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PAINNEWS

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MANAGING SHINGLES

KYPHOPLASTY

Q&A

FEATURED TREATMENTS:

Nevro Spinal Cord Stimulation
& Platelet-Rich Plasma Injections





MANAGING SHINGLES

Shingles is an infection that develops some time after the chickenpox virus. Even if the patient had chickenpox decades ago, the inactive virus remains in the tissues only to be reactivated years later, causing a painful rash. While the rash can develop anywhere on the body, it most commonly occurs on the abdomen. Shingles is a painful condition, but fortunately, the team at Southwest Spine and Pain Center is well-versed in the disease and can provide treatment, as well as prevention methods for this condition.

TREATMENT:

Postherpetic neuralgia is an elaborate medical term that describes chronic pain as a result of shingles. Patients with shingles pain may feel tingling, burning pain; itching; fever, and much more. The condition varies from patient to patient. Sometimes, shingles pain is a dull ache. Others times, people report a more severe pain that prevents them from performing normal, daily activities.

Fortunately, shingles pain is highly treatable. The physicians at Southwest Spine and Pain Center may provide patients with the following shingles treatment options: antiviral drugs, pain medication, lidocaine patches, and nerve blocks. An SWSP physician may choose one of these treatments or a combination of them to successfully treat shingles pain. Southwest Spine and Pain Center believes in a multi-faceted pain relief approach, so if necessary, we can help patients struggling with depression as a result of shingles.

PREVENTING SHINGLES PAIN:

1. Identify the risk factors –

Anyone who has had chickenpox before can develop shingles, but some people are more at risk than others. Risk factors for shingles include people over the age of 50; cancer patients undergoing certain treatments; patients who have had organ transplants; patients taking steroid medications for long periods of time, and more.

2. Get vaccinated –

If someone has had chickenpox and received the chickenpox vaccine, they can reduce their risk of developing shingles with the shingles vaccine. If the patient ends up developing shingles despite these preventative actions, the vaccine can reduce the severity of the condition. The shingles experts at Southwest Spine and Pain Center recommend getting the vaccine at around 50-60 years of age.

3. Avoid other people with shingles –

Shingles can be contagious if an unaffected person touches the rash of a shingles patient. However, once the rash becomes crusty or is gone completely, the other person cannot catch the disease. Touching other areas of the body will not spread the disease. A shingles patient can prevent spreading the virus by simply covering the rash.

KYPHOPLASTY

Q&A



For patients who have sustained a spinal compression fracture before, it's no secret this trauma causes more than just back pain. It can leave patients with limited mobility, difficulty breathing, depression, and much more. When pain medications and steroid injections are not enough to control these symptoms, the team at Southwest Spine and Pain Center may suggest kyphoplasty.

What can I expect from kyphoplasty?

Kyphoplasty is a minimally invasive procedure, meaning the patient may experience minimal blood loss and pain, and recover quicker, usually within a matter of days or weeks. During the procedure, a needle is placed into the vertebral space of the damaged spinal disc. The physician inflates a balloon to correct the position of the spine and restore height. The balloon is extracted, and cement is injected into the space the balloon created. The needle is then removed and the cement is left to harden for approximately 30 minutes. If necessary, multiple vertebrae may be treated in one session. Generally speaking, treating one vertebra should take less than an hour to complete.

Is this procedure different from vertebroplasty?

Both kyphoplasty and vertebroplasty treat vertebral spinal fractures with cement. Vertebroplasty, on the other hand, does not use a balloon to restore height. Kyphoplasty does utilize a balloon to create a cavity for the cement. During vertebroplasty, the cement mixture is guided into the vertebra using x-ray guidance.

Is this right for me?

Kyphoplasty is typically performed on patients with weakened spinal bones (from osteoporosis) or a tumor compressing the spine. However, this procedure may be beneficial for orthopedic patients who have a spinal injury that has not healed correctly. Kyphoplasty is not for patients suffering from a shattered vertebra, stable fracture, or bleeding condition. Talk to your doctor about whether or not you're a candidate for kyphoplasty.

What is the recovery like?

Patients will be monitored for a little while, but after about two hours, they may be up and walking around. Of course, recovery times vary from patient to patient, but most patients can be driven home the same day or the next morning. Patients should spend at least one full day resting at home, following all of their post-operative instructions. After that, patients can continue their medication as directed and return to normal activities as they feel comfortable.



To learn more, speak to your provider during your next visit.

FEATURED TREATMENTS

Nevro Spinal Cord Stimulation & Platelet-Rich Plasma Injections

NEVRO SPINAL CORD STIMULATION

Southwest Spine and Pain Center has adopted a new, FDA-approved device called Nevro Spinal Cord Stimulation. It's an excellent tool for patients who have not experienced significant pain relief from traditional chronic back pain treatments like medications or injections. Nevro is similar to traditional spinal cord stimulation devices, but with a few added benefits. With traditional spinal cord stimulators, patients often develop paresthesia (an uncomfortable "pins and needles" sensation). Nevro is the only device that doesn't transmit these bothersome tingling sensations. Another thing we love about this product is that Nevro is the only stimulator that does not have driving restrictions for patients!

HOW IT WORKS

Leads are inserted into the spine and attached to a pulse generator outside of the body. If the patient experiences relief, the pulse generator is implanted into the buttocks or back permanently. The electric stimulation can be controlled by a remote control outside of the body. Our physicians have seen great success from this new technology. If the Nevro system is something you may be interested in, we would be happy to discuss this treatment option with you.

PLATELET-RICH PLASMA INJECTIONS

Southwest Spine and Pain Center believes in keeping up with the latest technologies, and regenerative medicine is quickly becoming one of the best treatments for degenerative conditions. Can you imagine treating your chronic pain using healing properties from your own body? With platelet-rich plasma (PRP) injections, you can do just that.

HOW IT WORKS

A small sample of the patient's blood is collected and run through a centrifuge. The centrifuge separates the platelet-rich plasma from other contents within the blood. The plasma concentration is then injected into the area causing pain. Because this procedure uses the patient's own blood, there is virtually no risk of infection and little risk of an allergic reaction. The injection promotes healing by repairing and strengthening tissues, muscles, tendons, and more. Our physicians have observed great success not just in patients with degenerative conditions such as osteoarthritis, but also in patients with sports injuries like rotator cuff ruptures, ACL tears, muscle sprains, and more. If you want to learn more about PRP injections and regenerative medicine, talk to your physician at your next appointment!

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