

GASTROSCOPY • DIAGNOSTIC AND THERAPEUTIC COLONOSCOPY • WIRELESS CAPSULE ENDOSCOPY

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ACNES patient information

Abdominal Cutaneous Nerve Entrapment Syndrome (ACNES) is the most common cause of undiagnosed/poorly diagnosed cause of persistent abdominal pain. It is caused by the impingement of the nerve supplying the skin of the abdominal wall as it goes through the "six pack" or rectus abdominis muscle.

Treatment

Steroid Injection

Initial treatment is with an ultrasound marked injection of steroids into the abdominal wall precisely at the site of pain. There is usually only one point of pain, but multiple affected areas are also common. Patients can expect about 30 seconds of pain during the injection if the needle is in precisely the right location. The pain will then disappear when the local anaesthetic is administered, and takes effect for about 6 to 12 hours.

The pain may then increase for a few weeks after the injection, as the steroid may irritate the nerve.

Dr Chin will contact you 3 weeks after the initial injection with a follow-up appointment. If you only have a partial response, he will offer you up to another 2 injections at least one month apart. Response rates with steroid injections is in the order of 75%.

Other treatments

If the response to treatment is unsatisfactory after 3 steroid injections, other options will have to be considered. This includes a referral to a Pain Physician such as, Dr Cliff Timmons for a trial of Pulse Radiofrequency Ablation (pRFA). This is a new technique where a needle probe is inserted next to the offending nerve and a radio wave is used to "deactivate" the nerve. It is thought that the brain will retrain itself to ignore abnormal signals from the offending nerve when/if it starts to function again in 6 to 18 months after the procedure.