

Hyaluronidase Epidural Steroid Injections for Refractory Failed Back Surgery Syndrome: A Case Report

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Case Description

Pertinent History:

- 50 y/o M with w/PMHx L4-S1 fusion extended to L3
- Sx included b/l anterior thigh burning and cramping, worse with standing/walking, and a progressive sense of difficulty coordinating his legs.

Prior Interventions:

- **Prior meds:** Amitriptyline, baclofen, methocarbamol, cyclobenzaprine, gabapentin
- Procedural Hx: Lumbar spinal cord stimulator removed due to bone growth around the paddle, b/l L3-5 RFA, caudal epidural lysis of adhesions, b/l L2 TFESI without significant relief.
- Not a candidate for microdiscectomy due to the level and preferred not to extend the fusion.

• Imaging:

MRI lumbar spine revealed broad L2/3 disc bulge with bilateral L2 foraminal stenosis (Image 1).

Intervention:

 Bilateral L2 TFESI w/dexamethasone 4mg and hyaluronidase (initially 75u per side, subsequently 150u per side) (Image 2).

Conclusion:

- >50% reduction of symptoms and marked functional improvement, injections repeated every ~3-4 months.
- Greater symptomatic improvement with hyaluronidase-steroid injections and enhanced relief with 150u hyaluronidase.



Image 1: Sagittal and Axial MRI demonstrating L2/3 disc bulge w/ b/l L2 foraminal stenosis

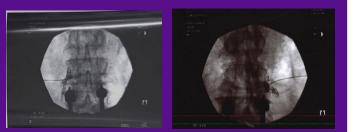


Image 2: Bilateral L2 TFESI

Discussion

- Steroid alone did not provide any mechanical change and only temporarily calmed the nerves. Hyaluronidase allowed for microscopic decompression of the neuroforamen by enzymatically removing disc and/or adhesions created in response to disc-driven inflammation.
- Enzymatically targeting the disc at the disc-nerve interface has provided meaningful relief for this patient.
- In a 2014 randomized control study of 25 patients with failed back surgery syndrome, the addition of hyaluronidase to ESIs was found to have a significant improvement compared to steroids alone over a 4-week study interval.¹
- The use of hyaluronidase is further supported by a 2012 trial which found reduced pain and improved function over 12 weeks when hyaluronidase is used with an ESI in comparison to ESI or hyaluronidase alone.²

Take Away Point

ESIs with hyaluronidase serve an important role in pain reduction and functional improvement in patients with failed back surgery syndrome, especially if ESIs have failed to provide relief.

References

- 1. Rahimzadeh, Pain Physician, 2014.
- 2. Kim, Ann Rehabil Med, 2021.