

Title

Author

Abstract

Background: Lumbago refers to a pain that stems from the lower back meaning that it's confined to a small area, a tingling feeling that radiates down the leg to the foot, it is known as sciatica. Commonly occurs due to inflammatory, immunological and mechanical factors. Steroid injections play an important role in the management of sciatic radiculopathy. Steroids act by reducing the oedema around the nerve roots and decreasing pain. This can be given around the nerve root in the transforaminal space or in the interlaminar space. We have done a randomized trial to see the effectiveness of the Selective Nerve Root Block (SNRB) with steroid injection in the management of a single level unilateral foraminal disc herniation.

Objective: to evaluate the effectiveness of selective nerve root block (SNRB) for disc induced lumbago sciatica.

Design: Prospective experimental study.

Study Duration: The study started from June 2020 may 2021 and all patients signed a detailed written informed consent. All Patients fulfilled eligibility criteria were enrolled into the study.

Setting: Department of Orthopaedic Surgery, Dhaka Medical College Hospital, Dhaka, Bangladesh and Bangladesh Spine & Orthopaedic Hospital, Dhaka, Bangladesh.

Patient(s): 18 patients having disc induced lumbago sciatica were recruited in the study.

Main Outcome Measure(s): pain score measured by Visual Analogue Scale (VAS) and disability score measured by Roland- Morris Disability Questionnaire (RMDQ) at 0, 2, 6, 24 weeks intervals.

Results:

There was a total of 18 patients (10 men and 08 women). The mean follow-up period was 2 months and the total study duration was 1 year. The average age was 36 ± 7.93 (range 22–50) years. The average height was 163 cm (range: 148–178 cm). The average weight was 69 (range: 55–83) kg. The average duration of pain was 7 months. The average pain score for all patients before the procedure was about 6.56 ± 1.19 . However, after immediate procedure, 2, 6 and 24 weeks this score significantly decreased to about (3.28 ± 0.95) , (3.44 ± 1.2) , (3.44 ± 1.2) and after 24 weeks, the average pain score (4.11 ± 1.2) and p values were 0.052, 0.048, 0.02 and 0.06 respectively which was <0.05 that was statistically significant. While 05 (27.8%) experienced a recurrence of pain. In patients experiencing recurrence of symptoms, 03 (16.7) needed surgery. The average RMDQ score for all patients before the procedure was about (16.33 ± 1.085) . This score decreased significantly to (7.89 ± 1.6) immediate after procedure, 2, 6, and after 24 weeks successively about (8.78 ± 1.5) , (8.94 ± 1.8) and (9.35 ± 2.4) and p values were 0.045, 0.029, 0.029 and 0.247 respectively which was statistically significant except last value that exceed > 0.05 . Recurrence of symptoms and percentages of need of surgery among study group were same as above mentioned in VAS scale.

Otherwise, significant improvement of SLR range and there were no major complications like deterioration of sensory motor functions.

Conclusion: Effect of SNRB is typically short acting in majority of patients and recurrence is expected. It creates a window period with reduced pain but of varied intervals depending on the pathology. It did not alter the prognosis in those with severe disease where surgery is well indicated.

Keywords: Lumbago, Sciatica, Selective nerve root block, Visual Analogue Scale, Roland- Morris Disability Questionnaire.

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