

Ultrasound Guided Retrolaminar Block for Cervical Radiculopathy

A safer alternative- Case series.

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INTRODUCTION

- Interventional treatment like epidural steroid injection (ESI) often being used for pain due to disc herniation or spinal stenosis and facet joint injection for facet degeneration.
- Proximity of spinal cord during these procedures heightens concerns about safety of cervical interventions
- An ultrasound-guided retrolaminar block (RLB) can be a safer alternative to ESI for managing cervical radicular pain. This technique involves injecting the drug behind the lamina, potentially reducing the risks associated with ESIs.

CASE SERIES

- Retrospective case series of 5 patients with cervical radiculopathy.
- Inclusions: Adult patients (30 to 60 years), diagnosed with cervical radiculopathy, who did not respond to conservative treatments for at least 6 weeks.
- Ultrasound guided RLB was performed in prone position with neck flexed
- Transducer placed in transverse position initially to identify transverse process of C7 followed by upward vertebrae identification and made paramedian.
- A 22-G Sonoplex needle was inserted in-plane to probe in caudal to cranial direction. The needle tip was kept in close proximity to target cervical lamina.
- RLB was given with a mixture of 0.1% Ropivacaine of volume 6 ml and Methylprednisolone (40mg).
- Post procedure pain score was observed using numerical rating scale (NRS).
- A 48 hours follow-up for pain score was done telephonically to all five patients.

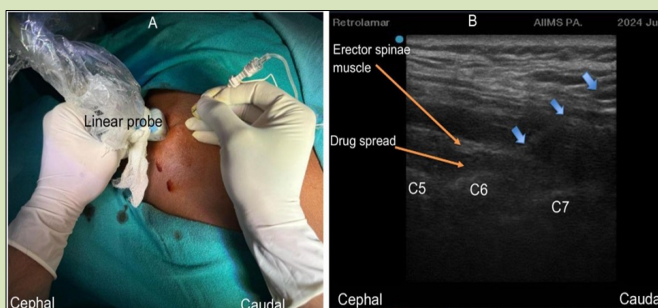


Figure1: (A) RLB probe and needle position (B) Sono anatomy of RLB

RESULTS

- The mean NRS score decreased from 6.40 ± 1.14 pre-procedure to 4.80 ± 0.83 at 1 hour, 3.20 ± 1.10 at 24 hours, and 3 ± 1.12 at 48 hours post-procedure ($p < 0.001$).
- Repeated measure ANOVA indicated clinically and statistically significant pain reduction immediately post-procedure ($p = 0.035$), at 24 hours ($p = 0.003$), and at 48 hours ($p = 0.003$) compared to pre-procedure values.

CONCLUSION

- The Ultrasound guided RLB can be a safe and effective alternative to cervical epidural steroid injections for the management cervical radicular pain

REFERENCE

Khshan M, de Santiago J, Pardo I, Regev G, Ophir D, Salame K, et al. Ultrasound-guided Cervical Retro-laminar Block for Cervical Radicular Pain: A Comparative Analysis. Spine. 2022 Oct 1;47(19):1351-6