

Note on Herniated Disk and Its Impact on Lower Back Strain

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DESCRIPTION

A herniated disk refers to a problem with one of the rubbery cushions (discs) that is placed between the bones (vertebrae) that stack to build your spine is referred to as a herniated disc. The nucleus (soft, jellylike centre) of a spinal disc is wrapped in a harder, rubbery covering called annulus. A herniated disc, also known as a slipped or ruptured disc, occurs when some of the nucleus pushes out through a rip in the annulus. A herniated disc can irritate a nearby nerve if it occurs in any part of the spine. A herniated disc can cause discomfort, numbness, or weakness in an arm or leg, depending on where it is located. A herniated disc can cause no symptoms in many people. Surgery is rarely required to alleviate the issue.

Symptoms

The common symptoms of herniated disk are as follows:

- If you have a herniated disc in your lower back, the pain typically starts in lowerback, thigh and calf. You may also experience pain in a portion of your foot. Similarly, if you have a herniated disc in your neck, the pain usually starts in your shoulder and arm.
- Numbness
- The muscles provided by the affected nerves weaken with time.

Causes

Disk herniation is most typically caused by disc degeneration, which is a gradual wear and tear caused by ageing. Your discs become less flexible as you get older and even minor strains or twists can cause them to tear or rupture.

Risk factors

There are various risk factors which increase the risk of herniated disk are as follows:

- Excess body weight causes extra stress on the disks in your lower back.
- People who work in physically demanding jobs are more likely to develop back problems eg: Lifting, pushing

bending and twisting repeatedly can also lead to a herniated disc.

- Some people are more prone to acquiring a herniated disc due to genetics.
- Smoking reduces the oxygen flow to the disc, causing it to break down faster.

TREATMENT

Nonsurgical treatment

The following are examples of non-surgical treatments:

- Back and leg discomfort are often relieved by one to two days of bed rest. All physical exertion, particularly bending forward and lifting, should be done slowly and carefully.
- Nonsteroidal anti-inflammatory medicines (NSAIDs) are prescription medications that are used to treat inflammation. Ibuprofen or naproxen, for example, is anti-inflammatory medicines that can help with pain relief.
- Physical therapy is a treatment that involves the application of physical force your lower back and abdominal muscles will benefit from specific exercises.
- Steroid injection into the epidural space Short-term pain relief may be obtained by injecting a cortisone-like medication into the area around the nerve.

Surgical treatment

A small percentage of patients with lumbar disk herniation requires surgery. Spine surgery is typically recommended only after if nonsurgical treatment does not work.

Microdiskectomy: It is the most common treatment for treating single herniated disc. A tiny incision is made at the level of the disc herniation, and a microscope is frequently used during the treatment. The herniated disc pieces, as well as any other fragments that are placing pressure on the spinal nerve, are removed. If there are disc herniations on more than one level, a more extensive operation may be required.

Rehabilitation: A simple walking programme (such as 30 minutes per day) and specific exercises helps to restore strength

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and flexibility to your back and legs may be recommended by your doctor or physical therapist. For the first few weeks after surgery, you may be forbidden from bending, lifting, or twisting to decrease the chance of a recurrent herniation.

CONCLUSION

There is a 20 to 25% probability that the disc will herniate again in your lifetime, regardless of surgical or nonsurgical therapy.

The disadvantage of nonsurgical treatment is that it may take a long time for your symptoms to reduce. Patients who undergo nonsurgical treatment for too long before deciding on surgery may have less pain and function improvement than those who choose surgery sooner.