

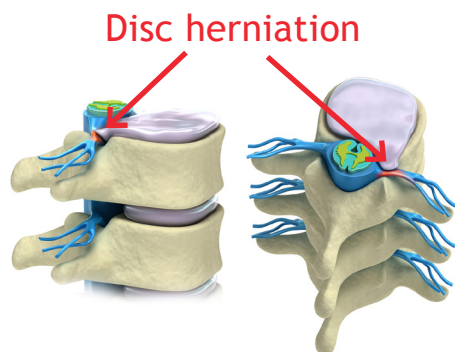
Experiencing Pain that Travels Down Your Leg? You Might Have a Herniated Disc

by Max W. Cohen, MD, FAAOS

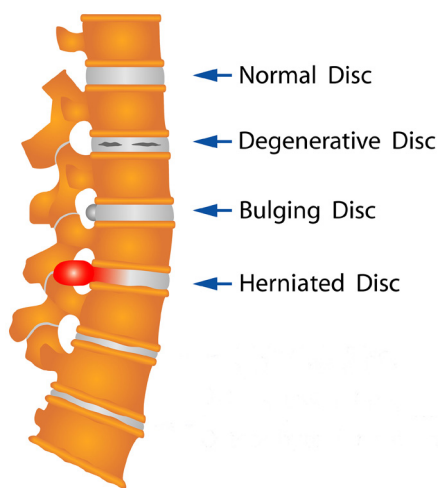
Herniated discs in the lower back are a common cause of back and leg pain, particularly among people in their 30s and 40s. If you have a herniated disc, you typically will experience sharp pain in the back that shoots down through the buttock into one or both legs.

What is a herniated disc?

Your spine is made up of vertebrae – bones that stack one upon another. Separating each vertebra from the next is a disc. Each disc includes a jelly-like center, called the nucleus, which is contained by a fibrous outer wall called the annulus. Discs allow for movement in the spine and act as shock absorbers.



Constant wear and tear can weaken or damage a disc over time. A disc's nucleus can begin to bulge against the annulus. If the annulus tears, it can cause back pain. More importantly, the nucleus can then squeeze through the annulus into the fluid-filled space surrounding the spinal cord. This is called a *herniation*, and it can pinch a nerve that comes from the spinal cord.



Herniations usually occur in the lower back at the disc between the fourth and fifth lumbar vertebra (L4-5) and at the disc between the fifth lumbar vertebra and the first sacral vertebra (L5-S1). These two discs account for 98 percent of all painful disc herniations

What are the symptoms?

A common symptom of a herniated disc in the lower back is a sharp, shooting pain from your back through your buttock into your leg

– a condition that is sometimes called *sciatica*. Your leg pain typically will be more intense than your back pain. Pain associated with a herniated disc can begin suddenly or develop gradually.

In addition to pain, a herniated disc can cause numbness, tingling or burning in the leg. Sometimes people have weakness in the leg or difficulty flexing or extending at the ankle.

If you have loss of bladder or bowel control along with these symptoms, see a doctor immediately. This may be a sign of a serious condition.

Max W. Cohen, MD, FAAOS, is the founding physician of Spine and Scoliosis Specialists, the area's only comprehensive spine care center, offering multi-disciplinary care by specialists in spine injuries and diseases. Dr. Cohen is the only doctor in the Triad with double fellowship training in spine and scoliosis surgery. He completed his training at Cornell University's prestigious Hospital for Special Surgery, the top-ranked orthopaedics hospital in the U.S., according to U.S. News & World Report.

How is it diagnosed?

An x-ray is usually the first imaging study your doctor will order. Based upon the results of the x-ray and your symptoms, your doctor may order an MRI or CT scan to directly visualize the discs. An electromyogram (EMG) may also be useful to determine which nerve root is being pinched.

What is the treatment?

In most cases, the pain caused by a herniated disc will slowly resolve on its own within 6 to 8 weeks. If symptoms persist, you may want to see a doctor for evaluation. Eighty percent of people with herniated discs respond to conservative treatments, which include taking a non-steroidal anti-inflammatory (such as ibuprofen) in combination with a muscle relaxer and applying heat and/or ice to the affected area of the back. Your doctor might also refer you for physical therapy and, in some cases, might prescribe a short-term course of an oral steroid or recommend an epidural injection.

Is surgery ever needed?

If conservative treatments don't help, your doctor may recommend a microdiscectomy – a type of surgery designed to reduce leg pain (more so than back pain). The surgeon uses a special microscope to enlarge the view of the spine and disc, allowing for a much smaller incision than in traditional back surgery. During surgery, the torn annulus and the portion of the disc that's pressing on the nerve are removed, in addition to any loose disc that appears as though it might cause a problem in the future.

Patients often can go home the same day as the surgery. However, your doctor may ask you to stay in the hospital overnight. You can expect to walk within hours after the surgery. Because a microdiscectomy is less invasive than traditional back surgery, most people heal faster. This means that you can get back to work or your other regular activities sooner.

For more information

If you are having back or leg pain that you would like to have evaluated, call our office at **336-333-6306** or visit our website at www.spineandscoliosisdocs.com to make an appointment for a consultation.

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