# LUMBAR DISC HERNIATION Fact Sheet

#### **OVERVIEW**

Up to 80% of individuals will suffer from back pain at some point in their lives, and in many cases, disc herniation is to blame. Despite being incredibly painful for some people, most cases improve with a few weeks to months of conservative treatment including traditional medicinal and complementary options.



#### CAUSES OF DISC DEGENERATION

Disc herniations are most commonly caused due to wear and tear on the discs; this is known as disc degeneration. Normal aging causes the intervertebral discs to lose a portion of their water content making them more susceptible to injury.

In many cases no underlying cause can be identified; however, improper and/or heavy lifting may cause a disc to herniate, and in rare cases trauma from a slip and fall or car accident may be responsible.

Various risk factors have been identified that increase the risk of disc herniation, including:

- Physically demanding occupations that involve heavy and/or repetitive lifting, pushing, pulling and/or twisting.
- Excess weight placing excess stress on the intervertebral discs.
- Having a genetic predisposition.

### SYMPTOMS OF DISC DEGENERATION

Symptoms of disc herniation vary widely, with some patients having no symptoms and others having debilitating symptoms, including:

- Pain will likely be experienced in the lower back, buttocks, thigh, calf, and sometimes the foot on the affected side.
- Pain may intensify with coughing, sneezing, and with certain movements (extension, lateral bending, and/ or rotation).
- Numbness or tingling in area that is supplied by the affected nerve.
- Weakness of the muscles supplied by the affected nerve.

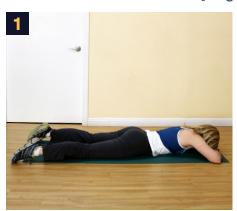
# LUMBAR DISC HERNIATION

Treatment + Exercises

#### TREATMENT FOR DISC HERNIATION

- First line disc herniation treatment typically includes anti-inflammatory medication. In addition, a trial of
  physical therapy may be recommended. Treatment may include the use of various modalities include ice
  and heat therapy, electrical stimulation, ultrasound, traction, and/or manual therapy. Patients will also be
  educated on proper lifting techniques and be provided with an exercise program to increase range of
  motion and strength in the affected area.
- Short term pain medication therapy, and antidepressants, may be recommended in cases that don't respond
  to first-line medication options. In persistent cases, epidural steroid injections or nerve blocks, may be
  recommended.

## **EXERCISE 1:** Prone Lying and Prone on Elbows Stretch





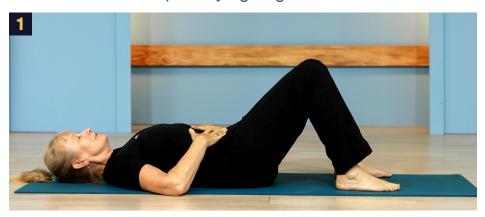
#### **Instructions:**

Begin lying on your front with your hands by your head.

Push yourself up onto your elbows with your head facing forward. Hold this position.

Make sure to maintain a gentle chin tuck during the exercise. Perform for 2-3 minutes.

# **EXERCISE 2:** Supine Lying Legs Elevated



#### **Instructions:**

Begin lying on your back with your knees bent and feet resting on the floor.

Exhale, drawing in your abdominals as if you are pulling your navel toward the floor, then inhale, focusing on expanding your belly instead of your chest.

Make sure to keep your low back flat on the ground during the exercise. Hold for 10-20 seconds.

#### **Important:**

The therapeutic exercises described on this page are for reference purposes only and may or may not apply directly to your condition. Only perform the exercises assigned by your physician. By using this information, you understand the potential risks connected with activity in any exercise, physical fitness or training program.