

Get Ahead of Joint Pain WITH RADIOFREQUENCY ABLATION



FOR MANY, DEALING WITH THE NAGGING aches and pains of neck and back pain associated with arthritis is a regular occurrence. But a technique known as radiofrequency ablation (RFA)—an injection procedure used to treat joint pain—can help. It's also an effective way to treat hip and knee pain, and in some cases, even headaches.

RFA is used in combination with medication and physical therapy in an attempt to not only control pain but also to avoid or delay surgery. It is an outpatient procedure that does not require hospitalization.

Rather than using medication like a typical injection, a special needle is used during an RFA to deliver radio waves to the nerve supplying the painful joint, thereby blocking pain signals. Because our bodies have a tremendous ability to adapt and repair themselves, the procedure is not permanent, but

the pain relieving effects can be quite long lasting.

What can I expect?

The procedure is done in an operating room setting, typically while lying on your stomach. A numbing medicine is used on the skin, and a light anesthetic is administered to relax you. Most RFAs take 15 to 20 minutes to complete. After 20 to 30 minutes in the recovery room, you are discharged home with your ride.

What if it doesn't work?

It is important to have realistic expectations before the procedure. At least 50 percent pain reduction for six or more months is considered a successful RFA. If you do not experience that much relief, it could be an indicator that your pain is coming from somewhere other than the expected joint, or that you need to see a surgeon.

WHEN TO SEEK HELP

Maybe you notice a sharp pain in your left knee when you walk down the stairs. Or maybe it's your shoulder or elbow that aches after carrying the groceries home. While the occasional twinge is probably not a worry, joint pain that lingers or is severe could be a sign of a serious problem.

Pain from minor injuries may be relieved with the following steps—often referred to by the acronym RICE:

- Rest.
- Ice the affected joint.
- Compress the area with elastic dressings.
- Elevate the affected limb above the heart.

If these self-care strategies don't help, call your doctor. Also, always seek medical attention for joint pain that is severe, persistent, or accompanied by swelling, fever, or other serious symptoms.



about the doctor

Benjamin Hooker, M.D.
*Physical Medicine and
Rehabilitation*

Dr. Hooker is a physical medicine and rehabilitation surgeon on staff at USMD Hospital at Fort Worth. If you need a specialist, call (888) 444-USMD for a free physician referral.

HOW HERNIAS HAPPEN

You may have heard that hernias are caused by heavy lifting. While that can lead to a hernia, the truth is, sometimes doctors don't know what causes them.

There are some things that make you more prone to them, including:

- Increased pressure on the walls of your abdominal muscles through activities like straining to go to the bathroom, coughing over a long period, or being overweight
- Family history
- If you've had surgery on your abdomen



That Lump Might Be a Hernia

EVERYONE KNOWS SOMEONE WHO'S HAD a hernia—a painful, bulging lump beneath the skin of the abdomen or the groin. Maybe you've experienced one yourself. But what exactly are they, and who gets them?

Hernias happen when part of an organ protrudes through the wall of muscles that cover the abdomen. Both men and women can get them and may be at a higher risk if they are born with it.

Symptoms include:

- A bulge that increases in size when you strain and disappears when you lie down
- Chronic pain in your groin or scrotum when exercising or straining
- A feeling of weakness, pressure, burning, or aching in your groin or scrotum when standing or coughing

There are different types of abdominal wall hernias. Groin hernias are the most common type and are more common in men than women. These are also known as inguinal hernias. Although women can develop inguinal hernias, some people are born with a weakness in the groin area and develop what is known as a congenital hernia.

How to Treat

Specific treatment for a hernia will be determined by your doctor based on:

- Your age, overall health, and medical history
- Extent of the condition
- Your tolerance of specific medicines, procedures, or therapies

The main treatment for an inguinal hernia or abdominal wall hernia is a surgical procedure known as herniorrhaphy. In this procedure, the opening in the muscle wall is repaired and reinforced with pliable synthetic mesh.

Laparoscopic surgery can also be performed. By making several small incisions in the lower abdomen and inserting an instrument called a laparoscope, the hernia can be repaired using synthetic mesh.



about
the
doctor

Barry J. Bass, M.D.
General Surgery

Dr. Bass is a general surgeon on staff at USMD Hospital at Fort Worth. If you need a specialist, call (888) 444-USMD for a free physician referral.

Better Treatments for Thyroid Problems

THE THYROID IS A BUTTERFLY-SHAPED GLAND that sits in front of the windpipe 1 to 2 inches below the Adam's apple. In some people, the thyroid may develop nodules called goiters. Small, benign nodules may be watched. Larger nodules may be sent for fine needle aspiration or surgical biopsy.

Treating Thyroid Nodules

The latest, and quite frankly coolest, technique for treating thyroid nodules is a minimally invasive approach to thyroid and parathyroid surgery.

Minimally invasive thyroid surgery (both with and without the endoscope) was developed in the late 1990s and early 2000s. Its major goals were to decrease postoperative pain and

improve cosmetic results. It does this by dramatically decreasing the size of the incision and the underlying dissection to remove the thyroid (and/or parathyroid) tissue.

Here in the Fort Worth area, the standard incision for the small (less than 35 mm) nodule ranges from 4 cm to as much as 10 cm (5 inches). With minimally invasive techniques, I have made incisions as small as a little more than 1 cm.

I have been performing thyroid and parathyroid surgery for almost 25 years. The evolution to minimally invasive techniques since 2003 was a result of improved equipment and a desire to provide my patients with a less painful and better-looking thyroid (parathyroid) outcome.

Making a Difference

It gives me great joy when a patient comments on how much smaller their incision was than their neighbor's or relative's, or when an endocrinologist calls to say he can't believe I got the thyroid out through such a small incision.

The minimally invasive approach offers a much more desirable result for the care of surgical thyroid and parathyroid nodules, better cosmetics, and less pain.



about
the
doctor

Todd E. Samuelson, M.D.
Otolaryngology

Dr. Samuelson is an otolaryngologist on staff at USMD Hospital at Fort Worth. If you need a specialist, call (888) 444-USMD for a free physician referral.



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Gallstones: A PAIN YOU SHOULDN'T IGNORE

THE GALLBLADDER IS AN ORGAN THAT SITS under your liver and stores bile, which aids in digestion. You don't really give it much thought unless it is causing you pain. Gallstones are the primary reason for the pain.

Gallstones occur in 10 to 20 percent of the population. Some risk factors for gallstones cannot be controlled. For example, women are more likely than men to develop gallstones, as are those ages 60 and older. However, managing your diet is one risk factor that can be controlled. Eating too much fatty foods, particularly saturated fat, increases your risk factor for developing stones. Obesity is a major risk factor for developing stones. Also rapid weight loss increases the risk due to the way the body metabolizes the fat during the weight loss.

Identifying Symptoms

There are several signs that can indicate gallstones. They typically occur after eating:

- Pain in the upper abdomen or under the ribs on the right lasting minutes to hours
- Nausea and/or vomiting
- Pain in the back between the shoulder blades
- Shortness of breath with the pain
- Fever, chills, and yellowing of skin or eyes—signs of a serious gallbladder attack needing immediate medical attention

If you develop these symptoms, notify your doctor. The best evaluation to determine if you have gallstones is an ultrasound of the abdomen.

Once a person begins having symptoms from their gallstones, he or

MINIMALLY INVASIVE TECHNIQUE MEANS QUICKER RECOVERY

With open surgery, doctors have to make a large incision in the body, cutting through tissue to see inside. But many gallbladder surgeries are now handled laparoscopically. This results in:

- Less chance for infection
- Reduced pain
- Minimal scarring
- Shorter hospital stays
- Quicker recovery



about
the
doctor

Christian Carr, M.D., F.A.C.S.
General Surgery

Dr. Carr is a general surgeon on staff at USMD Hospital at Fort Worth. If you need a specialist, call **(888) 444-USMD** for a free physician referral.

she generally will continue to have attacks. The most common and definitive treatment for symptomatic gallstones is removal of the gallbladder. This is most commonly done through several small incisions on the abdomen called laparoscopic surgery. Most individuals go home the same day of surgery and need about a week of recovery time.