

Lumbar Radiculopathy Syndrome

Radiculopathy is a type of condition caused because of a compressed nerve within the spine causing numbness, pain, weakness or tingling along the nerve. The condition can occur anywhere within the spine, but it commonly occurs in the lower part of the back or neck. Lumbar radiculopathy is a trapped nerve in the lower back. It is rarely found in the middle part of the spine.

Typically pain travels into the limb. If the nerve is trapped in your lower back, the pain will travel into your buttock and leg, and possibly the foot. Pain in the back of the leg is often caused by pinching to the sciatic nerve, and pain down the front of the leg is typically caused by pinching of the femoral nerve.

Nerve pain is painful! And the feeling of nerve pain can vary between shooting pains, sharp pains, dull aching, pins and needles, numbness, heat or cold, or a spider feeling on the leg. Different positions can cause the pain but most often it is sitting or forward bending that will bring on the pain. Sometimes it can be worse by extending or arching the back.

Sufferers may just feel pain in the leg, and not the back, even though the nerve is being pinched in the back. The main cause of the trapped nerve is a disc prolapse, where the disc “slips” backwards or bulges backwards compressing the nerve. Other pathologies can also cause a trapped nerve, such as slippage of the vertebra (known as a spondylolisthesis), spondylosis (arthritis in the spine), or a growth in the spine.

Lumbar Radiculopathy Syndrome Anatomy

Understanding your spine and the manner in which it works will help you understand what is causing the pain in your lower back to begin with. Your spine is composed of multiple small bones (vertebrae), which are all stacked one on top of the other. Ligaments, muscles, intervertebral discs and nerves are the additional components of your spine.

The bones of the vertebrae connect to form a canal protecting the spinal cord. The column is composed of three different sections creating three distinct curves in the back: the curves within the neck area (cervical), the lower back (lumbar) and the chest area (thoracic). The lower part of the spine (coccyx and sacrum) is composed of the vertebrae that are fused together.

Nerves come from the spinal cord, and exit through holes in the vertebrae known as foramen. When a slipped disc occurs, the nerve can become compressed where it exits the foramen.



How to Treat Lumbar Radiculopathy Syndrome:

1. Anti-Inflammatory Medication

By consuming an anti-inflammatory medication, you can reduce the swelling and pain in the afflicted area. As the swelling goes down, the amount of pain in the area will diminish as well. Use medication for a short period of time, ideally no longer than 2 weeks, but if that doesn't work, then consider seeing a therapist as soon as possible.

2. Therapy

Osteopathy, chiropractic, and physiotherapy can all be used to relieve a trapped nerve. Treatment to the back will help to reduce stress on the disc and the nerve, and improve range of mobility. Once range of mobility improves, inflammation will often reduce and this tends to result in less pain.

3. Epidural Injection

A steroid and anesthetic medication will be injected between the bones within the spine adjacent to the nerves involved. This helps to rapidly reduce irritation and inflammation of the nerve and works to reduce all of the symptoms associated with radiculopathy. This may be done guided (under X-ray or ultrasound) or just by the skill of the doctor/anesthetist doing the epidural.

4. Surgery

If the symptoms are severe, surgery might be a choice for you. The goal of surgery is to alleviate the compression from the afflicted nerve. Based on the cause of the radiculopathy, this can be done by either a discectomy or a laminectomy. A laminectomy works to remove a small part of the bone that covers the nerve to provide it with additional space. A discectomy removes part of the disc that has become herniated and is causing the nerve to be compressed.

Tips:

- By maintaining proper weight, you can help alleviate any undue pressure and strain on the lower part of the back.
- Avoid placing any excessive strain on your back and neck to reduce the chance of developing radiculopathy. Look at the work you do and consider if it is affecting your back.
- Try to avoid forward bending for 7 days and see if your leg pain improves. Often repetitive forward bending will increase pain in the leg so avoid it as much as possible.
- Proper muscle conditioning will help to prevent the condition from occurring.
- Radiculopathy tends to resolve within six weeks up to three months.
- Most individuals tend to respond well to conservative treatment methods and with therapy you can often avoid surgery, assuming the nerve can become "untrapped".