## Bijlage Overzichtstabel additionele literatuur

| Title | Study | Reason for Exclusion | Outcome:<br><br>pain | Functioning | Quality of life | complications |
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| Facet joint syndrome review, Valerio, 2020 | P: facet joint syndrome<br><br>25 studies | No full text & wrong design | A certain amount of improvement of pain was reported in 100% of the patients. | Not reported | Not reported | No significant complications reported. |
| Efficacy of RF neurotomy, Janapala, 2021 | P: LBP ≥3 months<br>I: RF ablation<br><br>12 RCT | Multiple interventions; only MINT matches PICO | Level II evidence for RF ablation up to 6 months and longer than 6 months (clinically significant if pain relief NRS/VAS 3 points, 50% relief; and improvement in functional status) | | Not reported | Not reported |
| Comparative efficacy of RF denervation, Li 2022 | Various RF techniques vs sham | Wrong comparisons; no conservative treatment | Moderate evidence indicated that RF ablation had a greater pain relief than sham control in the short (SMD -1.58, 95% CI -2.98 to -0.18) and the long term (SMD -4.90, 95% CI, -5.86 to -3.94). | Not reported | Not reported | Not reported |
| Minimally invasive treatments for CLBP, Ambrosio, 2023 | P: CLBP<br>I: minimally invasive procedures<br><br>18 studies | Multiple interventions; only MINT matches | RF ablation displayed slightly superior or similar outcomes (pain, disability) compared to IA CCS, physical therapy, or sham procedure. | | | No difference in complications |
| RF treatments for lumbar FJS, Park, 2024 | P: Lumbar FJS<br>I: RF ablation<br><br>25 RCT | Wrong controls except Chen/Juch | Endoscopic neurotomy consistently ranked highest in terms of pain reduction and ODI score improvement at 1, 3, 6, and 12 months. At 1 and 6 months, endoscopic neurotomy had the highest SUCRA value for pain reduction (0.833 and 0.860, respectively), followed by medial branch RF ablation | | | Cannot open RAPM<br><br>Not reported |
| Efficacy of RF in lumbar facet pain, Lainez Ramos- | P: Chronic LBP<br>I: RF ablation | Only placebo; no conventional therapy | RF showed significant benefits over placebo in pain relief in the | RF showed changes in functional disability in the short | No statistically significant differences were | Not reported |

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| Bossine, 2024 | 8 RCT | | short (MD -1.01; 95% CI -1.98 to -0.04; p = 0.04), medium (MD -1.42; 95% CI -2.41 to - 0.43; p = 0.005), and long term (MD -1.12; 95% CI -1.57 to - 0.68; p < 0.001) | (SMD - 0.94; 95% CI - 1.73 to - 0.14; p = 0.02) and long term (SMD - 0.74; 95% CI - 1.09 to - 0.39; p < 0.001) | observed in QoL or quantitative GPE, but benefits for RF ablation were observed in dichotomous GPE | |
| Effectiveness of facet nerve blocks, Manchikanti, 2024 | Injection/nerve block comparisons | Wrong controls (no conservative treatment) | 4.091 points decrease of NRS (95% CI: -4.136 to -4.047, P < 0.0001) at 3 months, 4.666 point decrease (95% CI: -4.715 to -4.617, P < 0.0001) at 6 months, and 4.604 point decrease of NRS (95% CI: -4.658 to -4.551, P < 0.0001) at 12 months. | 14.880 point decrease in ODI scores with (95% CI: -15.324 to -14.436, P < 0.0001) at 3 months, 13.752 decrease points at 6 months (95% CI: -14.197 to -13.307, P < 0.0001), and 16.072 point decrease at 12 months (95% CI: -16.670 to -15.474, P < 0.0001) | Not reported | Not reported |