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WHAT IS SCIATICA ? It is the term given to a painful sensation that follows the path or distribution of the sciatic nerve. This is a large nerve that has its beginning in the lower back and runs down your buttock, hip and posterior part of the leg. Your doctor may use the term "lumbar radiculopathy" to describe it.



CAUSES. Compression of one or more of the roots of the sciatic nerve or of the nerve itself can trigger the painful sensation called sciatica. Compression can be due to herniated disc, narrowing of the spinal canal which is also called spinal stenosis or narrowing of the orifice thru which the nerves exit your spinal canal. Also when one vertebra slips over the one below, it may pinch a nerve. This is called spondylolisthesis. Finally spasm of the piriformes muscle that is located deep in your buttock area, bone spurs, tumors or infection can also be causative factors. Contributing factors include obesity, pregnancy, high heels, soft mattresses and chairs or recliners without appropriate lumbar support.

WHAT YOU FEEL & WHAT THE DOCTOR LOOKS FOR. Most of the time you will not remember doing anything to hurt yourself. Occasionally, you will suddenly get the pain after lifting something heavy or moving quickly. Most people describe a deep, severe pain that starts low on one side of the back and then shoots down the buttock and the leg with certain movements. Tingling, numbness and a sensation of pins and needles may accompany the pain in the leg. The pain may range from slightly annoying to totally unbearable. The pain may get worse when you sneeze or cough, when laughing or having hard bowel movement. Some people describe the worst pain when trying to stand from a low sitting position, such as standing up after sitting on a toilet seat. Bending backward can also make the pain worse. Weakness and lack of coordination of your leg may be present. Decreased sensation may also be present. Some people have pain in one part of the leg and numbness in another part of the same leg. Shifting of the trunk to the opposite side is common to avoid putting weight on the affected leg. Rarely you may loose control of your bladder or bowel accompanied by tingling and numbness of your groin and genital area. If this happens, you need emergency surgery.

TESTING. After a history and physical exam one or more of the following may be ordered depending on the circumstances; x-rays, MRI, CT scan, myelography, bone scan, nerve conduction studies or electromyography. Blood tests such as a CBC (complete blood count) may suggest infection, anemia due to certain cancers, or other unusual causes of sciatica. Elevated sedimentation rate may suggest inflammation somewhere in the body.

TREATMENT. The goal is relieving pressure and inflammation of the affected nerve root or the nerve itself.

Self-care at home. Here are some ways to ease the pain at home:

- *Over the counter Tylenol, aspirin, or ibuprofen will help ease the pain.
- *Ice packs alternating with moist heat afterward.
- *Lying down on your back on a firm surface with a pillow under your knees. However you should stay active within the limits imposed by your pain.

Medical therapy. Conservative medical therapy usually consists of prescription oral anti-inflammatory agents accompanied by muscle relaxants. Your doctor may also recommend Epidural steroid injections or other injections or procedures. This delivers anti-inflammatory medication to the area where the inflammation and pressure exist. Depending on the response, repeated injections may be indicated.

Physical therapy. Once the acute pain gets better, physical therapy may be used as it may have a role in long term avoidance of further episodes. This may consist of massage, traction, ultrasound, electrical stimulations or other modalities depending on circumstances.

Surgery. As a last resort surgery may be in order. This modality of therapy however, should be considered very carefully and only after all else fails due to its greater risk. Back surgery, even in the best and most competent and experienced hands has a 30% failure rate. Scar tissue after surgery may also become a difficult problem to deal with later on.