Methods We report the case of a 28 years-old cyclist with pain in the left inguinal region and medial region of the left thigh (VAS score 2 at rest), which was accentuated by external rotation movements and lateral knives (VAS score 6). The clinical examination showed left adductor muscles swelling and stiffness with deep palpation pain. With the patient in the supine position and 30° external rotation of the lower limb, the ultrasonography associated with elastosonography showed signs of left adductor muscle contracture (blue cromatic areas). Figure 1

Results Ultrasound-guided dry-needling was performed with a sterile seirina j-type acupuncture needle, size n° 8 causing evocation of twitches of the left adductor muscles. At the end of therapy, the elastosonography re-evaluation showed signs of revascularization and major elasticity of the treated area (red cromatic areas) figure 2, there was no muscle swelling and stiffness, VAS score 0.

During the 25th-day follow-up, the patient refered muscle fatigue at the end of training, VAS score 1–2. A second dry-needling procedure was repeated, the patient reported VAS score 0 and the elastosonography showed signs of revascularization and major elasticity. Figure 3

Conclusions Our clinical and elastosonographic results, confirm that dry-needling may be an effective therapeutic option for musculoskeletal pain caused by myofascial trigger points.

Background and Aims The aim of this study was to assess the clinical course of patients with lumbago through 12 weeks and to identify the prognostic factors for non-recovery in the short term.

Methods A total of 74 patients with acute lumbago (<3 weeks) were followed up at University Hospital Centre in Tirana, Albania during the year 2019. Baseline assessments including demographic variables, clinical characteristics of pain, lost work time and results of clinical examination were noted. Pain intensity and disability, were assessed according to visual analogue scale and Roland Morris Disability Questionnaire (RMDQ), respectively. Patients were assessed for pain intensity and disability at baseline, and at 1, 2, 4, 8 and 12 weeks of follow-up. Recovery was considered if patients scored <4 on the RMDQ and pain had resolved. The study was approved by National Medical Ethics Committee of Albania.

Results At 2 weeks, 52 (58%) of the patients had recovered and only eight (9%) developed chronic LBP. Severe disability was noted among male patients (79%) and married patients (82%). Mean pain intensity and mean disability scores dropped 94% and 95.2%, respectively, of initial levels during the 12 weeks. Fifty eight percent of employed patients reported lost time from work.

Conclusions Patients with disability generally recover in the first weeks. Pain usually is the major complaint of patients with problems of the back and should be given particular consideration in baseline assessments of patients with acute lumbago.