

Thoracic discogenic pain syndrome

- Thoracic Discogenic Syndrome
- Epidural Interventions in the Management of Chronic Spinal Pain: American Society of Interventional Pain Physicians (ASIPP) Comprehensive Evidence-Based Guidelines
- Efficacy of Epidural Injections in Managing Chronic Spinal Pain: A Best Evidence Synthesis
- An update of comprehensive evidence-based guidelines for interventional techniques in chronic spinal pain. Part II: guidance and recommendations
- A systematic evaluation of thoracic interlaminar epidural injections
- Lumbar and Sacral Nerve Root Stimulation (NRS) in the Treatment of Chronic Pain: A Novel Anatomic Approach and Neuro Stimulation Technique
- Comprehensive review of therapeutic interventions in managing chronic spinal pain
- An algorithmic approach for clinical management of chronic spinal pain

Symptomatic thoracic [discogenic pain](#) syndrome (TDPS) is a rare phenomenon making it challenging to diagnose. The rarity of TDPS is attributed to the particular orientation, structure, and function of the [thoracic spine](#) in the [vertebral column](#).

The thoracic spine and sacrum exhibit [kyphosis](#) which is present at birth, while the cervical and lumbar spine exhibit fully developed [lordosis](#) around puberty. The lordotic nature of the cervical and lumbar spine allows the imaginary line of gravity to run through, allowing them to bear most of the weight of the axial skeleton as compared to the thoracic and sacral spine. Consequently, they are subject to a higher percentage of degenerated discs and subsequent discogenic pain syndrome. Between each vertebral body lies the intervertebral disc. The intervertebral disc is composed of two materials: the outer hard fibrous ring called the annulus fibrosis and an inner soft gelatinous core called the nucleus pulposus. The intervertebral disc functions to both absorb shock and allow flexibility of the vertebral column. As the body ages, the integrity of the intervertebral disc declines and causes the inner core of the disc to protrude through the outer layer. The effects of these will be either compression of the nerve roots or the spinal cord, giving rise to radicular or myelopathic symptoms.

The majority of the thoracic disc herniation are asymptomatic, or the patient presents with nonspecific symptoms like chest wall pain, epigastric pain, upper extremity pain, and sometimes, a pain in the groin or the lower extremity causing the clinician to think of a more common problem than a [thoracic disc herniation](#). While the rare nature, coupled with the atypical presentation, may lead to delay in diagnosis, it has been significantly cited in the literature that MRI can be very useful in diagnosing thoracic disc herniations (TDHs). The majority of asymptomatic TDHs were often diagnosed due to incidental MRI findings. Treatment of thoracic discogenic pain syndrome is conservative but sometimes surgical ¹⁾.

¹⁾
Fogwe DT, Mesfin FB. Pain, Thoracic, Discogenic Syndrome. 2017 Nov 8. StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2018 Jan-. Available from <http://www.ncbi.nlm.nih.gov/books/NBK470388/> PubMed PMID: 29262010.

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