As we perform a large number of blocks under fluoroscopy, we looked for an X-ray TV system that could be used for treatment, that supported table elevation, and most importantly, that supported oblique fluoroscopy. We considered other manufacturers’ systems, but in addition to having too many functions, they occupied too much space, necessitating a large danger zone, and were expensive. While incorporating all the functions required for treatment, FLEXAVISION was the most cost effective. It also has a neat, unimposing design.

At our clinic, we are using FLEXAVISION for a variety of treatments, including facet blocks (intervertebral joint blocks), which we perform around 20 to 30 times a day, nerve root blocks, intervertebral disc pressure injections, sympathetic nerve blocks, and blocks of the maxillary and mandibular nerves in the neck. Although patients come to our clinic because they suffer from pain, in the past I have had to ask patients to adopt uncomfortable postures in order to facilitate treatment. FLEXAVISION supports oblique fluoroscopy and so the equipment can be moved freely into the position that is most comfortable for the patient and that also affords good visibility for treatment. Having the patient move into position and maintain posture requires a lot of time. FLEXAVISION places no burden on the patient and consequently helps increase treatment speed. In some cases, treatment is completed in as little as one minute.

The oblique projection function affects safety and the success rate and should be installed. Mistakes in procedures such as blocks can lead to dangerous conditions such as paralysis of the lumbar spine and, if the cervical spine is affected, respiratory arrest. Treatment must therefore be performed speedily, reliably, and safely. The oblique projection function was needed to attain this level of performance. Even with special block procedures, the degree of difficulty and safety depends largely on whether or not the oblique projection function is available. The oblique projection function should be installed in the system, even if it is only used a few times. It affects the safety, the burden on the patient, and the success rate.

The table elevation function offers significant benefits. The system is equipped with a table elevation function and so we adjust the table to a height that is suitable for the procedure being performed. Many of our patients arrive in a wheelchair or on a stretcher and many go home on a stretcher after nerve root blocks and so the availability of an elevation function makes a considerable difference. We do not bring the table up into the upright position during treatments and so we have removed the handles. When moving the patient onto a stretcher after treatment, we align the table height with the stretcher and have the patient slide over while maintaining a horizontal position. The table elevation function makes it unnecessary to lift the patient.

Satisfactory fluoroscopy can be performed with a low dose. In the period of just under a year since our clinic opened, we have performed radiography for around 2,500 cases. The image quality attained with FLEXAVISION is considerably greater than that attained with the X-ray TV that we used previously. In fluoroscopy of the lumbar spine, although we greatly lower the dose in order to reduce exposure to the patient, we still obtain satisfactory images.

A word to doctors thinking of introducing this system: FLEXAVISION supports oblique fluoroscopy and incorporates a table elevation function that allows the table to be set in a low position. It is highly cost effective. For a pain clinic, any other system would be inconceivable.