

41 chronic low back pain patients, receiving [outpatient](#) sublingual [ketamine](#) therapy for defined central functional pain along with conventional peripheral structural pain management. The clinical model assigns Movement Dysfunction as the primary cause for low back pain symptoms and restores it with Movement Therapy focused rehabilitation which is also defined. Patients were derived from a tertiary single neurosurgical specialist practice in Brisbane Australia over a three year period.

Severe pain and disability measurements more than halved and only 13% of patients ceased ketamine prematurely due to predominantly non-sinister side effects common to all pharmaceutical therapies. All other surveyed metrics of utility were highly favourable in this challenging cohort of chronic back pain patients biased to poor outcomes.

Outpatient ketamine maintains high efficacy and safety used in conjunction with a unique clinical model that describes chronic low back pain <sup>1)</sup>.

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28 patients with low back pain, with a duration > 6 months and a 50% pain reduction on the [numeric analog scale](#) (NAS) after a diagnostic block. All patients received [endoscopic facet joint denervation](#) of three facets on the left and right side using only one incision on each side with an exploration of the surrounding tissue. Telephone interviews were conducted with all patients. The outcome was determined with Odom's criteria, percentage reduction NAS, subjective assessment of the patient, and duration of the effect.

According to Odom's criteria, 68% of the patients showed "acceptable" to "excellent" results and confirmed that denervation helped them manage their daily lives better. The average pain reduction in the responder group was 47% with an average duration of 7.8 months.

In this retrospective study, Woiciechowsky and Richter from the Vivantes-Humboldt-Klinikum, Spine Clinic, Spine Center Berlin, Charité Medical Faculty [Berlin](#), demonstrated the practicability and effectiveness of the endoscopic facet joint denervation procedure in the treatment of chronic low back pain using only one incision for three facets. Further studies should investigate if this procedure is more effective than percutaneous radiofrequency denervation <sup>2)</sup>.

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Fourteen patients with CLBP, greater than 6 months, unresponsive to at least 4 months of conservative care were enrolled. All patients were treated successfully following screening using [MRI](#) findings of [Modic](#) type I or II changes and positive confirmatory provocative [discography](#) to determine the affected levels. All patients underwent ablation of the [basivertebral nerve](#) (BVN) using 1414 nm Nd:YAG laser-assisted energy guided in a transforaminal epiduroscopic approach. Macnab's criteria and visual analog scale (VAS) score were collected retrospectively at each follow-up interval.

The mean age was  $46 \pm 9.95$  years. The mean symptoms duration was  $21.21 \pm 21.87$  months. The mean follow-up was  $15.3 \pm 2.67$  months. The preoperative VAS score of  $7.79 \pm 0.97$  changed to  $1.92 \pm 1.38$ , postoperatively ( $P < 0.01$ ). As per Macnab's criteria, seven patients (50%) had excellent, six patients (42.85%) had good, and one patient (7.14%) had fair outcomes.

The transforaminal epiduroscopic basivertebral nerve laser ablation (TEBLA) appears to be a promising option in carefully selected patients with CLBP associated with the Modic changes <sup>3)</sup>.

<sup>1)</sup>

Johnson D, Feng L, Johnson C. Retrospective review of the efficacy for sublingual ketamine in the

treatment of chronic low back pain defined by a cause and central functional pain symptom focused clinical model. Disabil Rehabil. 2023 Jun 1;1-8. doi: 10.1080/09638288.2023.2218652. Epub ahead of print. PMID: 37259521.

2)

Woiciechowsky C, Richter LM. Endoscopic 4-MHz Radiofrequency Treatment of Facet Joint Syndrome Is More Than Just Denervation: One Incision for Three Facets. J Neurol Surg A Cent Eur Neurosurg. 2020 Jan 14. doi: 10.1055/s-0039-1698397. [Epub ahead of print] PubMed PMID: 31935787.

3)

Kim HS, Adsul N, Yudoyono F, Paudel B, Kim KJ, Choi SH, Kim JH, Chung SK, Choi JH, Jang JS, Jang IT, Oh SH. Transforaminal Epiduroscopic Basivertebral Nerve Laser Ablation for Chronic Low Back Pain Associated with Modic Changes: A Preliminary Open-Label Study. Pain Res Manag. 2018 Aug 14;2018:6857983. doi: 10.1155/2018/6857983. eCollection 2018. PubMed PMID: 30186540; PubMed Central PMCID: PMC6112211.

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