

A large, stylized oak leaf graphic in a dark blue color, positioned on the left side of the slide, partially overlapping the text.

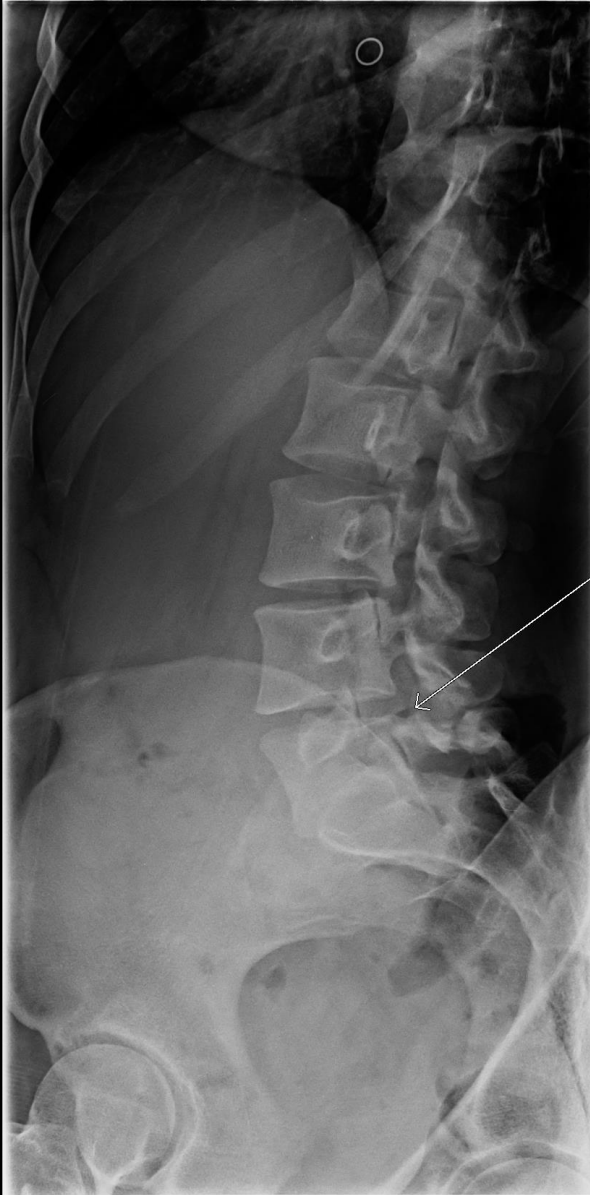
27-year-old female with lower back pain

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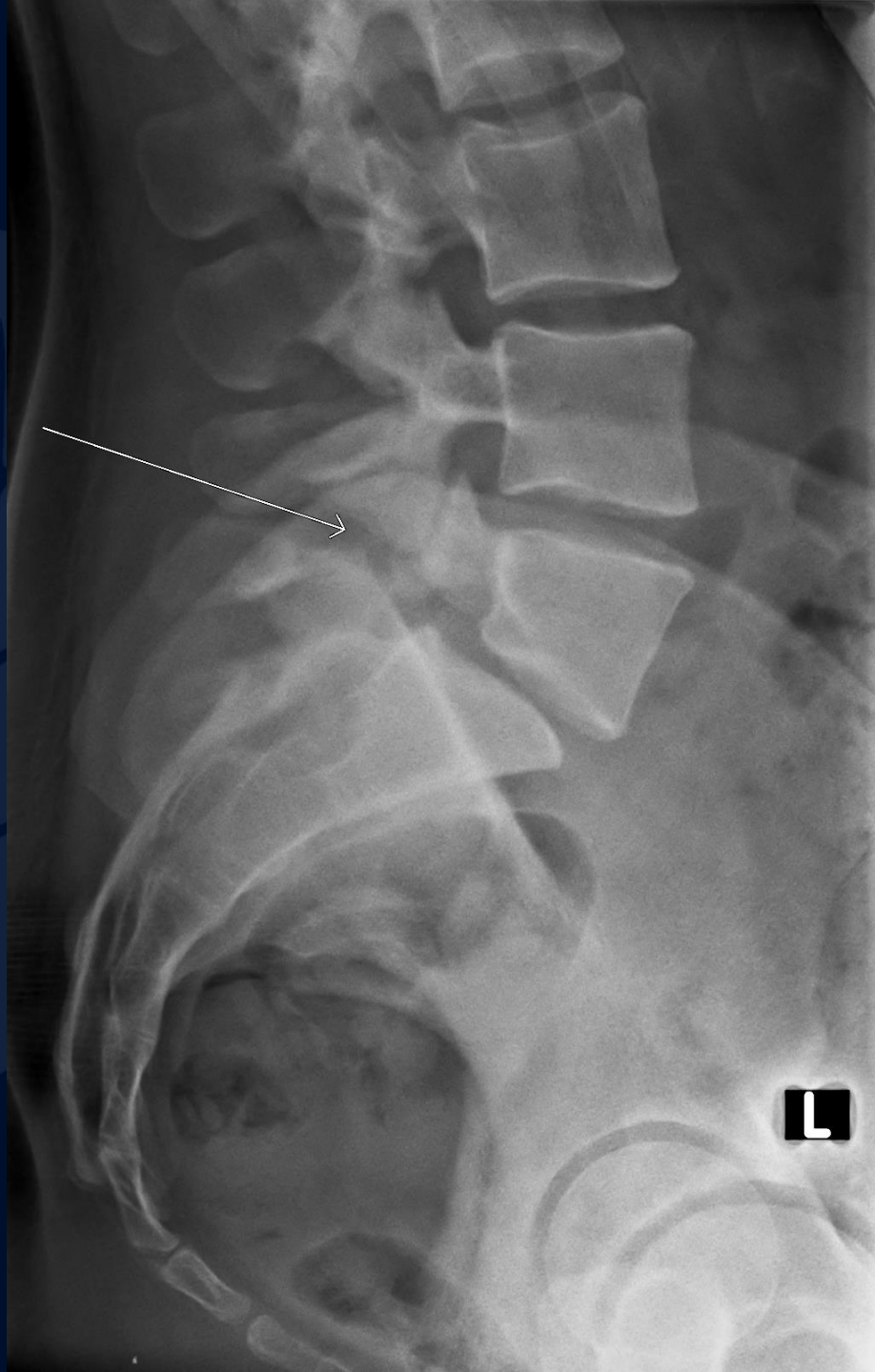
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Bilateral Pars Defects

Bilateral Pars Defects

Defect in pars interarticularis (junction of pedicle, lamina, and facet), thought to result from repetitive stress injury.

Imaging:

- Most common at L5 (80-90%)
- L4 2nd most common
- May be associated with spondylolisthesis
- Discontinuity in neck of “Scotty dog” on oblique or lateral radiographs
- Elongation of spinal canal at level of pars defects on axial imaging
- “Incomplete ring” sign on axial imaging.
- Look for well corticated/sclerotic margins to exclude acute traumatic fracture at pars

Bilateral Pars Defects

Clinical issues:

- 6-8% of general population, Males > Females
- 10-20 years old is typical age range
- Symptoms of chronic low back pain
- Conservative measures in grade 1-2 spondylolisthesis
- Wide variety of practice patterns for treatment
 - 50% of surgeons agreed on surgical treatment
 - No consensus on optimum surgical strategy

References

- [Statdx.com](https://www.statdx.com)