

Understanding Your Diagnosis

Vertebrogenic pain is a specific type of chronic low back pain caused by damage or inflammation of the vertebral endplates—the area where your discs connect to the bones of your spine. While many treatments focus on the discs themselves, BVN ablation targets the basivertebral nerve, which is responsible for transmitting pain signals from these damaged endplates. This condition is typically identified through specific "Modic changes" seen on an MRI.

The Treatment: Basivertebral Nerve Ablation (BNVA)

Basivertebral Nerve Ablation is a minimally invasive, clinically proven procedure designed to provide durable relief for chronic low back pain. Unlike temporary injections, this procedure involves placing a specialized probe into the vertebrae to deliver radiofrequency energy. This thermal energy heat-treats the basivertebral nerve, permanently interrupting the pain signaling process. It is important to note that the device used is an implant during the procedure to reach the nerve, not an external device.

Our Approach: Independent & Evidence-Based

At Abilene Pain, our independent status allows us to prioritize high-level, evidence-based interventions like BVN ablation for patients who have not found relief through conservative care. Dr. Pugh utilizes Live X-Ray (Fluoroscopy) to ensure the probe is positioned with sub-millimeter accuracy within the bone. This procedure is part of our commitment to providing innovative, patient-centric solutions that address the root cause of spinal pain.

Procedure Day Highlights:

- Performed in a professional ambulatory surgery center.
- Utilizes Live X-Ray for exact safety and precision.
- Patients typically receive sedation for a comfortable experience.
- This is a one-time procedure designed for long-term functional success.

Benefits

- **Durable Relief:** Clinical studies show significant pain reduction that can last for years.
- **Non-Surgical Recovery:** Provides an alternative to invasive spinal fusion or hardware-based surgery.
- **Targets the Source:** Specifically addresses endplate-related pain that other procedures may miss.

Recovery

- **Standard Resumption:** Most patients return to light activity within a day or two.
- Full relief usually develops over 2-6 months
- A brief follow-up will be scheduled to assess you

Nicolas Pugh, MD | **Adrianne Anders, NP** | **Ted Chaka, PA**

Abilene Pain Locations

Main: 1925 Hospital Drive

Chaka: 6819 Memorial Dr. Ste B

Contact Numbers

Main: 325-326-3433

Chaka: 325-468-8096

Online

Email: info@abilenepain.com

Web: www.abilenepain.com

Procedure Summary: Basivertebral Nerve Ablation (BVNA)

You have undergone a Basivertebral Nerve Ablation, a specialized procedure designed to treat chronic back pain originating from your vertebral body (vertebrogenic pain). Using radiofrequency energy, we have **cauterized the specific nerve inside your bone** that was transmitting pain signals to your brain. This procedure was performed to stop those signals permanently without the need for a permanent implant or major spinal surgery.

Activity Restrictions

- **Driving:** No driving or operating machinery for 24 hours (post-anesthesia safety).
- **Lifting:** Limit lifting/pulling/pushing to <15 lbs for 7 days.
- **Exercise:** No strenuous activity, impact sports, or excessive twisting for 1 week. Walking is encouraged.

Wound Care

- **First 24 Hours:** Keep bandages clean and dry.
- **Showering:** Permitted after 24 hours. Remove bandages first; pat sites dry.
- **Submersion:** No baths, pools, or hot tubs for 7 days until incisions are fully closed.

Pain Management Expectations

- **The Flare:** Expect increased deep "bone pain" for 3–10 days. This is a normal inflammatory response to the thermal ablation.
- **Management:** Use ice packs (20 min on/off) and continue baseline medications.
- **Results:** Peak relief typically occurs between 6 weeks and 3 months

Red Flags

- New or worsening leg weakness, numbness, or "**foot drop**."
- Sudden loss of bowel or bladder control.
- **Fever** >101.5°F, chills, or **drainage at the incision site**.
- **Severe headache** that worsens when sitting or standing.

Follow-Up Schedule

- **2 Weeks:** Wound check and post-operative review.
- **3 Months:** Formal functional assessment of procedural efficacy.

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