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Percutaneous disc compression using coblation for lower back pain

Understanding NICE guidance –
information for people considering
the procedure, and for the public

Ordering information

You can download the following documents from www.nice.org.uk/IPG173

- this booklet
- the full guidance on this procedure.

For printed copies of the full guidance or information for the public, phone the NHS Response Line on 0870 1555 455 and quote:

- N1037 (full guidance)
- N1038 (information for the public).

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About this information

The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health. One of NICE's roles is to produce guidance (recommendations) on whether interventional procedures are safe enough and work well enough to be used routinely in the NHS in England, Wales and Scotland.

This information describes the guidance that NICE has issued on a procedure called percutaneous disc compression using coblation. It is not a complete description of what is involved in the procedure – the patient's healthcare team should describe it in detail.

NICE has looked at whether percutaneous disc compression using coblation is safe enough and works well enough for it to be used routinely for the treatment of lower back pain.

To produce this guidance, NICE has:

- looked at the results of studies on the safety of percutaneous disc compression using coblation for lower back pain and how well it works
- asked experts for their opinions
- asked the views of the organisations that speak for the healthcare professionals and the patients and carers who will be affected by this guidance.

This guidance is part of NICE's work on 'interventional procedures' (see 'Further information' on page 10).

About the procedure

Percutaneous disc decompression using coblation is a procedure for treating what's known as discogenic pain in the lower back. Discogenic pain is caused when one or more of the tough discs that sit between the bones of the spine (called vertebrae) become damaged.

Usually, discogenic pain is treated with medicines and/or a health programme that may include, for example, exercises. If this doesn't help, the person may be offered surgery on their back that will fuse ('weld') two of the vertebrae together.

Percutaneous disc compression using coblation may be helpful for people who have back and leg pain caused by a limited hernia of a disc that presses against nerves in the spine. A needle is put into the disc that's causing the problem. (X-rays are used to help find the correct positions.) A narrow device inserted through the needle is then put into the disc. The device is heated up to a temperature between 40°C and 70°C. The heat destroys the centre of the disc and creates a channel. When the right amount of the disc has been destroyed the device is taken out. The procedure is repeated until about six channels are made in the disc. The number of channels made with the device depends on how much tissue needs to be removed.

How well the procedure works

What the studies said

The only information about how well the procedure works is from four studies. In the largest study, more than half the patients no longer had symptoms and had returned to full daily activity 15 days (51% of patients) and 1 year after the operation (56% of patients).

Another study looked at how well 69 people were doing a year after their treatment. Three quarters of these patients had less pain a year after the procedure than they did before treatment. More than half of these patients said that their pain had reduced by at least half after a year. Pain when sitting improved in 54% of patients (37 out of 69), pain on standing improved in 43% of patients (30 out of 69) and pain on walking improved in 49% of patients (34 out of 69).

It is difficult to say how well the procedure works because there is not enough information. There is no information about how well the treatment works in the long run, after more than a year. Also, how well people do after the procedure compared with how well they might have done without it is not known. The pain might have improved for some of them without having the procedure.

What the experts said

The experts were not certain how well the procedure works.

Risks and possible problems with the procedure

What the studies said

Three out of the four studies reported that there were no problems during the procedures. This may have been because problems are uncommon or because they were not carefully looked for and reported. In one large study of 1390 patients, 5% of patients had pain in their lower back and muscle contraction at up to 10 days follow-up.

What the experts said

The experts did not note any particular concerns about the safety of the procedure. However, they mentioned that damage to nerves, infections, bleeding (haemorrhage) and pain getting worse were all problems that could possibly arise.

What has NICE decided?

NICE has decided that, if a doctor wants to carry out percutaneous disc compression using coblation for lower back pain, he or she should make sure that the patient understands what is involved and that while there are no major safety concerns there are still uncertainties about how well it works. There should be special arrangements in place so that the patient only agrees (consents) to the procedure after this discussion has taken place.

NICE is asking doctors to collect information about every patient who has the operation and what happens to them afterwards including in the longer term so that the safety of the procedure and how well it works can be checked over the long term.

NICE may look at the procedure again if more information is published.

What the decision means for you

Your doctor may have offered you percutaneous disc compression using coblation for lower back pain. NICE has considered this procedure because it is relatively new. NICE has decided that there are uncertainties about the benefits and risks of percutaneous disc compression using coblation for lower back pain, which you need to understand before you agree to it. Your doctor should discuss the benefits and risks with you. Some of these may be described above.

Further information

You have the right to be fully informed and to share in decision-making about the treatment you receive. You may want to discuss this guidance with the doctors and nurses looking after you.

The NICE website (www.nice.org.uk) has further information about NICE, the Interventional Procedures Programme and the full guidance on percutaneous disc compression using coblation for lower back pain that has been issued to the NHS. The evidence that NICE considered in developing this guidance is also available from the NICE website.

NICE has also issued guidance on percutaneous intradiscal electrothermal therapy (www.nice.org.uk/IPG081) and percutaneous intradiscal radiofrequency thermocoagulation for lower back pain (www.nice.org.uk/IPG083).

If you have access to the internet, you can find more information on back problems on the NHS Direct website (www.nhsdirect.nhs.uk).

You can also phone NHS Direct on 0845 46 47.



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