



SACROILIAC JOINT FUSION FOLLOW-UP STUDY

E. Jeffrey Donner, MD*; D. J. Browne, SA, PA-C

Loveland, CO

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PLACE: Meeting Room 2/3

Introduction

The purpose of this study was to evaluate the efficacy of posterior sacroiliac joint fusion for chronic intractable sacroiliac joint-related pain syndrome.

Materials & Methods

A three-year retrospective follow-up study was performed on 18 patients who had undergone a sacroiliac joint fusion with a posterior approach. Eighteen patients (25 SI joint fusions) were reviewed. There were 11 unilateral fusions and 7 bilateral fusions. The average duration of symptoms was 3.25 years. There was a minimum one-year follow-up with an average follow-up of 20 months. The indications for surgical treatment were chronic disabling SI joint pain which failed to improve with nonoperative treatment. The pain was localized to the SI joint using CT-guided or fluoroscopic-guided SI joint injections with an anesthetic and steroid solution. Discography and facet injections were often utilized to rule out possible lumbar pathology, and if they were significant pain generators, they were also treated simultaneously.

Results

Fourteen out of the 18 patients improved from the procedure. The average overall symptom improvement was 89 percent for unilateral fusions (range: 75 to 100 percent) and 79 percent for bilateral fusions (range: 50 to 100 percent). The average leg pain improvement was 86 percent.

Conclusion

Sacroiliac joint dysfunction and pain syndrome are real entities which can cause disabling pain. Diagnosis is primarily based on SI joint blocks as well as by eliminating other pain generators using discography and facet blocks. Sacroiliac joint fusion with a posterior approach with the addition of internal fixation is a reasonable treatment option.

Send your questions and comments about this abstract to Dr. Donner at the following email address:
mclachlan@aaos.com