



Clinic Newsletter

Spinal Facet Joint Injuries

Facet joint syndrome is a common cause of back pain. A severe acute episode of facet joint pain may be due to sudden movement, which traumatises the facet joint. More often, facet pain, or Facet Syndrome is chronic in nature - that is, the underlying cause is due to long term changes in the facet joint that are often associated with repeated injuries and degenerative disc disease.

The facet joints are situated at the back, on either side of the spinal column, between the discs and the vertebral bodies. Each vertebra has bony prominences on each side that form a facet joint with the vertebra above and below. The facet joints

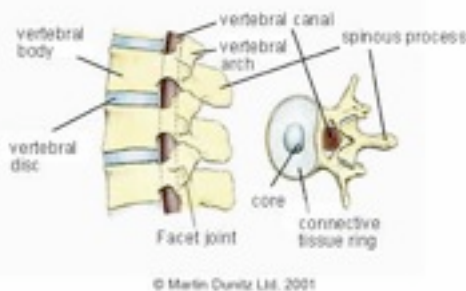
are enclosed within a joint capsule and research has shown that in the lower back there can be a 'meniscoid' (cartilage disc) structure within the joint space, just like a mini version of the meniscus in the knee joint. The role of the facet joints is to limit excessive movement and provide stability for the spine.

Back pain from the facet joints may arise from several causes. A severe episode of back pain may be due to sudden excessive movement,

which traumatises the facet joint. Several theories have been put forward, including nipping of the facet joint capsule or the meniscoid tissue between the two bones. As with trauma to any such joint, there is an inflammatory reaction with swelling and pain in the joint, which may last for several days.

With chronic facet joint pain, the underlying cause is due to long term changes in the joint, meaning the pain does not go away in a few days. In most cases there is degeneration within the facet joint, causing an arthritic type problem.

This may be a long term consequence of seemingly minor trauma in the past.



Protecting Your Back

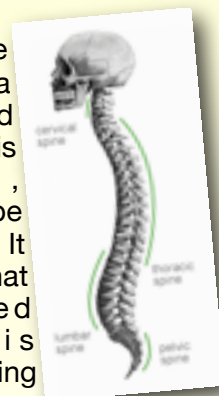
Poor posture plays a major role in the development of Facet Syndrome. Prolonged sitting and bending postures, where the lumbar spine is 'flexed' should be avoided as they increase the pressure on the discs. This can lead to disc degeneration and a loss of disc height. As the discs shrink the facet joints come into contact with each other and start to bear weight. This is not what they are designed to do.

In order to avoid disc degeneration, and excessive loading of the facet joints, it is important to take better care of back posture. An understanding of good posture is necessary to achieve this.

Viewed from the side, the spine consists of a series of curves that increase the load-carrying capability of the spine compared to if the spine was just straight.

The lumbar part of the spine consists of a forward curve and as long as this is maintained, posture will be reasonably good. It is important that this improved posture is maintained during all activities, particularly when sitting for long periods - slumping should be avoided.

A Lumbar Roll placed at the bottom of the back or a Seating Support can be effective when sitting. In the long term, good posture is maintained by increasing the muscular stability of the spine. For more information please ask in clinic or visit www.posture-stability.co.uk



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Facet Syndrome Signs & Symptoms

Typically, there is back pain just to one side of the spine. This is normally made worse by side bending toward the affected side or extending the spine (backward bending). The back will generally feel stiff in the morning. In some cases there may be irritation of the nerve roots, which emerge from the spinal cord at the level of the problem, causing pain to refer to the buttock, groin or hamstring region. This is known as sciatica. Often this problem is made worse by prolonged sitting or standing in one position. In other cases, the pain may be felt in the front of the thighs.

The diagnosis can usually be made based on the history of the condition, and the presence of the signs and symptoms listed above. If there is any doubt it may be necessary to have an x-ray of the spine. A CT scan or MRI scan may also show the problem.

Facet Syndrome Treatment

In the case of a severe episode of facet joint pain, rest, non-steroidal anti-inflammatory (NSAIDs) drugs and gentle mobility and postural correction with an osteopath should help settle the problem in a week or two. It is important to keep the region warm to relieve back pain and muscle spasm, but preferably using clothing, a pad or pillow avoiding hot water bottles or similar as these tend to cause congestion of the area.

Sometimes the osteopath may manipulate the joint with a controlled thrust to reduce muscle spasm, free off nerves, open up the facet joint and break down early scar tissue, which may limit movement. Strapping or a Back Brace can provide reassurance and support to the lower back.

The most important long-term treatment is back and posture stability. The osteopath will identify muscles that have become over-stretched or shortened, weak or tense and can then teach a range of exercises and techniques that can help to stabilise the back, including improving abdominal, pelvic floor and back strength. For more information please call or ask in the clinic or visit www.back-stability.co.uk.

In a more chronic type of facet joint problem, regular maintenance treatment may be helpful to maintain mobility and strength. However, where there is persistent pain originating from a facet joint problem, an injection of long acting local anaesthetic and anti-inflammatory corticosteroid into the facet joint may be effective in relieving symptoms and, if successful, it confirms the diagnosis. In order for this approach to work the injection is best done by a Consultant Radiologist under an image intensifier. This device allows the doctor to see exactly where the injection is going. This approach can give very good pain relief, but the effects may wear off after a while. It may be necessary to repeat the procedure at a later date.



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