

Back Surgery syndrome and cannabis

Many patients fail back surgery. In fact, so many that their syndrome of pain and disability after surgery is labeled FBSS, or failed back surgery syndrome. Up to 74.6% of patients after back surgery suffer with ongoing pain and disability, moderate to severe chronic pain, motor and sensory deficits, and even sphincter dysfunction leading to loss of bowel or bladder incontinence. Lumbar spine surgery itself experiences a failure rate of 40%. Reoperation occurs in as many as 35% of patients who have previously undergone back surgery.

Current therapies include antidepressants and antiepileptics, which appear to decrease the intensification that occurs when pain hits the cerebral cortex. There's also deep brain stimulation and spinal cord stimulators that have been applied in the past with limited initial success that tends to wane over time. Epidural injections are applied, and of course, patients can undergo another surgery. I mean, if the first one failed, why not do it again? There's also, of course, counseling and exercise, so we have a number of options, none of which have worked really well.

Is there a position for cannabis in this disease? There appears to be. According to a study published in Italy in the Journal of Pain Research in 2018, a combination of cannabis with spinal cord stimulation resulted in significant improvement in pain for patients with failed back surgery syndrome. The causation is probably neuropathic, but the causation is also a little complex and fuzzy. I mean, certainly, much back pain is nerve-based pain, but there's also a central amplification of the pain to where the back pain sort of takes on a life of its own when it's been around for a long time.

There's a persistent inflammatory position also where an area that has been injured is chronically inflamed, and that's contributing to chronic pain. There's also a compressive component in many episodes of failed back surgery syndrome where a nerve is compressed and, despite surgery, that compression was not entirely relieved.

In this study, this Italian study, 11 patients underwent treatment for 12 consecutive months. It's an exciting study. Patients averaged age 61 years, six males and five females. Their neuropathic pain was measured by questionnaire regarding the pain characteristics, burning, painful, electric shock or abnormal sensations such as tingling, pins and needles, numbness, or itching. In addition, items related to the examination of the painful area. Also, a brief pain inventory was taken regarding the severity of the pain and how the pain was limiting patients' function.

Patients were visited weekly for the first month, and then every two weeks for the remainder of the year. The patients received a THC CBD tincture with dosage increased based on a response to pain in addition to spinal cord stimulation. Pain control was achieved in four cases in the first month of treatment. That's 30% of the patients who were treated with cannabis

experiencing pain control within the first month of treatment with minimal dose titration, and that effect was maintained during the entire observation time. Pain perception decreased remarkably from 8.18 to 5.72.

Now, in order to reach statistical significance to say that the product had a significant reduction in pain, it needs to have a decrease in one point on a 10-point scale, so this combination therapy in failed back surgery syndrome resulted in a decrease of a little over three points in pain sensation. That's remarkable. There was also significantly reduced burning and numbness, but additionally, all patients reported improvement in the quality of sleep, in their mood, and in their enjoyment of life with no serious adverse effects. Spinal cord stimulation has previously been studied in this population and found to be valuable, but really only temporarily, wearing out after 12 to 24 months.

Now, previous studies have shown that 10 to 15% of patients suffering with chronic pain reached to cannabis to improve their pain and, in addition, get better sleep and improve their mood. The researchers remind us, of course, that careful monitoring is required in patients with previous history of anxiety or panic, since THC products can sometimes exacerbate those conditions. Also, if there's previously reported dependence or abuse of other medications, it's worth noting that as you embark on an adventure with medical cannabis, and any history of depression or other psychiatric disorder needs to be considered, but if you're dealing with one of the 74% of patients who are suffering from failed back surgery syndrome and ongoing pain, or if you are one of those patients, consider the addition of medical cannabis to your treatment plan and see if it improves you the way it improved these Italian patients.