

عنوان مقاله:

Cervical Epidural Steroid Drug Injection: Parasagittal approach as an alternative to the midline approach in patients with unilateral cervical radicular pain; a comparative randomized clinical trial

محل انتشار:

نوزدهمین کنگره پژوهشی سالانه دانشجویان علوم پزشکی کشور (سال: 1397)

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خلاصه مقاله:

Background and objectives: Cervical epidural steroid injection (CESI) is one of the most commonly performed interventions in management of upper extremity radicular pain. This study was aimed to make a comparison between parasagittal interlaminar CESI (PSIL-CESI) and the classic midline interlaminar CESI (MIL-CESI) in terms of alleviation of pain and reduction of functional disability in patients with unilateral upper extremity radicular pain. **Materials and methods:** In a parallel randomized double-blind clinical trial with ethic code IR.SBMU.RETECH.REC.1397.163, 26 patients were allocated into two groups of 13 patients undergoing either PSIL-CESI or MIL-CESI. After confirmation of radiocontrast spread in the epidural space by fluoroscopic guidance, dexamethasone 8 mg and bupivacaine 0.125% in a volume of 5 ml were delivered to the epidural space. Evaluation of functional state and pain intensity before and 1 month after the procedure was accomplished using the neck disability index (NDI) and the numeric rating scale (NRS) respectively. **Findings:** Improvements in the NDI and the NRS were observed in both groups; meanwhile, improvements were more pronounced in the PSIL-CESI group as compared to the MIL-CESI group ($P < 0.001$). With the PSIL approach the ventral spread of radiocontrast was significantly higher (38%) than with the MIL approach (0.7%) ($P < 0.001$). All patients in PSIL group showed radiocontrast spread ipsilateral to the painful side and all patients in the MIL group showed a midline distribution of radiocontrast. **Conclusion:** PSIL-CESI provides superior pain relief and improvement of functional disability in patients with unilateral upper extremity radicular pain in comparison to the classic MIL-CESI.

کلمات کلیدی:

Cervical Epidural, Midline, Parasagittal, Ventral Distribution, Radicular Pain, Disc Herniation

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