

Oral Presentation

Facet Joint Injections for the Management of Low Back Pain: A Clinical Review

About AlJabari

Introduction

Lumbar facet joints have been implicated in chronic low back pain (LBP) in up to 45% of patients with LBP. Facet joint pain (FJP) diagnosis and management are always challenging for pain physicians. FJP is not diagnosed by specific demographic features, pain characteristics, or physical findings, despite the electrodiagnostic studies and imaging modalities being available. Although comparative local anesthetics or placebo saline injections can be used, diagnostic blocks are the only reliable diagnostic measures according to the current literature.

Methodology

A randomized, controlled clinical trial was conducted to evaluate the effectiveness of lumbar facet joint injections. A total of 229 participants were enrolled to receive facet injections with bupivacaine and steroid, medial branch blocks, or saline.

Result

The results of this study showed that facet joint injections had little long-term therapeutic utility, but had a prognostic value compared to control injections before radiofrequency ablation. Thus, the results of this study emphasized the diagnostic value of facet joint injections.

Conclusion

FJP is not diagnosed by demographic features, pain characteristics, physical findings, electrodiagnostic studies, or radiological evaluation as other types of LBP. Diagnostic blocks using comparative local anesthetic blocks or placebo injections are the only reliable diagnostic measures according to the current literature. Their validity, specificity, and sensitivity are considered reliable in the diagnosis of FJP. Facet joint-related anatomical, clinical, and technical knowledge is essential for successful pain management. Pain physicians should embrace all aspects of FJP management, from diagnosis to interventional management.

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