The Side of Sacroiliac Joint Restriction Does Not Necessarily Correlate With SIJ Provocative Tests and Confirmatory US Guided SIJ Block: A Single Center Retrospective Chart Review

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Introduction

Sacroiliac joint (SIJ) pain accounts for 10-27% of patients with chronic low back pain.1-2 Studies suggest a combination of provocative exam maneuvers are necessary for SIJ diagnosis.2-8 The Osteopathic profession utilizes its own method of SIJ diagnosis.9-10 Our hypothesis was that the side of SIJ restriction based on sacral somatic dysfunction (SSD) would not correlate with the side of provocative exam and confirmatory ultrasound guided diagnostic block.

Methods

A single center retrospective chart review, from 1/1/16-1/1/18, of a single physician found 61 patients with inclusion ICD10 & CPT codes. From these, chart review found 10 patients who met inclusion criteria with all necessary documentation for comparison. The side of SSD restriction was compared independently with both the side of provocative exam and confirmatory block.

Results

All 10 patients had SSDs. Five SSDs correlated with the same side of provocative exam, 4 were opposite, and 1 had no positive provocation maneuvers. Seven SSDs correlated with the side of SIJ diagnostic block. This variability was present in all types of SSDs.

Conclusions

This study suggests SSDs do not consistently correlate with the side of provocative SIJ exam, nor the side of confirmatory block. Therapeutic approaches targeting SIJ dysfunction should potentially consider treating both SIJs when there is not a correspondence between the above findings. Limitations include: too many variables, insufficient sample size, a large number of patient exclusions due to missing data. Given the findings of this pilot study, further studies addressing some of these limitations may be beneficial.

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(Pending VCOM IRB expedited review)

References

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