

Paraspinal pyomyositis

- [Radiological Identification and Review of Lumbosacral Paraspinal Muscle Pyomyositis and Abscesses in a Young Male With Streptococcus Bacteremia: A Case Report](#)
- [Septic Arthritis of the Spinal Facet Joint: Review of 117 Cases](#)
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[Facet joint septic arthritis](#) is increasingly recognized in the era of magnetic resonance imaging, but its epidemiology, clinical features, management, and prognosis are ill-defined.

Ross et al. reviewed 101 previously published cases and report 16 cases occurring between 2006 and 2018.

Most patients presented with [fever](#) (60%) and back or [neck pain](#) (86%). [Radiation](#) into the hip, buttock, or limb was present in 34%. The lumbosacral vertebral segments were involved in 78% of cases. Most cases (64%) were due to *Staphylococcus aureus*. Bacteremia was present in 66% and paraspinal muscle abscesses in 54%. While epidural abscesses were present in 56%, neurologic complications were seen in only 9%, likely because most abscesses arose below the conus medullaris. Neurologic complications were more common with cervical or thoracic involvement than lumbosacral (32% vs 2%, $P < .0001$). Extraparaspinal infection, such as endocarditis, was identified in only 22% of cases. An overall 98% of patients survived, with only 5% having neurologic sequelae.

Septic arthritis of the facet joint is a distinct clinical syndrome typically involving the lumbar spine and is frequently associated with [bacteremia](#), posterior epidural abscesses, and [paraspinal pyomyositis](#). Neurologic outcomes are usually good with medical management alone ¹⁾

¹⁾

Ross JJ, Ard KL. Septic Arthritis of the Spinal Facet Joint: Review of 117 Cases. Open Forum Infect Dis. 2024 Feb 14;11(3):ofae091. doi: 10.1093/ofid/ofae091. PMID: 38449920; PMCID: PMC10917203.

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