

LONDON SPINE CLINIC™



Newsletter

Summer 2017

Who we are

The London Spine Clinic has been established as a multi-disciplinary centre of excellence for all spinal care, since 1997. Our aim is to bring together all the advantages of our different specialties, in order to provide holistic treatment for our patients. The emphasis of our practice is very much directed to providing the least invasive treatment for spinal problems.

Neuromodulation—Spinal cord Stimulation for Pain at LSC

Pain Control - The team approach

We are delighted to announce that **Dr Moein Tavakkoli**, Pain Specialist, has joined the clinical team at the London Spine Clinic. Moein is holding clinics on Monday, Wednesday and Friday.

As well as all the routine aspects of running a pain clinic, including prescribing, arranging pain management, working with our counsellor, **Tikkii Mawson**, and performing interventional pain procedures, Moein has a particular interest in Neuro-Modulation. Together with **Mr Pereira**, Neurosurgeon, Moein has established the Neurostimulator Unit at the London Spine Clinic.

Spinal cord stimulation, for chronic refractory pain states has a long track record; Mr Sutcliffe has undertaken many such procedures over the last 24 years, both initially in the NHS at the Royal London Hospital and subsequently at the London Spine Clinic. Most patients treated have some degree of improvement in their pain. Please see the data on page 2, together with information about how the technique is used.

Much of the treatment can be performed on an out-patient or day-case basis, the procedures being short and the recovery fast.

The London Clinic are able to offer a package price, to self pay patients or insurers, for this procedure, which is approved and covered by most medical insurers.



Dr Moein Tavakkoli
Pain Specialist

Queen Square Hospital

Pain management

Drug management

Interventional techniques

Spinal cord stimulation



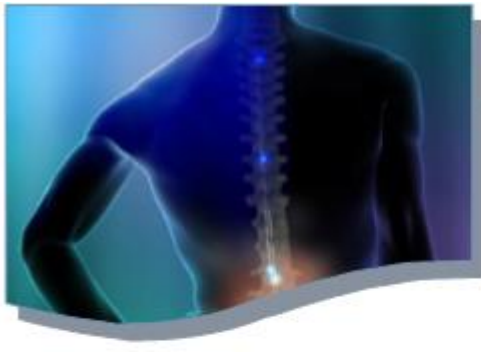
Mr Erlick Pereira
Neurosurgeon

St George's Hospital

Functional neurosurgery

Spinal cord stimulation

Spinal surgery



Neuro-stimulation and pain

Spinal cord stimulation SCS

The concept of masking pain by introducing another stimulus, was first introduced by Wall and Melzack in 1965. Their “gate theory” of pain suggested pain transmission along a certain nerve could be reduced if another sensation was introduced along the same nerve. The nerve “switched” from transmitting the pain, to the new sensation. This is the rubefacient effect, typically seen where a child bangs a leg and rubs the skin, feeling the rubbing rather than the pain from the initial injury.

Whilst an attractive theory, it has not been validated, but the concept remained and led to the development of techniques to mask pain. The commonest clinical application, is transcutaneous electrical nerve stimulation, TENS, one of the most widely used systems, even in the labour ward setting.

SCS is a step up from this, introducing electrodes into the spinal canal, in the epidural space, to allow the dorsal columns of the cord to be stimulated. This can reduce the transmission of pain signals, the precise mechanism being unknown. New systems are now available, where the frequency of stimulation is so high, that the patient cannot feel it; others create a tingling in the distribution of the pain. Dorsal root ganglion **DRG** stimulation is now being used for complex regional pain syndromes, such as those seen after operations or with diabetes

Where this is found to give good pain relief, the electrodes are connected to an internal stimulator, which the patient can control, rather like a cardiac pacemaker.



Different patterns of electrode configurations are available some implanted at operation, others through a needle.



Pulse generator connected and buried under the skin in a suitable location, chosen by the patient.

Two studies from the same group a decade apart:

Acta Neurochir Suppl. 1995;64:106-8. North RB, Kidd DH, Piantadosi S.

Spinal cord stimulation versus reoperation for failed back surgery syndrome: a prospective, randomized study design.

Results for the first 27 patients reaching the 6-month crossover point show a statistically significant ($p = 0.018$) advantage for spinal cord stimulation over reoperation

Neurosurgery. 2005;56(1):98-106; discussion 106-7. North RB, Kidd DH, Farrakhi F, Piantadosi SA.

Spinal cord stimulation versus repeated lumbosacral spine surgery for chronic pain: a randomized, controlled trial

SCS is more effective than reoperation for persistent radicular pain after lumbosacral spine surgery

Tikkii Mawson—Nurse counsellor at LSC

Since qualifying as a counselling therapist in 2006 Tikkii has built a successful private practice, offering tailored person centred counselling to a wide clientele who over the years have presented with a variety of issues and personal problems. Tikkii is registered as a practicing counsellor with the British Association for Counselling and Psychotherapists.

Tikkii originally qualified as a nurse at Kings College Hospital in 1982 where her practice as a counselling therapist has been enhanced by also having 34 years of nursing experience under her belt. One of the many areas of Tikkii's expertise lies in her ability to recognise the often complex underlying psychological issues that are frequently present with people who experience chronic pain as well as physical trauma and learning to come to terms with life changing physical conditions.

Counselling therapy with Tikkii provides an opportunity for individuals who are experiencing difficulty in any areas of their lives to explore their problems in a safe and supportive environment. Consequentially helping individuals to gain clarity and understanding of their situations as well as empowering them to make changes that have a positive effect and promote wellbeing.

Patients who are considering undergoing interventional procedures, injections or surgery, are routinely seen in advance by Tikkii. Many of the anxieties about these procedures can be addressed, together with the stress and often depression caused by the condition from which the patient suffers. Stressful lives, of course, can contribute to spinal problems, because of the tension in the muscles which this causes.

Tikkii runs a clinic weekly every Tuesday at LSC.



Spinal orthopaedic surgeons joining the team

We are delighted to announce that two Spinal Surgeons, both with considerable clinical experience, have joined the team at the London Spine Clinic. More details will be sent in our forthcoming newsletter, outlining the practice developments that their particular skill sets have allowed.



Mr Patrick McKenna Orthopaedic Spine Surgeon



Mr Panos Liantis Orthopaedic Spine Surgeon

How to find us:-

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Dr Moein Tavakkoli (Pain Specialist)

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Tikkii Mawson (Nurse Counsellor)

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For information regarding the new surgeons joining please call :
0207 616 7720 and press Option 5