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Medial branch block versus medial branch radiofrequency ablation in patients with lumbar facet joint pain

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Background and Aims: Lumbar facet joint related pain is reported to have a prevalence of 15-45%. This prospective study was conducted to compare the efficacy of medial branch block with medial branch radiofrequency(RF) ablation in patients with lumbar facet joint pain.

Methods: Forty-six participants were randomised to Group-I (n=24) or Group-II (n=22). In Group-I, patients received fluoroscope guided medial branch block with 2ml drug solution comprising of 0.25% bupivacaine plus 10mg of triamcinolone and in Group-II, patients received fluoroscope guided medial branch radiofrequency ablation at a temperature of 80°C for 90 seconds using a RF generator. Patients were followed up for a period of three months. Numeric Rating Scale (NRS) Oswestry Disability Index (ODI) and Roland-Morris Questionnaire (RMQ) score were compared between the groups.

Results : NRS and ODI scores were found comparable between the two groups at all the time intervals (p>0.05). Significant reduction (RMQ score was found in Group-II at two weeks (p=0.003) and at one month (p=0.01); whereas, at two months and three months the scores were found comparable between the groups(p>0.05). Pain at injection/RF site was significantly less in Group-II (p=0.006). None of the patients reported any serious complications.

Conclusion: Both medial branch block and medial branch radiofrequency ablation provide good pain relief and improvement of disability in patients with lumbar facet joint pain. However, improvement in disability is early with medial branch radiofrequency ablation.

Keywords: Facet joint, nerve block, radiofrequency ablation

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