

PULSED RADIOFREQUENCY (PRF) LESIONING OF THE SUPRASCAPULAR NERVE (SSN) CAN BE USEFUL IN INTRACTABLE SHOULDER PAIN AMONG THE ELDERLY

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PRF has been recently described as a technique applying high voltage near a nerve, without thermal effects and subsequent nerve injury¹. In this set of case reports we wish to describe the clinical course of two patients suffering from intractable shoulder pain, failing to respond to previous treatments.

Case 1: 78 year old male suffered from bilateral frozen shoulders associated with severe immobility. Various medical treatments resulted in acute renal and congestive heart failures, and cognitive impairment. Two separate double blinded SSN blocks with local anesthetics performed under fluoroscopic control followed by PRF lesioning (described elsewhere²) resulted in marked reduction of pain and increase in functional independence (table 1) persisting 5 months post procedure.

Case 2: A 80 year old female suffering from Parkinson disease and left shoulder pain following a prosthetic implant failed to respond to pharmacotherapy. Similarly, SSN blocks followed by PRF lesioning resulted in marked analgesia (table 1).

	<i>VAS pre</i>	<i>VAS post</i>	<i>FIM* pre</i>	<i>FIM* post</i>
Case 1	8	3	121	140
Case 2	7	2	107	126

*** Functional Independence Measure**

PRF can offer an additional therapeutic choice in refractory cases, where previous conservative and surgical treatments have failed. The results have been clinically remarkable and should provoke further research. Observations from basic science tend to support a stunning neuromodulatory effect of PRF³.

1. Munglani R, Pain 1999;89:437-439
2. Kapural L, Curr Pain Headache reports, 2001;5:517-525
3. Cahana A, Americal Pain Society Annual Meeting, Baltimore, 3.2002