Lower back pain is a common malady and one of the most frequent complaints among people seeing their doctors. There are many different causes of back pain, and not all of them relate to a pinched nerve. For instance, facet joints—the joints between two vertebrae in the spine—can be a common source of both low back and neck pain. The facet joints allow the vertebrae to move while keeping the spine properly aligned. These joints can become stressed with activity and may be affected by trauma or arthritis. Pain caused by the facet joints in the lower spine can be felt in the back, buttocks, hips, or thighs, while pain in the neck can extend to the head or shoulders. Symptoms can include pain that increases with bending or twisting at the waist, a deep ache that moves to the buttocks or hips, stiffness or difficulty with certain movements (like standing up straight or getting out of a chair), difficulty moving the head, or even headaches. Treatment options vary; however, they may include steroid injections and, in some cases, a procedure called radiofrequency ablation.

To read more, visit helpingbacks.com.

The Interventional Spine Service is a team of doctors trained in spine and neuroradiology who use imaging to characterize physical changes that may cause pain and then use this knowledge to tailor personalized treatment to fit your particular anatomy. Radiologists can also identify abnormalities that may have been otherwise missed by a routine physical exam. If you are unfortunate enough to be plagued with neck or back pain, ask your doctor to refer you to the Interventional Spine Service at UPMC Presbyterian or UPMC Shadyside. The senior faculty members in the group include Rothfus; Walter Bartynski, MD; and Vikas Agarwal, MD.

Discuss with your doctor whether one of these services offered by the Interventional Spine Service may be of benefit to you:

- Epidural steroid injections,
- Selective nerve blocks,
- Trigger point and joint injections,
- Discography,
- Vertebral body augmentation (vertebroplasty/kyphoplasty),
- Spine biopsy,
- Myelography,
- Blood patch,
- Spine/skin marking,
- Radiofrequency ablation.

For more information, visit www.sirweb.org/patients.

“Our goal is to make our referring physicians’ jobs easier.”

WILLIAM ROTHFUS

WILLIAM ROTHFUS, MD
Professor of Radiology

William Rothfus is one of the most recognizable names and faces associated with radiology at UPMC Presbyterian and UPMC Shadyside. He specializes in diagnostic and interventional neuroradiology and started performing head, neck, and spine interventions more than 20 years ago. Rothfus also is the director of the Interventional Spine Service at UPMC Presbyterian and UPMC Shadyside hospitals. Rothfus believes that treating pain is “not just the ability to put a needle where you want.” Treating a patient “takes thought and consideration. Being familiar not only with pain syndromes but also with the wider variety of pathologies that affect the spine can only improve the efficacy of what we do.” Using imaging as a guide, Rothfus can provide a more optimal approach to your care.
Compression fractures of the spine, also known as vertebral body fractures, are a growing problem among older adults. Patients suffering from a vertebral compression fracture can experience debilitating pain, and such fractures can have a large negative impact on one’s overall life. Vertebral augmentation is a minimally invasive outpatient treatment option. During a procedure known as vertebroplasty, the image-guided injection of bone cement into the vertebral body is used to restore some of the stability of the fractured bone. This procedure can decrease both pain and disability.

Kyphoplasty, also known as balloon-assisted vertebroplasty, is a similar minimally invasive outpatient treatment option sometimes considered when other conservative treatments have failed. During this procedure, a balloon is inflated in the fractured vertebra to restore some of the lost height and create a space that can then be filled with bone cement. Once the cement hardens, it may provide stability and reduce pain associated with the fracture.

Vertebral augmentation provides a safe alternative to surgery for many patients and can be used for fractures caused by osteoporosis, spine tumors, or multiple myeloma.

For more information, visit radiologyinfo.org.

DID YOU KNOW?

50% of all women and 25% of men will suffer from an osteoporotic fracture in their lifetime. Compression fractures of the spine are the most common type of fracture seen. These fractures can cause sudden onset of back pain, pain that worsens with standing, limited mobility, height loss, or deformity. Compression fractures can lead to kyphosis (a bent back), chronic pain, or crowding of the internal organs. One compression fracture can predispose you to develop additional fractures; therefore, it is important to seek medical attention as soon as these symptoms develop.

WHY SUFFER?

Radiofrequency ablation (RFA) is a treatment option if you suffer from chronic low back or neck pain and have not received adequate pain relief with conservative treatments. RFA is a minimally invasive outpatient procedure that can provide longer relief than typical steroid injections. In this procedure, image guidance is used to apply directed heat to a nerve to shut down pain signal transmission from that nerve to your brain. You can expect to experience six months to two years of pain relief after RFA. This can decrease medication usage and improve your overall quality of life.

IS IT TRULY A DISC PROBLEM?

Discography can determine if the discs are the source of your back pain

Back pain may originate from muscle spasm, the facet joints, or from the intervertebral discs. These discs sit between bones of the spine (vertebral bodies) and serve as a flexible cushion. Discography, a minimally invasive, image-guided procedure, can detect structural problems with these discs. Discography is an outpatient procedure that can determine if your back or neck pain is related to a damaged disc; by applying pressure to the disc with contrast dye, the radiology physician can determine if the discs are the source of your back pain. This can aid in the diagnosis and treatment planning of your specific complaint.

To learn more, visit helpingbacks.com.

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