

Specific Question:

In adults with chronic coccydynia, is the intervention of corticosteroid injection with or without internal coccyx manipulation more effective in reducing coccyx pain than usual care?

Clinical bottom line

There are no studies that compare corticosteroid injections with or without manipulation with usual care for the treatment of coccyx pain.

The studies identified were observational studies investigating corticosteroid injections and manipulation with no comparison intervention or control.

Therefore there is a need for high quality trials investigating this.

Why is this important?

Patients with coccydynia are seen in interface services and referred for sedation, corticosteroid injections with internal coccyx manipulation.

The evidence base for this practice is unclear and its effectiveness difficult to establish as referral numbers are so small.

Considering the risks of this procedure, it would be helpful to understand the best available evidence around whether the intervention of corticosteroid injection with or without internal coccyx manipulation is more effective in reducing coccyx pain than usual care. For most patients usual care is medication, time for natural resolution, cushions when sitting for pressure relief and occasionally physiotherapy consisting mainly on advice on postures and exercises.

Inclusion Criteria

	Description	Search terms
Population and Setting	Adults with chronic coccyx pain/coccydynia/ coccygeal pain/coccyx pain/sacrococcygeal pain/tailbone pain/ coccygodynia Excluded: Children Adult Females post-partum-up	

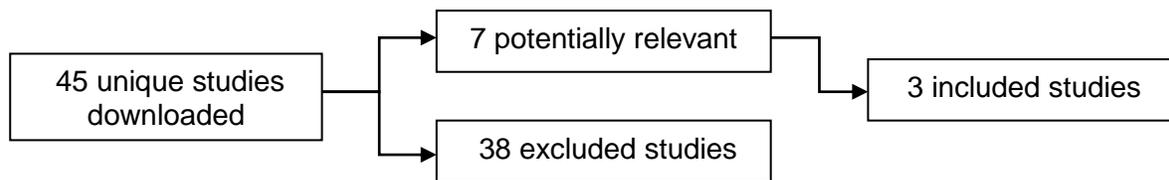
	to 1 year(exclude this if lots of literature)	
Intervention or Exposure (ie what is being tested)	Intervention of corticosteroid/glucocorticoid injection with internal coccyx manipulation/mobilisation or without internal coccyx manipulation/mobilisation	
Comparison, if any	Usual care GP care No treatment	
Outcomes of interest	Pain, function, sitting duration, quality of life, time off work	
Types of studies	SR & RCTs only Observational studies if no RCTs	

Databases Searched	Date of last search	No. downloaded
Clinical Knowledge Summaries		
PEDro	04.02.2014	3
BMJ Updates		
Clinical Evidence	04.02.2014	0
TRIP Database		
NICE		
HTA	04.02.2014	
Bandolier		
The Cochrane Library	30.01.2014	1
Medline	04.02.2014	14
Cinahl	04.02.2014	1
Embase	04.02.2014	26
PsycInfo	04.02.2014	0
Professional websites		

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Results



First Author, year and type of study	Population and setting	Intervention or exposure tested	Study results	Assessment of quality and comments
Baloch et al (2012) Observational uncontrolled interventional study	172 patients with coccydynia	Conservative care (medications, reduced sitting etc) Those not responding within 3-6 months received manipulation of the coccyx under sedation with local infiltration of steroid	97 (56%) recovered with conservative management. 75 (44%) also underwent manipulation of the coccyx under sedation with local infiltration of steroid	Small study sample with the majority being males (80.2%) and no control arm decreases the validity and generalizability of the results.
Wray et al (1991) Prospective, non-randomised trial	Over a 5 year period, 120 patients with coccydynia were studied, 62 in the context of a randomised trial (a further 50 were in pilot study)	Trial compared local injection local injection of (methylprednisolone acetate and bupivacaine) and manipulation (n=33) with injection alone (n=29).	Local injection achieved 59% "success" compared with 85% success rate in manipulation and injection group. Note 'success' outcome note defined.	Authors do not consider the relapses which were 21% of the injection only and 28% of the manipulation and injection. Allocation based on date of birth - was susceptible to bias. Patient characteristics not described for each intervention group.

Summary

There are no studies that compare corticosteroid injections either with or without manipulation with usual care for the treatment of coccyx pain.

The studies identified were an uncontrolled observational study of manipulation and injection and a non-randomised trial comparing corticosteroid injections and manipulation with injection alone. Neither of these studies exactly answer the clinical question in this CAT. However, the low quality non-randomised trial does suggest that adding manipulation to steroid injections is more effective than injection alone.

Conclusion

No evidence was found to specifically answer this clinical question. A well conducted randomised controlled trial comparing steroid injection plus manipulation with usual care in people with coccydynia is needed.

References

1. Baloch N, Hashmi I, Khalid M, Hashmi M (2012) Local infiltration of steroid in conjunction with coccygel manipulation as a treatment of coccydynia. *Journal of Surgery Pakistan (International)* 17(2):65-67
2. Wray C, Easom S, Hoskinson J, (1991) Coccydynia aetiology and treatment. *British Society of Bone and Joint Surgery* 73- B:335-8