

# Low back slipped disc

*Your treatment options. Your second opinion.*



## **What is a low back slipped disc**

Your low back may be affected by a condition called a slipped disc that may cause low back and buttock pain, sciatica (leg and foot pain) and weakness, numbness or a tingling sensation in your leg and foot. Symptoms may vary from mild through to severe, which in rare cases may also include progressive muscle weakness and loss of bladder or bowel control.

A disc is a small, round structure in your spine that holds together two vertebrae (bones). Your spine is made up of 24 vertebrae in total, stacked up one on top of another. Within the spine the spinal canal (tunnel) contains the spinal cord and spinal nerves that branch off it.

Your disc has a tough outer layer and soft, jelly-like centre. It acts as a shock absorber for the spine when you walk or run. A slipped disc (also called a herniated disc) occurs when the jelly-like centre breaks through the outer layer and in severe cases may press against spinal nerves.

A slipped disc may develop due to degenerative changes that cause your disc to dry out and weaken. It's more likely the older you are, if you do frequent heavy lifting, sit for long periods or you're overweight. While low back pain affects up to nine out of 10 Australians at one time in their lives, a slipped disc causes less than 5% of them.

## **Treatment options**

Unless there are severe symptoms that may require urgent discectomy surgery, non-surgical treatments are most often suggested as the initial treatment.

There are several reasons for this. Firstly, most people with a slipped disc get better within 6-12 weeks, even without treatment. In addition, there are other structures in your low back that may also cause your pain such as joints, muscles and ligaments, however there are no simple tests that can identify exactly which structure is causing your pain.

Surgery is for sciatica / femoralgia (leg pain) or weakness in the legs not for back / spinal pain.

Fortunately though, non-surgical treatments as the initial treatment may often help achieve good improvement, regardless of the structure that is actually at fault.

## **Non-surgical treatments**

Non-surgical treatments that may often be effective for a slipped disc specifically, and low back pain regardless of the cause, include:

- > keep active as much as possible, at the same time as avoiding aggravating activities.
- > take pain-reducing medications such as paracetamol based analgesia, non-steroidal anti-inflammatory drugs (NSAIDs) in short courses.
- > soft tissue physical therapy.
- > epidural steroid injection into your spine to reduce pain and inflammation.
- > self-help, such as good posture, for recovery and preventing slipped disc coming back.

All non-surgical treatments may have side effects.

## **Discectomy**

If you have severe symptoms such as progressive muscle weakness and loss of bladder or bowel control or have tried non-surgical treatments but improvement is unacceptably slow, a discectomy may be suggested to you.

Discectomy is surgery that cuts away pieces of disc that are pressing on spinal nerves. The three main techniques that are available include:

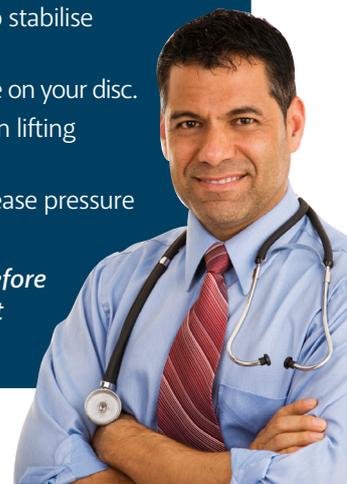
- > open discectomy: standard surgery through an incision (cut)
- > microdiscectomy: using a microscope
- > automated percutaneous discectomy: minimally invasive keyhole surgery.

## **Self-help your slipped disc**

You may help your recovery and prevent a slipped disc coming back with the following measures:

- > Avoid activities that trigger pain.
- > Relaxation techniques may reduce stress-related pain.
- > Counselling may help change how you feel about your pain.
- > Strengthening exercises may help stabilise the spine.
- > Good posture may reduce pressure on your disc.
- > Use your legs, not your back when lifting heavy objects.
- > A healthy body weight may decrease pressure on your disc.

***Always consult a medical expert before commencing a course of treatment for any medical condition.***





Prior to having a discectomy, tests may often be done such as magnetic resonance imaging (MRI) scan and myelography to help confirm your pain is caused by a slipped disc, because otherwise a discectomy won't help.

### **Discectomy and medical research**

When evaluating you for a discectomy or other treatments for a slipped disc specifically or low back pain in general, your treating medical specialist will take into account many complex factors, including the latest medical research.

The research has found that for people with a slipped disc who have severe symptoms, discectomy may be more effective compared to non-surgical treatments for faster relief in the short term (6 to 12 weeks).

However in the long term (after one to four years), in certain cases a discectomy may be no more effective than non-surgical treatments for severe symptoms. Studies have also found that for people with a slipped disc who have less severe symptoms, both discectomy and non-surgical treatments may often be effective, both in the short and long term. There is a 1:10 risk of recurrence.

In addition, research also shows that discectomy may need to be performed again due to pain coming back in up to one in ten people who have had a discectomy.

### **Discectomy and risks**

While the risks of discectomy are low, complications may occur including paralysis of leg/s, paraplegia, infection, nerve damage, spinal fluid leak, visual loss that causes pressure on spinal nerves.

Understanding the risks is important, particularly given the possibility that discectomy may be no more effective than non-surgical treatments for severe symptoms in the long term and generally both types of treatment may be effective for less severe symptoms.

### **Discectomy and slipped disc - the main points**

- > If you have severe symptoms due to a slipped disc or you have tried non-surgical treatments but your improvement is unacceptably slow, a discectomy may be suggested to you.
- > If you're considering a discectomy, take into account the medical studies showing that discectomy may be more effective than non-surgical treatments for faster relief of severe symptoms in the short term but may not be more effective for severe symptoms in the long term, for less severe symptoms both discectomy and non-surgical treatments may often be effective, and also discectomy may need to be performed again due to pain coming back.
- > Put into practice measures that may help with your recovery and prevent a slipped disc coming back.

### **Would you like a second opinion?**

Deciding on a treatment path for a medical condition can be a difficult, complex and stressful question.

Would you like the benefit of an expert second opinion to decide on your treatment options?

**If you want to know more about GPS<sup>2</sup> or have a general enquiry, please contact us on 1800 477 246 or email via [contact@gps2.com.au](mailto:contact@gps2.com.au)**

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