

Endoscopic laser foraminoplasty

1 Guidance

- 1.1 Current evidence of the safety and efficacy of endoscopic laser foraminoplasty does not appear adequate to support the use of this procedure without special arrangements for consent and for audit or research. Clinicians wishing to undertake endoscopic laser foraminoplasty should inform the clinical governance leads in their Trusts. They should ensure that patients offered the procedure understand the uncertainty about its safety and efficacy and should provide them with clear written information. Use of the Institute's *Information for the Public* is recommended. Clinicians should ensure that appropriate arrangements are in place for audit or research. Further research into safety and efficacy outcomes will be useful in reducing the current uncertainty. NICE is not undertaking further investigation at present.

2 The procedure

2.1 Indications

- 2.1.1 Endoscopic laser foraminoplasty is used mainly to treat chronic back and leg pain from a variety of causes. Annually, 2–5% of people suffer acute back pain, and 0.5% of these have pain and neurological conditions requiring surgery.

2.2 Outline of the procedure

- 2.2.1 This endoscope-assisted laser technique is used to widen the lumbar exit foramina for nerves from the lumbar spine. A laser is inserted to ablate portions of the intervertebral disc that have protruded and caused narrowing of the foramina.

2.3 Efficacy

- 2.3.1 The research on efficacy undertaken to date is based on case series only and has all been led by a single clinician. In general, pain was decreased after the procedure. For more details, refer to the sources of evidence below.
- 2.3.2 The Specialist Advisors believed the efficacy of this procedure to be unproven.

2.4 Safety

- 2.4.1 The research on safety undertaken to date has all been led by a single clinician. The rates of reported complications were low, with discitis and neurological deficit being the most common (both with incidence lower than 1%). For more details, refer to the sources of evidence below.
- 2.4.2 The Specialist Advisors noted a number of potential complications including nerve injury and infection.

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This guidance is written in the following context:

This guidance represents the view of the Institute which was arrived at after careful consideration of the available evidence. Health professionals are expected to take it fully into account when exercising their clinical judgement. This guidance does not, however, override the individual responsibility of health professionals to make appropriate decisions in the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

3 Further information

3.1.1 NICE has also issued guidance on laser lumbar discectomy (IPG027). Guidance on prosthetic intervertebral disc replacement, percutaneous intradiscal electrothermocoagulation and percutaneous radiofrequency thermo-coagulation are currently in progress and will be published in 2004 after public consultation.

Andrew Dillon
Chief Executive
December 2003

Information for the Public

NICE has produced information describing its guidance on this procedure for patients, carers and those with a wider interest in healthcare. It explains the nature of the procedure and the decision made, and has been written with patient consent in mind. This information is available from www.nice.org.uk/IPG031publicinfoenglish and in English and Welsh from www.nice.org.uk/IPG031publicinfowelsh.

Sources of evidence

The evidence considered by the Interventional Procedures Advisory Committee is described in the following document.

Interventional procedure overview of endoscopic laser foraminoplasty, October 2002

Available from:
<http://www.nice.org.uk/IP023overview>

Ordering information

Copies of this guidance can be obtained from the NHS Response Line by telephoning 0870 1555 455 and quoting reference number N0394. *Information for the Public* can be obtained by quoting reference number N0395 for the English version and N0396 for a version in English and Welsh.

The distribution list for this guidance is available on the NICE website at URL www.nice.org.uk/IPG031distributionlist

Published by the National Institute for Clinical Excellence, December 2003 ISBN: 1-84257-468-X

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National Institute for Clinical Excellence

MidCity Place, 71 High Holborn, London WC1V 6NA, website: www.nice.org.uk

N0394 1P 5k Dec 03 (ABA)