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【原创】我如何治疗椎间盘突出？

How to treat a herniated intervertebral disc (IVD)

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What Is a Disc?

An intervertebral disc (IVD) is a disc that is between two vertebrae of the spine.

Between the discs is a complex network of spinal nerves, arteries, veins, lymph vessels, and connective tissue. The IVD is made up of connective tissue as well, has a firm outer ring called the annulus fibrosis, and a soft jelly-like substance inside called the nucleus pulposus. Only between the vertebrae C2 to S1 of the 24 vertebrae of the spine are there mobile IVDs. The top part of the joint C1-C2 do not have an IVD. When cracks occur in the outer layer of the disc, the material inside of the disc can begin to push out, causing a bulge, which increases to herniation.

The IVD helps your body to:

1. To act as joints so you may have flexibility
2. To cushion the impact of daily activities such as walking.
3. to act as a pillar to support the network of important body structures to keep your body healthy
4. To give your body height

How does the disc become herniated?

Bad habits in your daily activities may cause the quality of the disc to weaken, which in turn, causes herniation. In certain cases, it may be genetic.

Common bad habits may be in the form of

1. Poor posture, sitting improperly
2. Prolonged improper smart phone or computer use.
3. Improper ergonomics
4. Sitting for long periods of time
5. Using the improperly supported pillow
6. Having a mattress that is too soft or too hard for your body
7. Eating nutritionally poor foods
8. Eating a nutritionally imbalanced diet, e.g. high calcium but not balanced by other minerals
9. Being overweight
10. Lack of exercise

The above habits lead to spinal subluxation (misalignment) leading to tears in the outer rings of the disc, leading to the inner jelly bulging and then herniating, which may compress the spinal nerve or spinal cord. This usually occurs over a long period of time with repeated stress or in a short time period such as from an injury.

Symptoms and Diagnosis of a Herniated Disc

Symptoms of a herniated disc may include mild to severe neck or back pain, pain in the back when having a bowel movement, pain when coughing or sneezing, tightness of a muscle, stiffness of the neck or back, loss of muscle strength, loss of muscle tone, numbness, tingling, or even no symptoms at all! Having a herniated disc, but it not touching the spinal nerve may not trigger any symptoms, but a fateful wrong move is like a ticking time bomb that is set to explode when you least expect it. If the herniated disc touches certain parts of the spinal nerve, it may cause certain symptoms, due to the different parts of the spinal nerve having different roles, such as sensory, which includes pain, reflex, or motor control, hence numbness, pain or muscle tightness or spasm.

Diagnosis of a herniated disc may include physical examination: inspection, palpation, orthopedic tests, neurologic tests such as muscle testing and dermatome testing, deep tendon reflexes. From there the properly trained physician may order confirmatory testing or imaging, such as computed tomography (CT), or magnetic resonance imaging (MRI). CT may help in certain cases but is better for looking at bony structures, and MRI is more accurate for soft tissue lesions such as herniated or protruding discs and is usually regarded as the gold standard. In rare cases nerve conduction velocity testing (NCV) may be used.

Methods to Treat Herniated Discs:

- Massage
- Acupuncture
- Traction
- Exercise
- Pain medication
- Anti-inflammatory medication
- Surgery
- Chiropractic

Massage is helpful to treat the effects of muscle tightness or spasm as a result of the herniation, but it does not address the root cause of the pain. Acupuncture helps in shutting down the signal that causes the pain sensation but does not correct the root cause. Traction therapy may help in reducing pressure to the disc but it is not specific to which disc, and all discs of the spine may be affected whether they need it or not, which may cause some extra wearing and tearing of unaffected discs. Exercise therapy is important, but the timing of doing exercise after a disc herniation is the opposite of what your body needs. Exercising as a means of prevention to strengthen the neck and back muscles is important, but with a disc herniation, it may in certain cases strengthen the muscles that may make the healing process harder. It is the sequence in when the exercise is used determines its efficacy.

Pain medication may stop the pain signal chemically but has undesirable side effects. Anti-inflammatory drugs may help cut down the inflammation which may alleviate the pain pathways but the nature of the drug may cause deeper side effects, as it is usually steroid based.

Surgery should be the final choice, once all other options have been exhausted, since you may miss work or social activities between 1-6 months as your body recovers, and has a 50% success rate (at two years post-surgery). It involves cutting into the muscles of the back or neck, weakening it, and finding and excising the disc. It is very risky, due to infection risk, and the surgeon's excision tools, such as a scalpel, is very close to the spinal nerve.

Chiropractic is a non-invasive form of therapy that treats disc herniation at the source: the vertebrae surrounding the disc herniation. If the vertebrae is misaligned, it may stress on the disc, chiropractic spinal adjustment correction therapy may help in relieving tension at the disc level and allowing the herniated part of the disc to restore itself back inside.

A typical treatment plan for the chiropractic approach may be to have chiropractic therapy, and there may be anti-inflammatory nutritional supplements prescribed. Other adjunctive therapies such as the bio-stimulatory laser may be used to the inflammation and stimulate the healing process at the cell level. After the

symptoms have been resolved, which means the disc has been released from the nerve, spinal rehabilitation in the form of special corrective exercises specifically for your case is arranged. The nutritional supplementation may then shift towards helping heal the torn annulus fibrosis, and the ligaments that help hold the disc in place, and to correct the proper spinal curve called lordosis to prevent the disc from herniating again. A follow up MRI may be performed to visualise the progress of the disc.

After reviewing this perspective of therapies to help your herniated disc, which one will you pick first?

If you know someone with a herniated disc, please share with them this article and help them schedule a consultation with us.

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