What is Facet-Mediated Low Back Pain?

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The “Facet Joint” is a small joint in the spine, which connects two vertebrae together from the back portion of the spine (behind the spinal cord and spinal nerves). There is one facet joint on each side (left and right) from the neck (cervical spine) to the low back (lumbar spine). These joints provide stability and allow the spine to move properly.

As we age, these joints can become arthritic (worn down) and can cause low back pain. It tends to affect individuals in their late 40s and beyond, but anyone with earlier onset arthritis can be affected.

The typical presentation of someone with “Facet-Mediated Low Back Pain” is low back pain, which is worse with activities (such as walking and standing), and better with sitting. The pain is either on the left, right, or both sides of the low back, and does not travel down the legs. It does not result in tingling, numbness, or weakness of the legs. The back pain can make it challenging to maintain an active lifestyle.

What if these symptoms sound familiar to me?
If you or a friend or family member have symptoms suggesting facet-mediated low back pain, I recommend an evaluation by a physician who specializes in Back Pain. Your physician will perform an evaluation and determine if x-rays are necessary. An MRI is typically not needed, unless certain other causes need to be ruled out.

What are the treatment options?
The initial treatment often involves Physical Therapy to work on strengthening the spine and core in a neutral (straight) or flexed (bent forward) position of the spine. The goal of the therapy is to strengthen the back, reduce pain, and prevent further injury. Certain medications can also be helpful to reduce pain. If Physical Therapy does not alleviate a significant amount of pain, there are several Interventional Spine Procedures that can be considered.

One procedure involves injecting Cortisone (steroid) into the facet joints. Another procedure is a “Diagnostic Nerve Block” which temporarily blocks pain signals from the affected facet joint. Depending on the response to the diagnostic nerve block, one may consider “Radiofrequency Neurotomy” which involves burning these nerves to provide longer lasting relief of pain.

The preferred treatment options will be determined after evaluation and discussion with your treating doctor.

There are plenty of treatment options available and with the appropriate care you can maintain a happy and active lifestyle with this condition.

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