



*my diagnosis*

## DISC HERNIATION

*Understand your condition.  
Know your next steps.*

### ***What is Disc Herniation***

The disc is made up of two major components: an interior called the nucleus pulposus, and an outer ring called the annulus fibrosis. The goal of the annulus fibrosis is to contain the nucleus pulposus. If the outer ring gets damaged, one or two things can happen:

1. The ring stretches, much like a balloon, and pushes out into a space where it's not supposed to be ("disc bulge")
2. The outer ring tears, allowing the nucleus pulposus to leak out (a "herniated disc").

In either case, nerves that travel through the spine can become irritated/inflamed or compressed by the disc abnormality.

### **SYMPTOMS OF A DISC BULGE**

- » Early symptoms can be somewhat vague and there can be a generalized backache.
- » Most people cannot pinpoint exactly where it hurts and will experience a relatively large area of pain.
- » If the disc bulge irritates a nerve, you may feel arm or leg pain.

### **SYMPTOMS OF A HERNIATED DISC**

- » The pain can be sudden and severe.
- » Commonly it's described this way: "I just bent over to grab the grocery bag, and it felt like someone stabbed me and I couldn't stand up because of severe pain down my right leg to my toes."
- » You may experience severe shooting pains down an arm or leg.

For expert advice on how to stay healthy and active, visit [summitortho.com](http://summitortho.com).

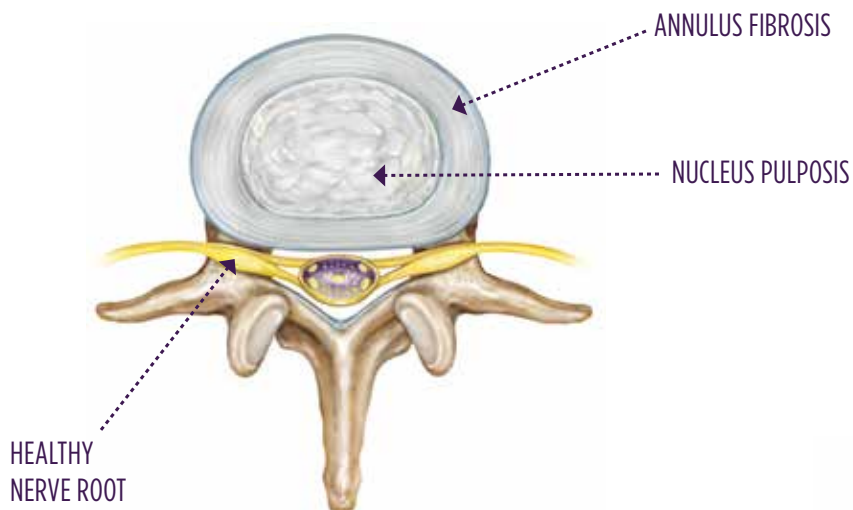
APPOINTMENTS (651) 968-5201



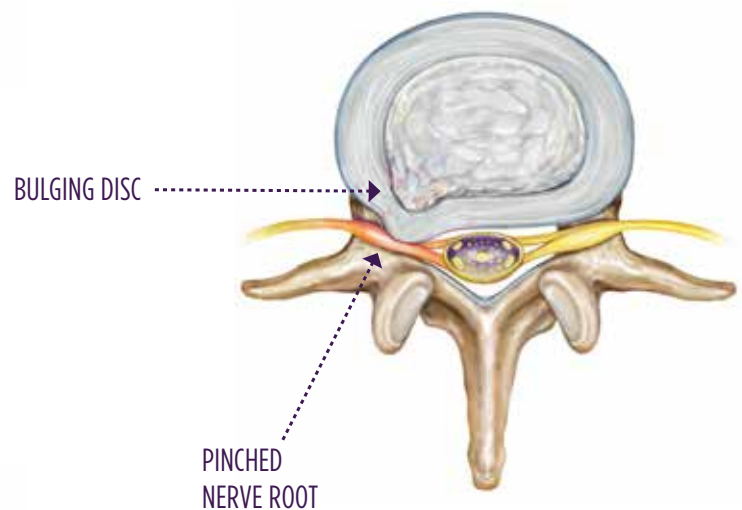
**SUMMIT  
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# DISC HERNIATION

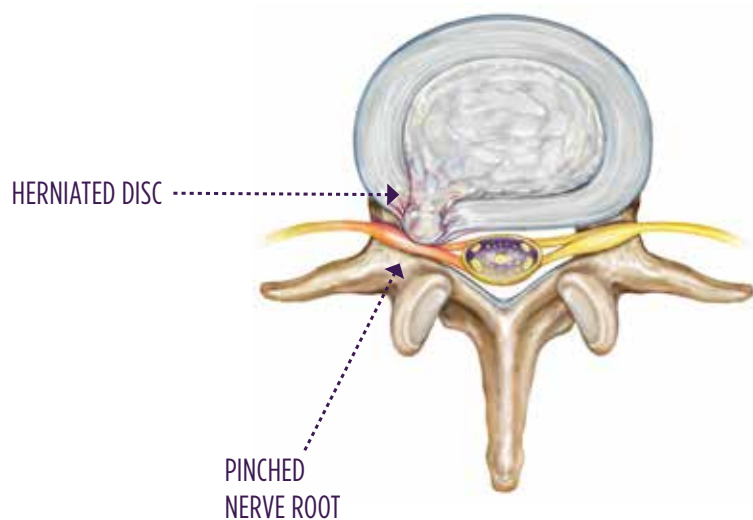
**NORMAL, HEALTHY DISC IN YOUR SPINE**



**A BULGING DISC IN YOUR SPINE**



**A HERNIATED DISC IN YOUR SPINE**



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### ***How is it diagnosed?***

Usually, a good history and a thorough physical exam can properly diagnose a disc herniation.

If extremity pain and/or weakness are bad enough to warrant treatment beyond medications and physical therapy, then imaging studies can be done to specifically see which disc is causing the trouble. The most common and detailed imaging study is an MRI, which allows visualization of nerves and soft tissues.

If you have an implant like a pacemaker, then a CT scan or CT/ myelogram may be an alternative.

### ***How is disc herniation treated?***

Thankfully, despite the pain associated with a disc herniation, symptoms can often times improve on their own with supportive treatments. Further, the body's own repair mechanisms can recognize the disc herniation as foreign and repair/resorb it. This process can take several months.

**Medications:** Pain medicines are often used. These can consist of opioid, muscle relaxants, neuropathic medicines, and occasionally oral steroids. The goal of these medicines is symptom management.

**Physical Therapy:** The goal of physical therapy is to establish exercises that can be performed to lessen pain in the affected extremity. Also, techniques/ modalities to help with muscle spasms are used. Ultimately spine-strengthening and stabilization is performed.

**Epidural Steroid Injection:** The goal of epidural steroid injections is to deliver a strong anti-inflammatory medicine (steroid) under X-ray guidance close to where the disc herniation/nerve irritation is occurring. The intended outcome of the procedure is to decrease pain while the body is resorbing the disc material.

**Surgery:** Surgery is performed in cases of disc herniation where the pain is severe, or function-limiting weakness is present in the extremity. The goal of surgery is to mechanically remove the piece of disc that herniated (the whole disc is not removed). Surgery for disc herniations often leads to successful outcomes for patients with severe/refractory extremity pain.



Summit Orthopedics' Eagan location was awarded the prestigious Certificate of Distinction for Spinal Fusion by The Joint Commission. Summit is the first group in Minnesota to have received this award for patient satisfaction and key outcome measurements.

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## ***What are the treatment options? What does my specialist recommend?***

Your spine specialist has developed a treatment plan based on your specific situation. His or her recommendation for you has been selected from the treatment options below.

	TREATMENT	DESCRIPTION	MY NEXT STEP
<input type="checkbox"/>	MEDICATION	The most effective and frequently used medications are those that treat the underlying causes for the symptoms: inflammation and muscle spasms.	Contact the patient coordinator if symptoms do not improve: (651) 968-5201
<input type="checkbox"/>	PHYSICAL THERAPY	Often times the pain you are feeling is not from a disc herniation and can be treated with physical therapy.	Set up a therapy appointment with the patient coordinator: (651) 968-5201
<input type="checkbox"/>	EPIDURAL STEROID INJECTIONS	These injections help to directly reduce inflammation/irritation of the nerve affected by a disc herniation. They do not fix the herniation, only provide pain relief.	Set up procedure date and time with the patient coordinator: (651) 968-5201
<input type="checkbox"/>	SURGERY	Surgery is reserved only for the cases where everything else has been tried or the limb weakness is so severe that you cannot do the most basic of daily activities. The surgery lasts about 1-2 hours and many people feel better immediately after surgery.	Set up surgery date and time with the patient coordinator: (651) 968-5201

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