



**Abstract #34554 Figure 3** The cryoablation probe is introduced until it contacts the target nerve

**Conclusions** Cryoablation consists of the application of cold temperatures causing nerve damage by freezing. It has advantages over radiofrequency, it allows regeneration of nerve fibers, not leading to formation of neuromas and it can be repeated several times. A previous positive diagnostic blockade and the use of ultrasound, with neurostimulation, guaranteed the site to be 'cryoablated' with precision and safety. This success story is promising and encouraging, but more studies are needed to confirm the effectiveness of the technique.

### #36130 LATERAL PTERYGOID MUSCLE ULTRASOUND-GUIDED INJECTION WITH BOTULINUM TOXIN (XEOMIN®) FOR MANAGEMENT OF TEMPOROMANDIBULAR PAIN

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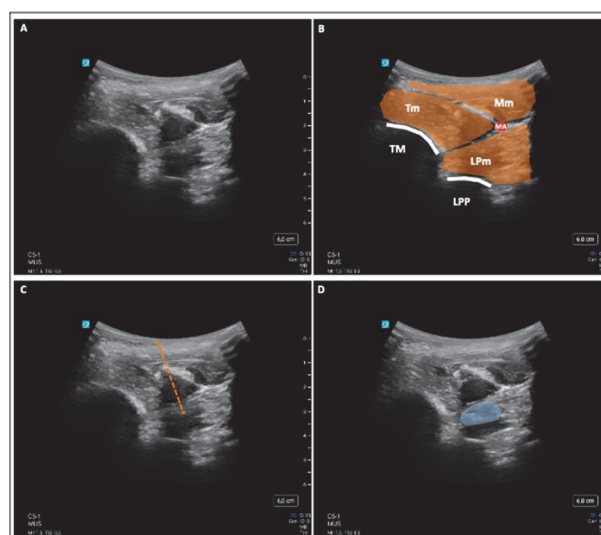
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**Background and Aims** Temporomandibular disorders (TMDs) are a frequent cause of orofacial pain, causing functional disability and a negative impact on quality of life. Incobotulinum toxin A -Xeomin®- (BTX-A) injection in lateral pterygoid muscle (LPM) is one of the treatment modalities proposed, but the blind puncture guided by EMG carries a risk of vascular puncture or diffusion of the toxin to nearby muscles.

We describe an ultrasound-guided approach and show the results of a retrospective study of thirty patients.

**Methods** Thirty patients with unilateral temporomandibular myofascial pain were treated. An out-of-plane approach was performed using a convex probe, injecting 20 U of BTX-A (2.5 unit/0.1 ml solution – 0.8 ml) into the LPM. Before puncture, using colour Doppler mode, the maxillary artery was located to avoid its puncture.

**Results** Compared with baseline, patients manifested significant improvement in pain (VAS) at rest and at mandibular movement a month after treatment ( $p < 0.05$ ). Temporomandibular joint (TMJ) click was present prior to treatment in twenty-four patients, disappearing in 16 of them a month after injection (66.7%). No complications were detected during or after treatment.



**Abstract #36130 Figure 1** Lateral pterygoid muscle ultrasound-guided injection. A, ultrasonographic visualization of the LPM. B, annotated ultrasonography of image A. C, out-of-plane needle insertion direction (orange dashed line). D, target for injection into the lateral pterygoid muscle (blue shadow). LPM, lateral pterygoid muscle; LPP, lateral pterygoid plate; MA, maxillary artery; Mm, masseter muscle; MT, maxillary tuberosity; TM, temporalis muscle

**Conclusions** An ultrasound-guided approach for the injection of BTX-A into the LPM could be considered a successful and safe treatment for myofascial pain related to TMD and TMJ clicking. Therefore, further studies with larger sample sizes and longer follow-up periods are needed to study the effect of BTX and its long-term effects.

Attachment CEIM.pdf

### #36426 UNILATERAL PARESIS AFTER SAFE TRIANGLE APPROACH FOR TRANSFORAMINAL EPIDURAL STEROID INJECTION

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