SOUTHWEST SPINE & PAIN CENTER NEWS

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ask about

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is SPINAL CORD **STIMULATION** right for you?

what to expect if you need

SPINAL CORD STIMULATION right for you?



inding a treatment that works to relieve your pain can take time and sometimes lead to frustration. One option that works well for some conditions that aren't responding to other treatments is spinal cord stimulation.

This is a treatment that involves inserting electrodes into your back that deliver electrical pulses to nerves along your spinal column. It works by interfering with your body's ability to send pain signals to your brain.

Because it involves minor surgery, spinal cord stimulation is obviously not the first choice for pain patients. If your pain can be relieved by something less invasive, like physical therapy, ice, rest or over-the-counter medications, you don't need it.

But it can be an option for patients who haven't found relief for:

Failed back surgery syndrome Complex regional pain syndrome Chronic low back and leg pain Peripheral nerve pain Phantom limb pain

If spinal cord stimulation seems like a good choice for you, you'll first have a trial implant of an electrode to test whether it works to relieve your pain and determine how strong the pulse needs to be for pain relief. If the results are positive, you can go ahead with a more permanent implant.

The electrode that is implanted in your back will be connected to a stimulator that is also implanted under the skin. After surgery, you'll be able to control the stimulator—and the strength of the electrical pulses—with an external wireless programmer, so you can adjust the "dosage" as needed.

Spinal cord stimulation is a minimally invasive, outpatient procedure that should only leave a small incision. You'll need to keep the incision area clean and dry until it's healed.

As with any medical procedure, there are risks with spinal cord stimulation. Some of the most common are wires moving out of place, failed connections, and broken equipment. The good news is that if you develop problems, the procedure is reversible.

One other drawback is that with some types of implants, you won't be able to have magnetic resonance imaging (MRI) tests. The advantages of spinal cord stimulation may outweigh the disadvantages. For some patients, it may mean they are able to reduce or eliminate their need for strong opioid medications. And over the long run, it may be less expensive with fewer side effects than taking medications.

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ask about **stem cell therapy**

ummer is here, and it's time to enjoy the warm weather. Unfortunately, achy joints keep too many of us from fully enjoying Utah's beautiful outdoor adventures—they can keep us from hiking, biking, fishing, or just enjoying our blooming back yards.

If a bum knee or achy hip is holding you back, it may be time to consider stem cell therapy.

Although research is continuing, a number of studies have found that stem cell injections are a safe way to help ease several types of pain. This innovative treatment uses the body's stem cells to repair and regenerate damaged tissue, which can help relieve chronic pain. When stem cells are injected into areas of pain, they produce more cells, promoting healing and tissue repair.

Stem cell treatment has shown the most benefit for those suffering chronic pain from degenerative disc disease, anterior cruciate ligament (ACL) tears, tennis elbow, golf elbow, osteoarthritis, and similar conditions.

At Southwest Spine and Pain Center, we have seen good success using stem cell therapy as an alternative to surgery for musculoskeletal conditions that have stopped responding to traditional therapies. Some patients find a major reduction in their pain and a need for far less pain medication within just a couple of weeks.

Stem cell therapy is a relatively simple outpatient procedure. It's much less complicated than knee surgery, for instance.

If you decide to use stem cell therapy, we will use cells either from your own bone marrow or from donated placental cells following a full-term pregnancy and scheduled Caesarean section.

Embryonic stem cells are not used.

Before the procedure, you will have an injection to numb the area involved. If you're using your own cells, they will be harvested from your hip area, prepared for reinjection, and then reinjected into the area of pain or injury. We may recommend a follow-up treatment of platelet-rich plasma (PRP) therapy to the site of pain to "activate" the treatment and help with healing and pain relief.

After the procedure, we recommend you work with a physical therapist to build the muscles that support your injured joint, whether that's a knee, hip, shoulder, or other joint. You want to gradually stretch and strengthen the muscles to avoid a new injury and get the most benefit from your treatment.

Avoid high-impact activities like running or weight lifting at first until the therapy has had time to work, and your body has had time to heal. Walking, swimming, and biking can be good ways to stay active as your body recovers. Luckily, that still gives you many options for enjoying the great Utah summer outdoors, and eventually, you'll probably be able to return to trail running—if that's what you enjoy doing.

Talk to your Southwest Spine and Pain Center doctor about whether stem cell injections are a good option for you.

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f you're suffering from a painful spinal compression fracture, you may need a procedure called kyphoplasty to help relieve your pain. Kyphoplasty is generally used for people with osteoporosis (low bone density) or patients whose bones are weakened by cancer. Patients usually get the best results if they have the procedure within a couple of months of the time the fracture is diagnosed.

If you need to have kyphoplasty, here's what you can expect:

- 1) Before the day of the procedure, you will have blood tests and imaging tests (x-rays, CT scans, or MRIs) to give us detailed information about your general health and your spine.
- 2) During the procedure, you will be under conscious sedation, which means you will be given medication to make you very relaxed but you will be awake.
- 3) The surgeon will insert a hollow needle into your skin. The medical team will use fluoroscopy, a type of x-ray, to be sure the needle is positioned correctly.
- 4) Then, using the hollow needle, they will insert a balloon into the space to be treated and inflate it to make room for the bone cement.
- 5) The balloon will be removed and cement injected into the space.
- 6) Next, the needle will be removed and the injection site bandaged. You won't need any stitches.

The good news is that relief from the pain of the fracture is almost immediate, and the recovery period is brief. You may be up and walking within an hour of the procedure. Although you'll be a little sore, within a few days you should feel better and be able to get back to your normal activities.

Talk to your Southwest Spine and Pain Center doctor about whether kyphoplasty is the right choice for you.



Southwest Spine and Pain is pleased to announce that rheumatologist, Dr. Jeffrey L. Mathews will be joining the Southwest team of world class physicians in August.

Dr. Mathews was born and raised in Salt Lake City, attended BYU, the University of Utah School of

Medicine, and Duke University School of Medicine. He has multiple Board Certifications and has helped patients for more than 25 years. He also served in the Marine Corps before serving an LDS mission in Sweden, and to this day visits Sweden every year or two when his busy schedule allows. His family is his focus and time with his nine children and twenty-five grandchildren on his farm is his most cherished time when he's not busy helping patients.

Call Southwest Spine and Pain to schedule an appointment at 435.656.2424.

what to expect if you need KYPHO-PLASTY



Call your nearest Southwest Spine & Pain location to schedule an appointment.

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