



Sciatica Treatment Proven Ineffective



It appears that the advice physicians have been giving patients for 65 years is incorrect. In a recent large randomized trial study of bed rest for sciatica and ruptured disc, bed rest was found to be an ineffective treatment.

Those patients who remained cautiously active had exactly the same outcome as those who were treated in bed for two weeks. Now physicians can confidently tell patients that if they don't want to stay in bed it's OK and they will not harm themselves by being cautiously active.

Some bed rest may be helpful in the first day or two, but patients should tailor their own activity restrictions based on their pain levels. Some walking is desirable to punctuate any amount of rest and to avoid deconditioning. This study was addressing specifically the problem of ruptured disc causing sciatica. It has been known for many years that bed rest for back pain alone was not an effective treatment. Back pain can sometimes cause some leg pain, but it is not truly sciatica. This new study clarifies things in that it is now believed and in fact proven that bed rest is not a good treatment for ordinary back pain and for back and leg pain caused by sciatica and ruptured disc.

The study provided no evidence that bed rest led to better outcome. By 12 weeks, eighty seven percent of both groups were reported significantly improved. All of the patients had undergone MRI studies of their lower back.

Bed rest is known to cause a variety of adverse physical effects, including



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muscle weakness, loss of bone mineral, and cardiopulmonary deconditioning. Furthermore it has a psychological impact on patients creating the perception of severe illness. Even a heart-attack does not require a week of strict bed rest any longer.

This is not to say that in an occasional patient bed rest may not be required by the patient's severity of pain. For the great majority of patients however, it is not a desirable treatment.



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Please consult Dr. Haverbush or a physician for specific treatment recommendations.

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