

**Use of Thoracic Dorsal Root Ganglion Pulsed Radiofrequency Ablation: Successful treatment of Slipped Rib Syndrome in a US Navy Sailor**

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**INTRO**

- **Slipped rib syndrome (SRS)** is an under diagnosed cause of prolonged chest wall pain, related to trauma, athletic, or overuse injuries.
- **Dorsal root ganglion (DRG)** stimulation is a neuromodulatory technique providing substantial and sustained pain relief for a variety of pain conditions.

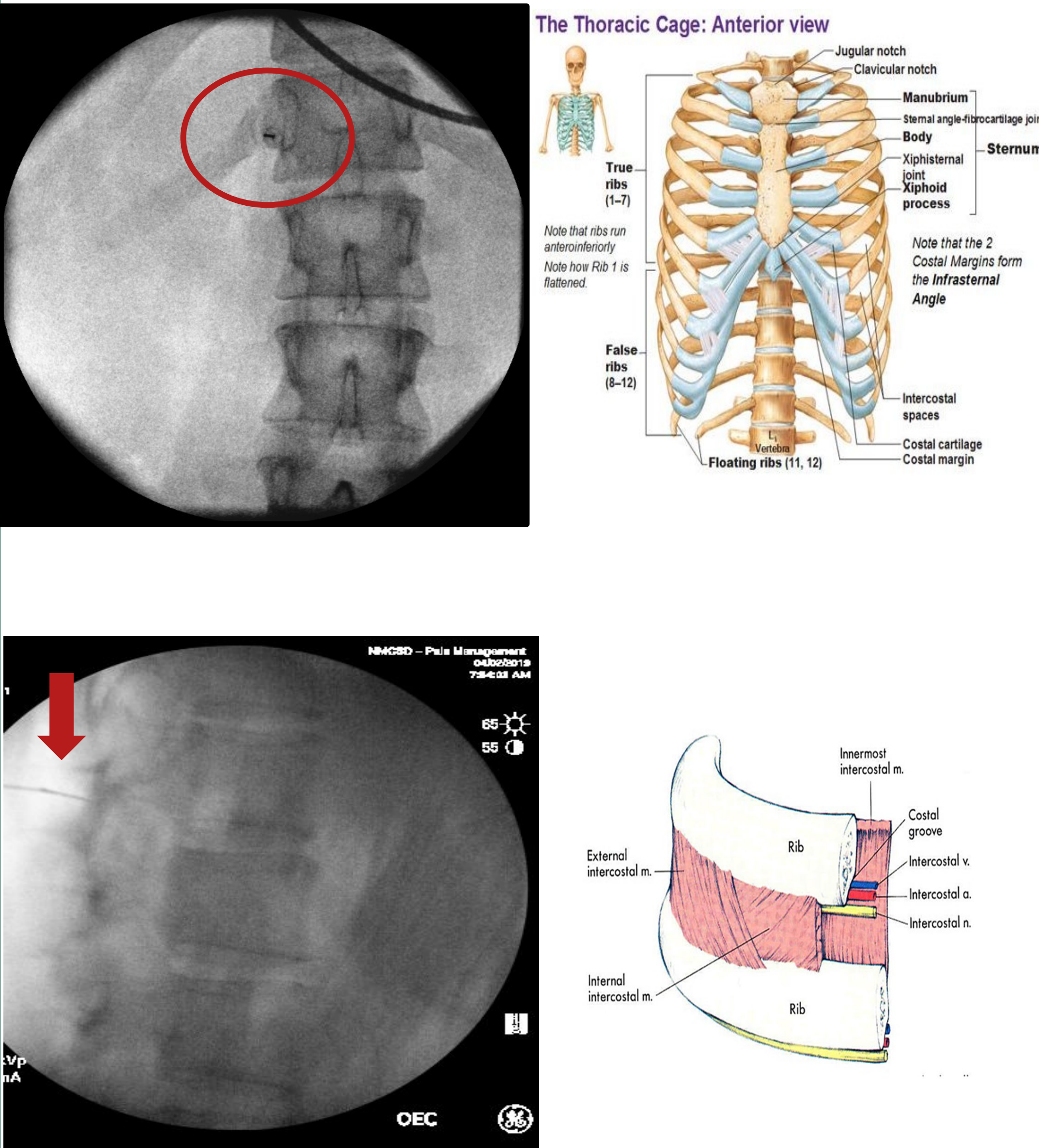
**CASE REPORT**

- 33 year old active duty Navy sailor with 3 years of severe, chronic thoracic back pain s/p service related injury.
- Pain characterized as *left mid-to lower back, sharp and stabbing* in quality, aggravated by strenuous activities, related to his high operational tempo career.
- Previously underwent *multiple treatments*, including mindfulness, pain education, PT, ketamine infusions, and thoracic radiofrequency ablation at left T11, T12, and L1, with minimal pain mitigation.

**TECHNIQUE**

- **Diagnostic left T12 selective nerve root block (SNRB)** with fluoroscopic guidance, with immediate **75% pain relief**.
- **Pulsed radiofrequency treatment** performed with 20 gauge 10cm radiofrequency needle with a 10mm curved active tip at 42 degrees Celsius for 2 rounds of 4 minute, which **provided 3 months of sustained benefit**.

# Thoracic Dorsal Root Ganglion pulsed radiofrequency ablation to treat Slipped Rib Syndrome.



**DISCUSSION**

- This case demonstrates the *benefit of DRG stimulation* for slipped rib syndrome (SRS).
- SRS is an infrequent condition which can cause *significant pain and disability*; and may be refractory to both conservative and interventional treatments.
- It is caused by *hypermobility and subluxation* of the anterior false ribs 8, 9, or 10 due to weakness of the sternocostal, costochondral, or costo-transverse ligaments.
- **Pulsed radiofrequency of the DRG** was instrumental in this sailor overcoming pain and improving function, allowing his to return to **Fit for Full Duty**,