

5<sup>th</sup> World Congress on

# SPINE AND SPINAL DISORDERS

October 16-17, 2019 | Rome, Italy

## Cluneal Nerve Trigger Point Entrapment Syndrome and Radiofrequency Treatment

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**Statement of the Problem:** Cluneal Nerve Trigger Point Irritation (CNTPI) symptomatology and aetiology are poorly recognized and too often treated with open surgery where conservative measures fail. The purpose of this study is to describe the distribution of symptoms shown in Figure 1, which can mimic sciatica and to present a diagnostic and treatment pathway and outcomes thereto.

**Methodology & Theoretical Orientation:** A prospective study of the treatment outcomes based upon the proposed diagnostic protocol deployed in 33 consecutive patients with CNTPI was independently analyzed 2-5 years following treatment shown in Figure 2.

**Conclusion & Significance:** The diagnostic pathway differentiates the pain from CNTPI from spinal disorders, facet joint or sacro-iliac joint pain and provides a promising treatment alternative to that of open surgery. The proposed treatment is based upon correction of pelvic attitude and radiofrequency ablation of the “trigger points” and offers encouraging outcomes.



Figure 1 CNTPI Symptom distribution

### Clinical Outcomes

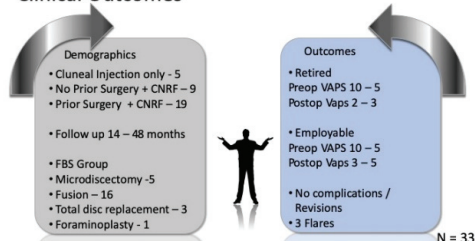


Figure 2 Clinical Demographics & Outcomes

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