Neuromodulation in non-operated discogenic low back pain

Stellingen behorende bij het proefschrift:

Neuromodulation in non-Operated Discogenic Low Back Pain

Efficacy and Mechanism

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1. The documented neuroanatomy of pain transmission from the L4-L5 intervertebral disc in non-operated chronic discogenic low back pain (CD-LBP) highlights the L2 dorsal root ganglion as a good candidate for dorsal root ganglion stimulation (DRGS). – *Chapter 1*

2. Neuromodulation in the form of spinal cord stimulation (SCS) and DRGS is a promising long-term pain relief option for patients with CD-LBP. – *Chapter 2*

3. Passive recharge burst SCS demonstrates consistent pain relief and neuropathic pain reduction in non-operated CD-LBP patients. – *Chapter 3*

4. Both passive recharge burst SCS and L2 DRGS provide effective pain relief in CD-LBP – *Chapter 4*

5. Given the ever-increasing number of spinal cord stimulation paradigms, of neuromodulation treatments available, it is imperative to conduct high-quality clinical trials to study effectivity and pain relief of each individual treatment. - *Chapter 7*

6. There is currently no clinical evidence to support there might be a difference in pain relief of active as compared to passive recharge burst SCS in chronic neuropathic pain. – *Chapter 5*

7. The development and evaluation of a robust operant-based preclinical test for low back pain (LBP) detection in CD-LBP animal models is a crucial next step in preclinical research on neuromodulation in CD-LBP. – *Chapter 6*

8. "*The only real mistake is the one from which we learn nothing.*" – *Henry Ford (1863 – 1947)*

9. *"In the world of pain research, 'knowledge is power' becomes 'knowledge is relief." – ChatGPT*