

TESTS AND PROCEDURES

Percutaneous Vertebral Augmentation

If you have any questions, talk with your healthcare provider.

Vertebral augmentation is a procedure to relieve pain from spinal (vertebral) compression fractures. The clinician inserts a hollow needle near the fracture through the skin (percutaneous). They may use a balloon or mechanical spacer device to expand the vertebral body. Then they will inject a cement-like substance through the needle to reinforce the fractured, brittle vertebrae. Vertebral augmentation is usually done as an outpatient procedure. After the procedure, most patients have less pain and more mobility.

Before the procedure

Vertebral augmentation is done in the Department of Interventional Radiology (IR) by a neuroradiologist. Before scheduling the procedure, the neuroradiologist will talk with you about the risks and benefits of the procedure. In some cases, you may need more testing.

Do not eat or drink for 6 hours before the procedure. You may take any needed medications with small sips of water.

You will also need to stop taking these medications, as directed by the radiologist, before the procedure:

- Anticoagulation (blood thinner) medications such as aspirin and clopidogrel (Plavix®)
- Nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Motrin®, Advil®)

The clinician will tell you when to stop these medications when the procedure is scheduled. Tell your physician who prescribed these medications that you will not be taking them before your procedure.

Day of the procedure

What to bring to the hospital

Be sure to bring:

- A list of your allergies
- A list of all your current medications (prescription, over-the-counter and herbal)
- Photo ID
- Medical insurance information and card
- Medicare card (Medicare patients only)

Please leave all valuables (jewelry, credit cards, money) at home. This includes bodypiercing jewelry and tongue studs. You may not wear any jewelry during surgery.

You will get medication during the procedure that will make you drowsy, so you will need to have a responsible adult take you home. This is hospital policy. We ask for a cell phone or a contact phone number in case we need to reach a family member.

Arrival

Come to the 4th floor of Feinberg Pavilion, 251 East Huron Street 1 hour before your procedure. Parking is available for patients and visitors in the garage at 222 East Huron Street, across from Feinberg and Galter pavilions. For a discounted rate, bring your parking ticket with you. You can validate your ticket at the IR check-in desk, at the Customer Services Desks on the 1st and 2nd floor of Feinberg and Galter pavilions, and on the 1st floor of Prentice Women's Hospital.

After you check in with the receptionist on the 4th floor, you will meet with a staff member who will bring you to the preparation area. They will review your health history, medications and allergies. After reviewing the procedure and having a chance to ask questions, they will ask you to sign a consent. You will then change into a hospital gown. The nurse will put an IV (into the vein) line in your arm or hand. You will get fluids and medications through the IV during the procedure. You will also get an antibiotic through the IV to prevent infection.

During the procedure

In the IR procedure room, the care team will position you on an examination table. They will connect you to heart and blood pressure monitors. You will have a small sensor on your finger to check the oxygen level of your blood.

The clinician will inject numbing medication into the skin near the part of your spine that needs treatment. They will put the hollow needle into the affected area. X-ray pictures will help guide the needle placement. The clinician will inject a cement-like liquid into the fracture site(s). It will harden right away. Then they will take the needle out. Depending on the fracture sites, the clinician may do injections in more than 1 spot.

After the procedure

After the procedure, the care team will move you to the recovery area. You must lie flat for about 1 hour. You may go back to your normal diet. The care team will give you medications for pain and discomfort as needed.

You should not do heavy or strenuous activity for the rest of the day.

At home

You may go back to your normal activities as you are able, usually 1 to 2 days after the procedure. You may take a shower after 24 hours. Do not take tub baths, use a hot tub or submerge the injection site for 5 days.

Seek medical attention if you have these symptoms:

- Chest pain
- A temperature more than 101.1 degrees F
- Severe pain that does not go away
- Bleeding at the puncture site
- Numbness, tingling or weakness

If you have any questions, please call the interventional neuroradiology physician assistant at 312.695.3681 (TTY: 711) or the clinical coordinator at 312.926.3185.