

JUST BEEN DIAGNOSED:

Herniated Disc

BY HEATHER CAMLOT



PHANTOM EPIDEMIC

Even though they may show no symptoms, as many as half of all Canadians have a herniated disc by age 50, according to Dr. Richard Dumais, director of the pain clinic at Dr. Georges-L.-Dumont University Hospital Centre in Moncton, N.B.

IF THE PROBLEM IS IN MY BACK, WHY DO I HAVE PAIN IN MY LEG?

Let's start with a brief anatomy lesson: Discs are rubbery pads that act as shock absorbers between the vertebrae of the spine. A disc that's herniated is like an oozing jelly doughnut – the gelatinous fluid in the centre starts leaking through cracks in the outer layer of cartilage. This isn't necessarily painful, unless that fluid hits nearby nerves, explains Dr. Richard Dumais, director of the pain clinic at Dr. Georges-L.-Dumont University Hospital Centre in Moncton, N.B.

The most commonly herniated disc is located where the back meets the pelvis, behind which are the nerves that are connected to the foot – thus the shooting leg pain.

If the herniated disc is in the neck, you may feel pain in your shoulder and arm. "Sneezing and coughing will make the pain worse," adds Dumais. Other symptoms include numbness, weakness or tingling in parts linked to a particular nerve, muscle spasms and, in severe cases, loss of bladder and bowel control.

WILL I NEED SURGERY?

The funny thing about most herniated discs is that even if you do nothing, there's a 95 per cent chance the disc will heal on its own within a year.

"I could prescribe going to bingo, and you'd still be 50 per cent better in 10 days," says Dumais. Treatments such as over-the-counter anti-inflammatories and muscle relaxants can speed up the recovery process and help with spasms, and

physiotherapy is an option if there's no improvement after two weeks. Failing physio, your doctor may prescribe diagnostic imaging and a cortisone injection. Surgery is a last resort.

HOW CAN I PREVENT THIS FROM HAPPENING AGAIN?

You can't do much about age-related wear and tear – the No. 1 cause of herniated discs – but you can take preventative measures to guard against heavy strain on the back. Twisting while lifting, and constant exposure to vibration (such as driving) are two common triggers for the condition. Dr. Annette Bourdon, a chiropractor in Montreal, suggests a periodic spinal evaluation to spot and correct misalignments before long-term damage occurs from unevenly distributed stress on the spine. She also recommends:

- Maintaining strong core (think belly button to spine) and upper-back muscles (from your shoulder blades to your bum).
- Using proper lifting techniques. Face the object squarely, lift with your knees, keep your back straight and turn with your feet – not your waist. Get help for heavy or awkward loads.
- Practise good posture. Have a friend look at you from the side: Your ear, shoulder, hip, knee and ankle bones should be in a vertical line. ■

BACK PAIN PRIMER

Not sure what that twinge in your back is trying to tell you? Visit canadianliving.com/october for five things you need to know about back pain.