

Herniated Cervical Disc

Your neck (cervical spine) is made up of 7 vertebrae. Between each vertebra is a disc. When the discs are healthy, they function as a shock absorber for your spine to help maintain flexibility. If they are damaged, they can end up bulging abnormally as the outer part of the disc can open up allowing the centre to bulge backwards, and this is known as a herniated disc. Even though a herniated cervical disc can occur anywhere in the neck, they tend to be most common in the middle and lower part of the neck.

Herniated discs are often caused by normal wear-and-tear. As you grow older, you tend to lose some of the fluid that works to maintain flexibility and hydration of the disc. Herniated discs can also result from a direct injury to the spine, which causes cracks or tears in the outer layer of the disc. The nucleus inside might be forced outside of the disc through the cracks or tears, and when this happens it is known as a prolapsed disc. Herniations and prolapses are very similar, and used inter-changeably. You may have also heard of the term a slipped disc? This is the same as a herniated disc, but it's the lay term.

Herniated Cervical Spine Anatomy

Whenever walking or running, these shock absorbers prevent your vertebrae from bumping into one another. They work alongside the facet joints to aid the spine in movement, twisting and bending. These discs are round and flat, roughly 5-8mm in thickness. Two components make up the discs. The annulus fibrosus is a tough, flexible outer ring of the disc. The nucleus pulposus is the soft, jelly-like center of the annulus, which provides the disc with its shock-absorbing capabilities.



An MRI scan showing a herniated cervical disc

When the disc herniates or bulges, it tends to move backwards and can press or pinch a nerve. If this happens, you will get pain going into your shoulder, arm, fingers, thumb, or shoulder blade. The most common symptom of a herniated/prolapsed disc in the neck is arm pain one sided, with/without neck pain.

How to Treat a Herniated Cervical Disc:

1. Stop Aggravating It

It sounds simple, but it is harder to do because we get into certain habits. Try to look at your day objectively to work out what is aggravating the problem, then modify that activity.

2. Medication

Using an anti-inflammatory medication will help to relieve pain and inflammation. When the swelling goes down, the pain associated with it tends to do so as well, which can provide you with the relief from the symptoms of a trapped nerve. But be advised that anti-inflammatory medication is best used for the short term, so seek other alternatives if this goes on longer than 3-4 weeks.

3. Exercises

Following the direction of your provider, you can begin engaging in an exercise program to help strengthen the back and regain movement. A physical therapist will be able to train you in the proper exercises to help protect your neck, as well as provide you with traction treatment. Traction is a steady, gently pulling on the head to help stretch the neck and allow the small joints between the bones to spread slightly. Mobilisation treatment can also be very beneficial for a stiff neck with herniation.

4. Posture

It is very important to address your work posture. Ask your occupational health team, HR team, or your therapist to advise you on the best posture. Make sure your computer screen is at eye level, your keyboard is appropriately placed, and that you adopt correct sitting position.

5. Forward Neck Bending

Stop bending your neck forwards so regularly and see if this helps your arm pain. Repetitive forward neck bending (such as when you may look down on a laptop or tablet, or long hours reading, lying in bed at a reclined angle watching TV etc.) can be a very big contributing factor to a disc problem in the neck.

6. Surgery

Surgery is often considered a “worst case scenario”, and is best used when your arm pain is unrelenting. You should always try therapy first, for at least two courses of treatment before trying injections, an epidural or progressing to surgery. During surgery the surgeon will perform a micro-discectomy from the front or the back of the neck. Historically surgery was done from the back but more recently surgeons prefer an anterior (front) incision.



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Tips:

- Smokers tend to have a higher incidence of developing a herniated disc than those who don't.
- If you are overweight, try losing any excess body weight to alleviate some of the pressure on the discs in the back.
- For those who work in jobs involving a lot of repetitive forward bending you are at an increased risk of developing the condition.
- Herniated discs tend to be most common in those who are between 35 and 55 years of age.
- If you have a physically demanding job, try to do everything you can to prevent extra stress on the discs.