

Orthopaedic Connection

Sciatica

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Transforming patient information into patient understanding.

Sciatica. The very word makes most of us shudder.

It comes of course from the word sciatic, which is derived from a Latin word. It pertains to the Sciatic nerve, which is by far the largest nerve in the human body.

The Sciatic nerve originates from spinal cord branches, which pass through the pelvis and buttock to the thigh on each side of the body.

Sciatica therefore is neuralgia of the nerve.

Cause

The most frequent cause of the condition is herniated intervertebral disc, which we talked about the last 2 weeks. Those patients who have had the pain describe it as excruciating. Typically it is felt even into the lower leg and foot. Some describe it as a bad leg cramp that will not go away.

Pain is increased by walking, sitting, sneezing, coughing or any straining.

You may feel pain alone or you might also experience weakness in the leg and a feeling of pins and needles, burning or tingling.

When the herniated disc material presses on the nerve, the nerve gets very irritated and inflamed producing the pain of sciatica.

Treatment

Treatment of sciatica is really the treatment of herniated disc, which I described last week.

The treatment is mostly conservative. It can take several days to weeks for the condition to subside; sometimes even longer. Statistics have shown and it has been my experience with my own patients that 80 - 90% of patients with sciatica get better, over time without surgery.

Operative treatment (surgery) which I also described in detail last week, I will do on the 10% or slightly more who do not improve with conservative care.

Results With Surgery For Sciatica

My patients with sciatica who require surgery (laminectomy) are fully informed about what surgery involves and how I do it. I have a skeleton in the office that is very helpful in showing patients how their laminectomy is done.

I tell my patients they have a 90% chance of successful surgery if most of their pain is in the leg. If they have a lot of back pain too, all the back trouble usually doesn't disappear after surgery. The spine is extremely complicated and pain in most of us arises from more than one place.

When a herniated disc comes along it is added to the back trouble the person already had. Laminectomy for sciatica is successful in a large majority of cases in relieving the leg pain. The "bad back" is not cured by laminectomy.

I won't do the laminectomy unless I am convinced the patient and I are on the same page with this important concept.

Emergency Situation

In very rare cases, a herniated disc may press on nerves that cause the patient to lose control of their bowel and bladder. If this happens, the patient also has numbness or tingling in the groin and genital area. This is an emergency situation that requires immediate surgery.

Afterwards

After laminectomy I advise my patients to avoid driving, excessive sitting, bending forward or lifting over 5 pounds for a month. At some point in the postoperative phase I usually have the patient spend time with a Physical Therapist to learn important exercises to be done indefinitely as preventive maintenance.

Following treatment for sciatica, be it conservative or surgery, you will probably be able to resume your lifestyle with some mild modifications. It is always possible for a disc to herniate again. This happens in about 5% of people with sciatica.

Please access the office website www.orthopodsurgeon.com and Your Orthopaedic Connection for lots more information about back problems and all the things I treat in the office and hospital.

Our goal is simple - To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush