

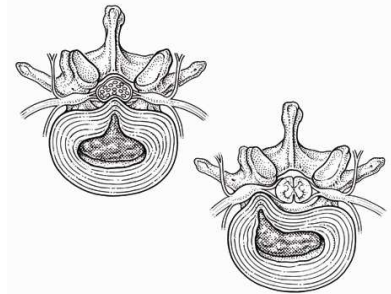
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Stage IV: **The Prolapsed (Slipped) Disc** **A very rare source of Back pain**

What is a Prolapsed Disc?

A slipped disc is a bulge in the back wall of the disc which fails to disappear when the pressure comes off. Only **5%** of back problems are caused by this. The pain is not so much from the disc as it does not have a nerve supply, but from other pain-sensitive structures nearby which become offended by the bulge. When a disc prolapse does happen, it is due to the longstanding weakening of the disc wall. There must always be a history of pre-existing breakdown-even if it was silent and gave no symptoms along the way. **A disc never slips** to cripple you with one sudden movement. Discs create a powerful flexible fibrous union between the vertebrae as they are one of the main agents keeping the segments together.



What happens with a disc prolapse?

The degenerated nucleus of the disc bulges off-center. If the bulge protrudes straight out the back of the disc it may push into the bundle of nerves hanging down from the cord and cause “cauda equina” symptoms which include deep central back pain, impotence, bowel and bladder disturbances and/or saddle anesthesia. **THIS IS A MEDICAL EMERGENCY AND YOU NEED TO GET TO A HOSPITAL FOR SURGICAL DECOMPRESSION.** Most often, the disc wall bulges towards the diagonal back corner of the spine and may compress the spinal nerve causing sciatic pain down the leg together with numbness, pins and needles and weakness in the calf or foot.

Causes of a disc prolapse

- Pre-existing breakdown weakens the disc wall and alters the properties of the nucleus
- Bending and lifting stress breaks down the back wall of the disc

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Exercise

Exercises are designed to gap open the back of the lumbar vertebrae to take pressure off the bulge. In the later stages of rehabilitation, strengthening of the deep intrinsic muscles of the spine will be essential to address the instability caused by the weakening of the disc wall. Your physiotherapist will prescribe the appropriate exercise regime in accordance with your condition. It is essential that you follow this regimen very closely.

Disc Surgery

Surgery involves removing the diseased disc but this may not always remove the problem. In fact, approximately 50% of slipped disc operations are unsuccessful. More recently, spinal surgery has become less invasive taking out a little part from the disc (the bulge only) to keep the scar formation to a minimum. Please note that surgery is performed only in extreme cases where there is evidence of the nerve compression in the saddle area and weakness in the legs. Pain alone is no reason for surgery and removing the disc.

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