Vertebroplasty

Back pain is a common problem. One reason for pain can be a fracture of a vertebra, which is a bone in the spine. Compression fractures can also be from the wearing away of bone or bone loss due to osteoporosis. There are other reasons for vertebral fractures, such as trauma to the spine or cancer. This procedure is not used for arthritis pain.

Vertebroplasty is a procedure that may help to ease pain, improve movement, and reduce the need for surgery for compression fractures. Bone cement is injected into the spine bones to reinforce collapsing vertebrae. This material, which is also used in joint replacements, quickly hardens inside the vertebra. This gives strength to the vertebra.

While this procedure cannot restore the original shape to the crushed vertebra, it prevents further collapse of the bone. Patients often have significant pain relief.

If you are pregnant or think you might be, tell your doctor or the radiology technologist before this procedure. Tell them if you also have an allergy to contrast dye.
Preparing for the Procedure

Talk with your doctor about the medicines, herbs and supplements that you take or will need to take the day of the test.

- A CT Scan or MRI Scan will be done before the day of the procedure.

- **If you take a blood thinner or medicine that thins your blood**, talk to your doctor about when to stop taking the medicine. Not talking to your doctor about this could result in your test being cancelled or rescheduled. These medicines include:
  - Aspirin (high dose)
  - Warfarin (Coumadin, Jantoven)
  - Aspirin with dipyridamole (Aggrenox)
  - Foundaparinux (Arixtra)
  - Cilostazol (Pletal)
  - Heparin
  - Clopidogrel (Plavix)
  - Prasugrel (Effient)
  - Dalteparin (Fragmin)
  - Ticlopidine (Ticlid)
  - Dipyridamole (Persantine)
  - Tinzaparin (Innohep)
  - Enoxaparin (Lovenox)

- **If you are 50 or older, you will need blood work done within 30 days of your procedure.** Please check with your doctor’s office for instructions and lab orders.
  - If you have blood work outside of Ohio State’s Wexner Medical Center, **bring a copy** of the results with you to your procedure.

- **If you have diabetes and take insulin**, check with your doctor about your insulin dose the day of the procedure.

- **Have an adult with you to take you home.** For your safety, you may **not** drive yourself home, go home alone or use public transportation without someone to go with you.

- You should not eat or drink from midnight the night before the test until after the procedure.

Day of the Procedure

- You may have sips of water with your heart, transplant, blood pressure, pain or anti-rejection medicines. Wait for other medicines to be taken until after the procedure.
Register at the Admitting Office on the 1st floor of Rhodes Hall. From there, you will be directed to 2 West Doan, called the Radiology Procedure Recovery (RPR) unit.

You will then be taken to the Interventional Radiology Suite where a specially trained doctor, called an Interventional Radiologist, will do the procedure. **Tell the doctor what medicines you have taken today, the dose amount and when the last dose was taken.**

You will lay face down for the procedure. An area of your back will be cleaned with soap and a sterile drape will be placed over your back. A local anesthetic will be given under the skin to keep you free from pain when the needle is placed. You may be given additional medicine that makes you feel sleepy.

The Interventional Radiologist will use special equipment to see where to place the needle. Once the needle is placed, the Radiologist injects the cement into the vertebra. The procedure often lasts about 1 ½ to 2 hours.

**After the Procedure**

- After the procedure is completed, you will be taken back to the RPR. The nurses will check the area for signs of bleeding, and your vital signs will be taken every hour.
- You will need to stay in bed for **2 to 3 hours after the procedure.**
- You will be able to eat and drink once you reach the Radiology Procedure Recovery area.
- You may to take your medicines as you would at home, but please tell the nurses know if you need any pain medicine.
- You will need to have an adult take you home. You should have someone stay with you at least overnight or the next 24 hours. Do not drive or operate machinery, or make important decisions for the next 24 hours.

**Your Care at Home**

- You may have some soreness or discomfort at the injection site for several days. Your doctor will talk with you about the safe use of pain medicine. You may also be told to use an ice pack for no more than 15
minutes at a time near the site. A towel should be placed as a barrier between the ice and your skin to protect your skin.

- Limit your activity to help your recovery and prevent problems. You may gradually return to normal activity the next day.
  - Keep your head up.
  - You may not drive or do physical activity for 24 hours.
  - Do not push, pull, or lift heavy items for at least 4 weeks, or as instructed by your doctor.
  - You may shower or bathe the next day. Remove the Band-Aid from your back and leave the site open to air.

**When to Call the Doctor**

If you have one or more of these signs, **call the Interventional Radiologist office right away at (614) 293-2773.**

- Chest pain
- Shortness of breath
- Severe pain at the site
- Numbness or tingling in your legs
- Fever or chills
- Swelling, redness or warmth at the site

For problems after business hours, call (614) 293-8000 and ask for the Radiology doctor who is on call to be paged.

**If you have severe chest pain or breathing problems, call 911 or go to your nearest Emergency Department.**

- Talk to your doctor or others on your health care team if you have any questions. You may request more written information from the Library for Health Information at (614) 293-3707 or email: health-info@osu.edu.