Sacroiliac joint (SIJ) dysfunction is increasingly acknowledged as a significant etiology of low-back pain. The prevalence of SIJ-mediated low-back pain is reportedly as high as 30%. The etiologies of SIJ dysfunction include both traumatic and nontraumatic causes such as osteoarthritis. Relevant to spine surgeons, pain related to the SI joint after fusion surgery has also been established. In one study of patients who underwent fusion to the sacrum, postoperative back pain was related to the SIJ in 32% of patients.

Surgical treatment of SIJ dysfunction involves arthrodesis and is typically indicated after failure of conservative management. Randomized studies have shown that minimally invasive SIJ fusion can be efficacious compared with nonoperative management. Moreover, in cases of long fusion constructs associated with deformity surgery, there has also been increased focus on prophylactic SIJ fusion to prevent postoperative pain.

The pathophysiology and common treatment options for SIJ dysfunction have been extensively reported. Consequently, this issue of *Neurosurgical Focus* has been carefully curated to present new information and is thereby concise in content. The selected articles highlight emerging techniques and technologies related to SIJ fusion.

References

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