Seeking Pain Relief?

Advice From an Expert

RELIEVING PAIN

r. Duncan offers many approaches to help patients overcome pain, including:

- Radiofrequency Ablation: An electrical current produced by a radio wave to heat up a small area of nerve tissue, thereby decreasing pain signals from that specific area.
- **Botox injections** for the treatment and prevention of migraine headaches.
- Electromyography (EMG), to measure muscle response or electrical activity in response to a nerve's stimulation of the muscle. The test is used to help detect neuromuscular abnormalities.
- Epidural Steroid Injections (ESIs), a common method of treating inflammation associated with low back related leg pain, or neck related arm pain.
- FACET Joint Injections of a steroid medication to reduce inflammation in the small joints at each segment of the spine that provide stability and help guide motion.
- Spinal Cord Stimulation, applying an electrical current to the source of chronic pain. This creates a pleasant sensation that blocks the brain's ability to sense the previously perceived pain.
- Viscosupplementation: an injection of hyaluronic acid into the knee and into the synovial fluid for the treatment of knee osteoarthritis—to increase lubrication in the joint, making joint movement much easier.
- Prolotherapy: an injection technique that stimulates growth of cells and tissue that stabilize and strengthen weakened joints, cartilage, ligaments and tendons.
- A sacroilliac (SI) joint injection—
 also called a sacroiliac joint block—
 primarily used to diagnose or treat
 low back pain and/or sciatica
 symptoms associated with sacroiliac
 joint dysfunction.

For more information, contact: For more information about resolution of pain issues, contact:

ATLANTIC SPINE AND PAIIN Catherine A. Duncan, DO

1031 West Williams Street, Suite 102 Apex, NC 27502 Telephone: (919) 439-7867 www.atlanticspinepain.com nformed choices are the underpinning of the care Dr. Catherine Duncan offers her patients at Atlantic Spine and Pain, in Apex.

"Expert assessment is such a profoundly good idea," she notes. "For example, a general practitioner may see a patient who is suffering with knee pain—a very common inflammatory complaint, especially in this aging population—and simply refer him as a candidate for knee surgery.

"In some instances, of course, surgery may be exactly the right choice for a given patient. But in many cases, there are other procedures and approaches that may actually better serve the patient. We care a great deal about offering every patient very detailed, comprehensive analysis of their painful conditions, along with our recommendations for the best options to gain relief.

"And 'options' is the key word," notes Dr. Duncan. "There are, in fact, a number of effective treatments for this very common issue of knee pain—and many other painful conditions, as well. Many people have heard of cortisone injections, which can often give people a lot of mileage by reducing their pain and enhancing their ability to function.

"When a patient has mild to moderate osteoarthritis, for example, and they've tried a steroid injection with only moderate success, the next step might well be *viscosup-plementation*, where we inject a lubricant or a synovial fluid substitute into the knee joint, to help lubricate the joint and thereby reduce pain. It is often highly effective for long-term relief."

the principal options she offers to

provide relief for a painful knee.

OTHER OPTIONS

And there are additional options, Dr. Duncan points out. "Yet another approach in easing or eliminating knee pain is *genicular radiofrequency ablation*. An electrical current produced by a radio wave is used to heat up a small area of nerve tissue, thereby decreasing pain signals to that specific location.

"And then, of course, there is *prolotherapy*—and I continue to be one of very few physicians in North Carolina who offer this approach, which is often dramatically effective for long-term pain relief."

Prolotherapy, Dr. Duncan explains, "is also known as regenerative therapy or nonsurgical ligament reconstruction and is a treatment for chronic pain—including knee pain. 'Prolo' is short for proliferation, because the treatment causes the proliferation of new ligament tissue in areas where it has become weak.

"Ligaments are the structural 'rubber band' that hold two bones together at the joints. Ligaments can become weak or injured and may not heal back to their original strength or endurance. This is largely because the blood supply to the ligaments is limited, and therefore healing is slow and not always complete.

"To further complicate this, ligaments also have many nerve endings and therefore the person will feel pain at the areas where the ligaments are damaged or loose.

"Prolotherapy is based on the simple, profound fact that the body has the innate ability to repair itself."

THE PATH TO PAIN RELIEF

Pr. Duncan, a graduate of the Ohio University College of Osteopathic Medicine, completed the residency program in physical medicine and rehabilitation at Case Western Reserve University, aligned with the MetroHealth Medical Center in Cleveland.

She is board certified by the American Board of Physical Medicine and Rehabilitation, the American Osteopathic Board of Rehabilitation Medicine, and in the subspecialty of Pain Medicine, and is a member in good standing of the American Academy of Physical Medicine and Rehabilitation, the American Osteopathic College of Physical Medicine and Rehabilitation, the American Osteopathic Association, and the International Spine Intervention Society.

"Prolotherapy uses solutions called proliferants that are injected into the ligament or tendon where it attaches to the bone. It can also be injected into the joints themselves. This causes a localized inflammation in these weak or degenerated areas, which then increases the blood supply and flow of nutrients and stimulates the tissue to repair itself. It is based on the simple, profound fact that the body has the innate ability to repair itself."

Dr. Duncan emphasizes that, "when considering prolotherapy for pain relief—for the knee or elsewhere where it may be an appropriate choice—an important first step is to get expert advice and evaluation for a painful condition. The average number of prolotherapy treatments to reduce specific pain, such as in the knee, is four to six."

Dr. Duncan has successfully treated a wide range of patients with prolotherapy throughout the region for over 20 years.

