Short Term Outcome Study Of Intradiscal Steroid Injection In Treating Patients With Discogenic Low Back Pain

¹Ismail MS, ¹Nik Mazian AR, ¹Yusof Z, ¹Omar AS ¹Department of Orthopedics, Hospital Raja Perempuan Zainab II, Kota Bharu

INTRODUCTION:

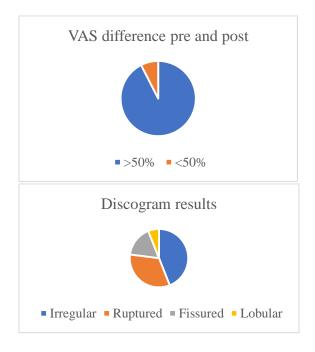
This study is to evaluate the clinical outcome of patients who underwent diagnostic discogram together with intradiscal steroid injection.

METHODS:

A cross sectional study was conducted at Hospital Raja Perempuan Zainab II from January 2017 until December 2017. A total number of 36 patients were included but data is available for only 27 patients. Discogram was performed at the affected disc based on MRI, the concordant pain were recorded followed by intradiscal steroid injection with 3cc ropivacaine plus 40mg triamcinolone. Discogram pattern was recorded. The effectiveness of intradiscal steroid injection was investigated using Visual Analogue Score (VAS). Baseline data were obtained before the procedure and clinical outcome was evaluated by VAS assessed at 6 weeks and 3 months post procedure. We defined the successful outcome as more than 50% reduction of the VAS.

RESULTS:

From the total 27 patients; 15 were male (56%) and 12 were female (44%). 20 patients (74%) reported concordant pain during discogram. 18 patients had single level discogram while remaining 9 patient had two level discogram. From total of 36 discogram recorded, noted 16 irregular (44%), 12 ruptured (33%), 6 fissured (17%), 2 lobular in shape (6%). 25 patients (92.5%) had significant pain reduction (pre and post VAS difference > 50%).



DISCUSSIONS:

Inflammatory disc disease have been postulated to be one of the cause of low back pain. MRI have good sensitivity to point the affected disc. Discogram is useful to demonstrate the pattern of affected disc together with concordant pain. Steroid is used to suppress the inflammatory process within the affected disc. The majority of our patients had significant reduction of VAS after intradiscal steroid injection.

CONCLUSION:

The result suggested that intradiscal steroid injection can improve the short term clinical outcomes in patient with discogenic back pain.

REFERENCES:

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