PERCUTANEOUS VERTEBROPLASTY AND FACET JOINT BLOCKAGE FOR TREATMENT OF BACK PAIN

Guenther E. Klein

Professor and Head, Section of Neurointervention, Department of Radiology, University Hospital Graz

Vertebral osteoporotic/metastatic compression fractures cause severe pain associated by immobility and therefore reduction of quality of life which may result in depression.

Since conservative treatment has shown to be ineffective and surgical treatment bearing risk of complications, percutaneous techniques have been introduced for therapy. Vertebroplasty was descripted first in 1987 in France by Galibet and Deramond. Over the last ten years there has been significant development in the therapeutic strategies for vertebral fractures using vertebroplasty. Today this percutaneous procedure for relief of

back pain in selected patients is also costeffective when performed by experienced interventionalists. Indication for vertebroplasty include osteoporotic fractures and osteolytic changes in the vertebral bodies caused by metastasis. Improvement of technique and increased experience reduced the risk of complications. The rate of pain relief reaches 90-95%, the rate of complications from 0,5% (osteoporotic) to 2% (metastatic).

Degenerative changes of facet joints can be a source of back pain. The goal of interventional percutaneous treatment by injection of anesthetic and steroid drugs is to provide pain relief.