Lumbar juxtafacet cyst treatment

Optimal treatment of the lumbar juxtafacet cyst remains controversial.

There is one case report of a cyst that resolved spontaneously 1).

If symptoms persist with conservative treatment, some promote cyst aspiration or facet injection with steroids ²⁾ while most advocate surgical excision of the cyst.

First-line treatment is nonsurgical management consisting of oral NSAIDs, physical therapy, bracing, epidural steroid injections, and/or cyst aspiration. Given the high rate of recurrence and the relatively low satisfaction with nonsurgical management, surgical options, including hemilaminectomy or laminotomy to excise the cyst and decompress the neural elements, are typically performed. Recent studies suggest that segmental fusion of the involved levels may decrease the risks of cyst recurrence and radiculopathy ³⁾.

Surgical removal of juxtafacet cysts is recommended for immediate symptomatic relief. Concomitant spinal fixation to prevent progression of spinal spondylolisthesis or cyst recurrence depends on cyst size, involvement of surrounding structures, degree of preoperative spondylolisthesis, and facet joint destruction ⁴⁾.

The controversy about conservative versus surgical treatment and the need for concomitant fusion still exists ⁵⁾.

Targeted Radiofrequency Ablation as an Adjunct in Treatment of Lumbar Facet Cysts 6.

There are three main non-surgical treatment options for synovial cysts in the lumbar spine:

Observation and activity modifications

General non-surgical treatments for pain relief

Injections

Observation and Activity Modification

If the synovial cyst is not creating a lot of dysfunction or pain in the patient's daily life, no medical treatments may be necessary. Since the pain is usually caused by certain positions, changing positions is a reasonable way to deal with the pain as long as a patient can still function adequately.

General Non-Surgical Treatments

In conjunction with activity modification, patients will typically find pain relief with a range of possible

nonsurgical remedies, including but not limited to:

Application of ice and/or heat, which is especially effective for activity related pain and discomfort

Pain medications, including non-steroidal anti-inflammatory medications (such as ibuprofen), acetaminophen, and/or prescription pain medications

Rest, which is most effective for brief periods, such as a few hours or a day or two

Almost all treatment regimens will include some form of exercise and stretching routine. For aerobic exercise, it may be preferable for the patient to try stationary biking instead of walking, because in the seated position (leaning forward) the patient should be fairly comfortable.

Lumbar juxtafacet cyst surgery

Lumbar juxtafacet cyst surgery.

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