

4th International
ANESTHESIA AND PAIN MEDICINE
CONFERENCE
December 13-14, 2018 Abu Dhabi, UAE



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Pivots in diagnosing low back pain radiating to the front of the lower extremities

Over 80% of the population will suffer from lower back pain during their lives, it is the fifth most common reason for all physician visits in the US. Most cases of lower back pain can be linked to a general cause—such as muscle strain, injury, or overuse—or can be attributed to a specific condition of the spine, most commonly: Herniated Disc, Degenerative Disc Disease, Spondylolisthesis, Spinal Stenosis, Osteoarthritis. A number of less common conditions can cause low back pain as well, such as sacroiliac joint dysfunction, spinal tumors, fibromyalgia, and piriformis syndrome. Patients with back pain radiating to the leg(s) report worse symptoms and poorer recovery than those with back pain alone. In primary care, approximately 60 % of patients presenting with low back pain (LBP) also report pain in the leg(s). Leg pain associated with LBP is generally considered to be either referred or radicular pain. The latter is commonly labelled sciatica and is often characterized by pain radiating to below the knee, into the foot and toes, and may be accompanied by objective findings of nerve root entrapment such as sensory deficits, reflex changes or muscle weakness. The most common reasons for sciatica are a disc bulge/prolapse or stenosis (either of the central canal or the foramen) impinging or irritating a nerve root(s). Referred leg pain from the low back is unrelated to nerve root involvement and is considered as pain referred from any other structure such as muscle, ligament, joint or intervertebral disc. It is generally acknowledged that the differentiation between sciatica and referred leg pain is not always straightforward in clinical practice, but ultimately it is a clinical diagnosis. Overall, patients who complain of back and leg pain and/or sciatica suffer more severe pain and disability, take longer to recover and incur most of the indirect costs and lost workdays compared to those with back pain alone. When determining the underlying cause of lower back and lower extremity pain, both the type (a description of how the pain feels) and the *area of pain* distribution (where the pain is felt) help guide the physician in making a preliminary diagnosis and determining the appropriate *treatment plan*.

Biography

After completing her undergraduate degree in Poland, Dr. Steiner earned her medical degree at the Medical University of Warsaw where she was named junior lecturer in the Department of Human Anatomy and Biochemistry; then completed an internship at the Postgraduate Medical Center of The Military Medical School. She completed a residency in general surgery at the Cabrini Medical Center in New York City, and a residency in anesthesiology and a fellowship in pain management at New York University Medical Center. Dr. Steiner is past faculty at the University of California San Diego and Harvard Medical Faculty Physicians.

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