Winter is the time of year for increased falls and trauma. Elderly females, in particular, are at greater risk to have compression or crush fractures. This painful spine condition can be mended with a Kyphoplasty procedure.

A vertebral body compression fracture occurs from trauma and an underlying illness that weakens the bony mesh work that support the back's bones or vertebral bodies. Over time or from other illnesses like cancer the lattice network of calcium in our bones become less dense. This is often seen in osteopenia and osteoporosis. A traumatic event like a fall may cause a fracture in the spine. When the fracture decreases the height of the vertebral bodies it is known as a compression fracture. Almost two-thirds of spinal compression fractures are never diagnosed because many patients think their back pain is merely a sign of aging and arthritis. Osteoporosis thins the bones making them become weak and unable to bear the normal weight and pressures of daily activities. Swelling from inflammation associated with the fracture can be very painful. The pain can be adjacent to the site of the fracture but may also present in different places in the back. It can be so severe that conventional pain medication will not adequately help. This pain may linger for months causing many negative consequences.

If the fracture does not have any bone obstructing the spinal canal and is deemed acute, a Kyphoplasty can be used to alleviate the pain and restore height from the compression caused by the fracture. In a Kyphoplasty procedure a needle is introduced to the fracture site. It deploys a balloon to reverse some of the compression deformity, increase the density of the remaining bone, and provide a cavity to place special cement. The cement neutralizes the inflammation in the fracture and can provide immediate relief.

A Kyphoplasty is not for everyone, but is an amazing tool to help specific patients with excruciating back pain. Prevention of these fractures remains the gold standard and if you have a diagnosis of osteopenia or osteoporosis it is crucial that you take calcium supplementation.

Symptoms of a Compression Fracture

A compression fracture is diagnosed by X-rays, CT scans, and MRIs of the spine. Symptoms that may indicate a compression fracture include:

- Sudden, severe back pain that may or may not be associated with or without trauma.
- Increased pain when standing or walking or with activity.
- Acute back pain that does not improve with the use of medication.
- Height loss, however this is typically more noticeable with multiple level compression fractures. As multiple levels of vertebrae collapse, the height loss becomes more noticeable.
- Deformity of the spine. Usually seen as a curve or “hunchback” shape in the back, termed kyphosis.
- Abdominal pain can possibly occur due to the shorter spine putting pressure on the stomach leading to stomach and digestive issues such as loss of appetite, constipation and weight loss.
- Breathing difficulty typically only occurs due to severe spinal compression. The significant compression causes the lungs to not expand fully.

Happy New Year! As we begin 2016, let’s review the Pain and Spine Center rules, policies and role in your healthcare.

- Any patients who are considered to be on high doses of pain medication will be required to come in for monthly visits per the Drug Enforcement Agency (DEA) recommendation. Monthly visits will help decrease lost prescriptions, overusing medication and call backs to the resource nurse/NP.
- Patients who need to change prescriptions must schedule an office visit. Therefore, if a patient is placed on a new medication or the existing medication has been adjusted and the patient wants/needs to re-adjust medications, an office visit is required. Phone calls to the resource nurse or physicians will no longer be accepted. Medication changes must be made during an office visit.
- As a pain center, we strive on giving you the best care possible in regards to pain management. Please refer all primary care issues or questions to your Primary Care Physician (PCP). If you don’t have a PCP, we will be happy to provide patients with the referral line for a list of excellent primary care providers.
- Urine drug screens are performed per DEA recommendations. We understand the financial implications of having multiple drug screens per year. These screens help us keep patients in medication compliance. Any refusal to perform a urine drug screen will lead to discharge.
- We strive for a safe and healthy environment for our patients. We ask that all patients refrain from aggressive, threatening or abusive behavior. Rude/foul language will not be tolerated in our office.
- Please remember that we have a 15 minute-late time policy. If you are late more than 15 minutes, please reschedule. We cannot “squeeze” patients in past their time as we are scheduled with other patients and it is not fair to have those patients wait.
- At the Pain Center, our physicians aim to keep all of your physicians updated as to your medical care with pain management. Please inform us of any physician changes or if you would like your office visit notes to be sent to specific physicians.
- Finally, please be mindful of cell phone etiquette. Calls should only be made in the building lobby. No cell phone use will be tolerated in the procedure area.

Weather and Joint Pain: Does Cold or Rain Affect Pain?

by Michele Chen, ANP-BC

The subject of bad weather affecting joint pain has been controversial for many doctors and scientists over the years. Most of the research articles prior to 2000 report that there is no true connection between cold/rainy weather and an increase in joint pain. Interestingly, upon researching the subject, we have found many more articles after 2000 that support the correlation. Many studies have been performed on patients who suffered from rheumatoid arthritis, osteoarthritis, and fibromyalgia. One of the larger studies was recently performed on 810 people with osteoarthritis of the knee, hand, or hip. According to the article in the Journal of Rheumatology, there was found to be a direct increase in joint pain with increased humidity that occurs during cold/rainy weather (Timmermans, et. al., 2015).

Another research article described types of pain being affected by types of weather. Specifically, pain was affected positively by air pressure and temperature in rheumatoid arthritis patients, by temperature, rain, and air pressure in osteoarthritis patients, and by air pressure in fibromyalgia patients (Weinberger, 1990).

Researchers are encouraged by the new results and are calling for further research. Their goal is to continue documenting the correlation to pain/inflammation and the possibility of different treatment options that respond to weather changes. Although substantial evidence for treatment options are not available yet, it is encouraging that research has taken a new path with hopefully beneficial options in the future.


New Year, New Insurance

A NEW YEAR may equal NEW insurance, deductible and copays and/or coinsurance; moreover, some insurances may require up to 30 days wait time for authorizations. Here are some common terms defined:

DEDUCTIBLE: A fixed dollar amount during the benefit period—usually a year—that an insured person pays before the insurer starts to make payments for covered medical services. Plans may have both per individual and family deductibles.
- Some plans may have separate deductibles for specific services. For example, a plan may have a hospitalization deductible per admission.
- Deductibles may differ if services are received from an approved provider or if received from providers not on the approved list.

COPAYMENT: A form of medical cost sharing in a health insurance plan that requires an insured person to pay a fixed dollar amount when a medical service is received. The insurer is responsible for the rest of the reimbursement.
- There may be separate copayments for different services.
- Some plans require that a deductible first be met for some specific services before a copayment applies.

COINSURANCE: A form of medical cost sharing in a health insurance plan that requires an insured person to pay a stated percentage of medical expenses after the deductible amount, if any, was paid.
- Once any deductible amount and coinsurance are paid, the insured is responsible for the rest of the reimbursement for covered benefits up to allowed charges: the individual could also be responsible for any charges in excess of what the insurer determines to be “usual, customary and reasonable”.
- Coinsurance rates may differ if services are received from an approved provider (i.e., a provider with whom the insurer has a contract or an agreement specifying payment levels and other contract requirements) or if received by providers not on the approved list.
- In addition to overall coinsurance rates, rates may also differ for different types of services.

Each insurance company defines the patient’s deductible, copay and coinsurance. If you have questions about your coverage, contact your insurance company for more in-depth explanations.

Top Doctor Honors

Kenneth H. Joel, MD and M. Shazad Wada, MD were recently Recognized for Excellence in Anesthesiology and Interventional Pain Management for Roswell, GA 2016.

Reminders

- Your driver is **REQUIRED** to stay in the waiting area until the patient is discharged. **NO TAXI OR UBER** can be used as a driver. Only Medical Transports are acceptable.
- As temperatures drop, conditions may become icy and snowy. When harsh weather is forecasted, keep in mind your medication pill counts. If the weather is too difficult to drive, our office will be closed and appointments rescheduled, so please manage your medications accordingly.
- If the office is closed due to inclement weather, please be patient. Our staff will return phone calls and reopen as soon as it is safe to travel.
- If you are ill, especially with a fever, nausea or vomiting, please do not come for your visit and call to reschedule.
- If the office is closed due to weather, please do not come to the office requesting samples of medications. Many of the medications prescribed are not available in sample form and are never held in our office.
- We do accept self-referrals. However, if you are using insurance, your policy may require a referral from your Primary Care Doctor. Please ask your insurance company if one is needed.