

Author Year Country PEDro Score Research Design Total Sample Size	Methods	Outcome
Falci et al. 2002 USA PCT N=41	Population: Type of pain=neuropathic. Intervention: The first nine patients were placed in group 1 and the next 32 in group 2. Individuals in group 1 underwent Dorsal Root Entry Zone (DREZ) microcoagulation using recorded spontaneous neuroelectrical hyperactivity in DREZ as a guide. While the second group underwent DREZ microcoagulation using the above recorded spontaneous neuroelectrical hyperactivity in the DREZ as well as recorded evoked hyperactivity during TCS of the DREZ. Outcome Measures: Visual Analogue Scale (VAS)	<ol style="list-style-type: none"> Seven patients in the first group achieved at least 50% pain relief post treatment while five patients achieved 100%. In the second group, 84% of patients reported 100% pain relief post treatment; while 88% reported at least 50%. In patients in the second group that experienced below level pain, 81% of patients reported 100% pain relief; while 19% that experienced above level pain all achieved 100% pain relief. The intervention did not result in any deaths. 82% of patients lost partial or complete pinprick sensation in the corresponding DREZ. 68% experienced partial or complete loss of light touch sensation.
Chun et al. 2011 Korea Pre-post N=38	Population: Age: 49 yr, Level of injury: T=5, Conus Medullaris=33. Severity of Injury: AIS A=27; B11; Type of pain=neuropathic. Treatment: MDT was performed according to Sindou's technique Outcome Measures: Visual Analogue Scale (VAS)	<ol style="list-style-type: none"> Overall patients achieved good (79.0%), fair (10.5%) and poor (10.5%) poor pain relief. Good pain relief was achieved in 82.5% of those with mechanical pain and 100% with combined pain, vs. 20% with thermal pain Good pain relief was achieved in those with diffuse pain (73.3%) and segmental pain (82.6%). Good pain relief was achieved in those with intermittent pain (78.2%) and continuous pain (80.0%)
Spaic et al. 2002 Yugoslavia (Serbia) Case series N=26	Population: Type of pain=neuropathic. Treatment: Dorsal Root Entry Zone (DREZ) surgical treatment Outcome Measures: Visual Analogue Scale (VAS)	<ol style="list-style-type: none"> DREZ surgical treatment was found to be effective at reducing pain in the majority of patients, more so for those with mechanical and combined vs. thermal pain. Long-term pain relief was achieved in 90% of those with mechanical pain and 25% of those with combined pain.
Sindou et al. 2001 France/Egypt Case series N=44	Population: Type of pain=neuropathic and musculoskeletal. Treatment: Patients underwent Dorsal Root Entry Zone (DREZ) procedure to reduce pain. Outcome Measures: Visual Analogue Scale (VAS)	<ol style="list-style-type: none"> By 10 days, 70% of patients had experienced good pain relief, 18.5% fair pain relief, and 11.5% poor pain relief. 3 months later, 66% reported continued good pain relief. Better pain relief was seen in those with segmental vs. below-lesion pain and in those with conus medullaris vs. higher injuries.
Spaic et al. 1999 Yugoslavia (Serbia) Case series N=6	Population: Type of pain=neuropathic. Treatment: DREZotomy surgical procedure.	<ol style="list-style-type: none"> 4/6 patients reported complete pain relief; 2/6 reported 80% pain relief.

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	Outcome Measures: Self-reported pain relief.	2. Two patients who had been using pain medication reported no longer needing them.
Rath et al. 1997 Germany Case series N=23	Population: Type of pain=neuropathic Treatment: Patients underwent Dorsal Root Entry Zone (DREZ) procedure. Outcome Measures: Patients were asked to judge postoperative pain relative to preoperative pain (%).	1. Of the 23 patients who underwent the procedure, 11 were judged to have experienced good pain relief; the remaining 12 were said to have had a fair or poor result. 2. Better results were seen for those with 'end-zone' vs. diffuse pain.
Sampson et al. 1995 USA Case series N=39	Population: Type of pain=neuropathic and musculoskeletal. Treatment: Patients received Dorsal Root Entry Zone (DREZ) procedures from 1978 to 1992. Outcome Measures: Pain relief, as indicated by subsequent treatment and activity levels.	1. 21 of the 39 reported good results, while the remaining 18 reported fair results at a mean of 3 yr. 2. 30/39 had no post-operative complications.
Nashold et al. 1990 USA Case series N=18	Population: Type of pain=neuropathic and musculoskeletal. Treatment: Patients who had a SCI and Dorsal Root Entry Zone (DREZ) procedures and drainage to remove cysts that had developed <1 post injury. Outcome Measures: Pain relief, as indicated by subsequent treatment and activity levels.	1. 14/18 patients reported good pain relief with combined cyst drainage. Good pain relief was defined as not requiring any analgesics and activities not limited because of pain.
Friedman & Nashold 1986 USA Case series N=56	Population: Type of pain=not stated. Treatment: Patients underwent Dorsal Root Entry Zone (DREZ) procedure. Outcome Measures: Pain relief, as indicated by subsequent productivity levels.	1. 50% of patients reported good pain relief, 9% fair, 4% poor following DREZ procedure. 2. Better results were obtained for those with segmental vs. diffuse pain.