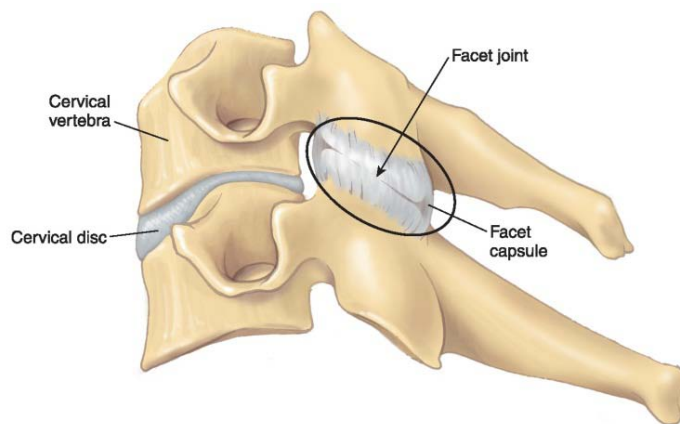


CONDITION OF THE MONTH

FACET GENERATED PAIN

Pain is frequently generated from four primary sources of the spine. The disc, the spinal cord and nerve roots, chemical response due to trauma, and the facets or zygapophysial joints. Facet Syndrome occurs 55% in the cervical spine and 31% in the lumbar spine. The two facet joints of each spinal segment are the rear or posterior part of the spinal segment tripod. This tripod is composed of the two facets and the vertebral body and disc. Facet generated pain is most frequently noticed on extension of the spine.

The facets are formed at the top and the bottom processes of each vertebral segment. In the low back (lumbar spine) facets provide about 20% of the twisting stability in the low back. Facet joints prevent each vertebral segment from slipping over



the one below. The facet joints are surrounded by a capsule which contains lubricant for the joint. Each joint has a rich supply of tiny nerves which provide painful stimulus when the joint is injured or irritated. Inflamed facets can cause powerful muscle spasm. Facet generated pain can be a direct result of trauma, degenerative process caused by age wear and tear, dehydration (lack of lubricant) of the facet capsule.

Facet syndrome is a commonly overlooked cause of the low back pain. Diagnosis may be made by way of x-ray, MRI, or CT imaging. Treatment protocols with facet generated pain may include non-steroidal anti-inflammatory drugs, oral corticosteroids, or interarticular injections. In severe cases facetectomy and spinal fusion may be warranted. Manipulation of the spine may decrease or increase facet generated pain.