

Psychological Impact and Surgical Treatment Options for Sacroiliac Joint Dysfunction

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ABOUT THE STUDY

Sacroiliac Joint Dysfunction (SIJD) refers to improper movement or misalignment in the sacroiliac joints, which connect the sacrum at the base of the spine to the ilium in the pelvis. This dysfunction often results in lower back pain and discomfort, which can radiate to the buttocks, hips or even down the legs, mimicking sciatica. SIJD is commonly associated with activities that strain or stress the lower back and pelvic region, including heavy lifting, prolonged sitting, pregnancy or traumatic injuries like falls or car accidents.

SIJD is often underdiagnosed due to its overlapping symptoms with other lower back conditions, making treatment challenging. Interventions typically include physical therapy, chiropractic care and specialized exercises aimed at improving mobility, stability and alignment in the sacroiliac region.

Prevalence and epidemiology of SIJD

SIJD accounts for a substantial portion of lower back pain cases, with estimates suggesting that up to 15%-30% of chronic lower back pain cases are due to dysfunction in the sacroiliac joint. Though these numbers vary depending on the population studied, SIJD is more common among individuals who engage in physically demanding activities, athletes, pregnant women and older adults.

Women are particularly prone to SIJD, largely due to the hormonal changes and biomechanical stressors that occur during pregnancy. Relaxin, a hormone produced during pregnancy, relaxes the ligaments in the pelvis, increasing the mobility of the sacroiliac joint, and subsequently heightening the risk of dysfunction. Additionally, the aging population is at risk due to degenerative changes in the joint that occur with advancing age.

Surgical treatment options for SIJD

When non-surgical interventions fail to alleviate pain and improve function, surgical options become a consideration for individuals suffering from SIJD. The primary goal of surgical interventions is to restore stability to the joint and alleviate pain caused by the dysfunction. Two primary types of surgical

interventions are used in SIJD management: Sacroiliac joint fusion and minimally invasive techniques.

Sacroiliac joint fusion: It is a surgical procedure aimed at permanently fusing the sacrum and the ilium, the bones that form the sacroiliac joint. By fusing these bones together, the motion between the bones is reduced or eliminated, which can alleviate pain caused by abnormal joint movement. Traditional sacroiliac joint fusion involves a more invasive approach with a larger incision, exposing the joint to be fused.

Techniques and Instruments

The procedure involves the placement of implants or bone grafts between the sacrum and ilium. These materials serve to stabilize the joint and promote bone growth across the joint, eventually leading to the fusion of the two bones. Over the years, advancements in surgical techniques and instrumentation have allowed for more precise placement of these devices, reducing complications and improving patient outcomes.

Minimally invasive sacroiliac joint fusion techniques: Minimally invasive sacroiliac joint fusion has gained popularity in recent years due to its less invasive nature, faster recovery times and lower risk of complications. This technique typically involves smaller incisions and the use of specialized implants, such as titanium screws or other devices, to stabilize the joint.

Lifestyle adjustments to manage SIJD

Incorporating lifestyle adjustments is need for individuals suffering from SIJD, both to manage the condition and to prevent further aggravation of the joint. These changes can help to reduce the stress placed on the sacroiliac joint, improve overall joint stability and alleviate pain over the long term.

Exercise and physical activity modifications: One of the most significant lifestyle changes involves adjusting physical activity levels. While movement and exercise are beneficial, activities that place excessive stress on the sacroiliac joint should be avoided. This includes high-impact exercises like running, jumping or heavy lifting.

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Received: 05-Aug-2024, Manuscript No. RCR-24-34140; **Editor assigned:** 08-Aug-2024, PreQC No. RCR-24-34140 (PQ); **Reviewed:** 29-Aug-2024, QC No. RCR-24-34140; **Revised:** 05-Sep-2024, Manuscript No. RCR-24-34140 (R); **Published:** 12-Sep-2024, DOI: 10.35841/2161-1149.24.14.426

Citation: Kaufman D (2024). Psychological Impact and Surgical Treatment Options for Sacroiliac Joint Dysfunction. *Rheumatology* (Sunnyvale). 14:426.

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Postural adjustments and ergonomics: Maintaining good posture throughout daily activities can significantly reduce the strain on the sacroiliac joint. Ergonomics plays an important role in preventing SIJD flare-ups, particularly for individuals who spend long hours sitting or standing at work. Investing in ergonomic furniture, such as chairs with proper lumbar support or adjustable standing desks, can alleviate pressure on the lower back and pelvic area.

Rehabilitation and physical therapy following surgical intervention

Following sacroiliac joint surgery, rehabilitation and physical therapy play critical roles in ensuring the best possible outcomes for the patient. The recovery process is often gradual and it typically requires a combination of rest, physical therapy and gradual reintegration of physical activity.

Early recovery period: In the immediate post-surgical period, patients are advised to limit weight-bearing activities to avoid disrupting the healing process. Crutches or other assistive devices may be used during this time. Patients are also instructed on proper wound care and given medications to manage postoperative pain.

Gradual return to activity: A gradual return to normal activity is need to avoid re-injury or aggravation of the joint.

Patients are typically guided by their healthcare provider or physical therapist regarding when it is safe to resume specific activities. This process may involve progressively increasing physical activity levels, starting with low-impact exercises and eventually returning to higher-intensity activities as strength and stability improve.

Social and psychological impact of SIJD

Chronic pain conditions like SIJD not only affect physical health but also have significant social and psychological implications. Living with chronic pain can lead to decreased quality of life, social isolation and emotional distress.

Chronic pain and mental health: Chronic pain is strongly associated with mental health disorders, particularly anxiety and depression. Individuals with SIJD may experience feelings of frustration or hopelessness, especially if their pain persists despite treatment efforts. The inability to engage in previously enjoyed activities or the loss of independence due to physical limitations can further exacerbate these feelings.

SIJD represents a complex condition that affects many individuals, particularly those who engage in strenuous physical activity, pregnant women, and the elderly. Characterized by debilitating lower back pain that can mimic other conditions, SIJD requires comprehensive diagnostic and treatment approaches.