experience some soft tissue discomfort at the needle placement sites following the procedure. Like other soft tissue wounds, the discomfort should subside over several days or weeks. If there are no complications, the procedure can usually be done on an outpatient basis.

Your hip pain should subside over the next several weeks. Radiofrequency treatment of nerves usually blocks pain signals for a prolonged period of time.^{1,2,3} The procedure can be repeated if the nerves regenerate and your pain returns.

Radiofrequency treatment is designed to not limit your daily activities. Physical restrictions you had prior to the procedure may still remain. As with any medical procedure, there are certain risks involved. Please ask your doctor for details regarding the potential risks with radiofrequency ablation and what activities are appropriate after radiofrequency treatment.

Ask your doctor about pain treatment with Boston Scientific radiofrequency equipment.

1. Chaiban G, Paradis T, Atallah J. Use of ultrasound and fluoroscopy guidance in percutaneous radiofrequency lesioning of the sensory branches of the femoral and obturator nerves. Pain Pract. 2013 [Epub ahead of print].

2. Gupta G, Radhakrishna M, Etheridge P, Besemann M, Finlayson RJ. Radiofrequency denervation of the hip joint for pain management: case report and literature review. US Army Med Dep J. 2014 Apr-Jun:41-51.

3. Gauci CA. Radiofrequency treatment of the lumbar medial branch. Cosman Procedure Technique Series. USA; 2009.