

SUBJECTIVE CLINICAL SYMPTOMS AND OBJECTIVE URODYNAMIC FINDINGS IN FEMALE PATIENTS WITH SYMPTOMATIC TARLOV CYSTS

Hypothesis / aims of study

Tarlov cysts are CSF filled cysts of the sacral nerve roots found more commonly in women. Although typically considered asymptomatic, a variety of symptoms have been associated with Tarlov cysts including but not limited to local pain and tenderness, pelvic and vaginal pain, coccygodynia, radiculopathy, bowel and bladder dysfunction and sexual dysfunction. The NIH considers Tarlov cysts an orphan disease entity (NORD) with the actual prevalence of symptomatic Tarlov cysts being unknown. The purpose of this study is to identify common neurologic and urologic findings in patients with symptomatic Tarlov cysts.

Study design, materials and methods

This is an IRB approved retrospective chart review at a single institution. We identified 32 women with Tarlov cysts from clinical and operative records. One neurosurgeon and one urogynecologist evaluated all of the patients.

Results

Urinary frequency and urgency, lower back or radicular pain and bowel dysfunction were the most common reported symptoms. The average age of the patients was 55 with a range between 29 and 85 years old. The size of the cyst ranged between 1.2 and 3.9 cm. The majority of the cysts had S2 involvement. Patients with complaints of urinary urgency and frequency demonstrated urethral relaxation incompetence and/or detrusor overactivity on urodynamic testing. Eight patient underwent pre and postsurgical urodynamic testing.

Interpretation of results

Patients with symptomatic Tarlov cysts have bladder and bowel dysfunction as well as radiculopathy. Urodynamic abnormalities can be demonstrated in these patients. With surgical intervention for the Tarlov cyst, both subjective clinical symptoms and objective urodynamic findings can improve.

Concluding message

Tarlov cysts can be a cause of back pain as well as pelvic organ dysfunction. There is currently no standardized treatment approach for Tarlov cysts. Many patients suffer prolonged pain and disability because this radiologic finding is commonly described as "of no clinical significance." In patients who are deemed to have idiopathic bowel or bladder dysfunction refractory to standard treatments consider evaluation for a Tarlov cyst.

<i>Specify source of funding or grant</i>	no funding source, unfunding time by each department at the medical school
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	University of California IRB
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No