

Sciatica

What is it?

Sciatica refers to pain that radiates along the path of the sciatic nerve, which branches from your lower back through your hips and buttocks and down each leg. Typically, sciatica affects only one side of your body.

Sciatica most commonly occurs when a herniated disk, bone spur on the spine or narrowing of the spine (spinal stenosis) compresses part of the nerve. This causes inflammation, pain and often some numbness in the affected leg.

Although the pain associated with sciatica can be severe, most cases resolve with non-operative treatments in a few weeks. People who have severe sciatica that's associated with significant leg weakness or bowel or bladder changes might be candidates for surgery.

Symptoms

Pain that radiates from your lower (lumbar) spine to your buttock and down the back of your leg is the hallmark of sciatica. You might feel the discomfort almost anywhere along the nerve pathway, but it's especially likely to follow a path from your low back to your buttock and the back of your thigh and calf.

The pain can vary widely, from a mild ache to a sharp, burning sensation or excruciating pain. Sometimes it can feel like a jolt or electric shock. It can be worse when you cough or sneeze, and prolonged sitting can aggravate symptoms. Usually only one side of your body is affected.

Some people also have numbness, tingling or muscle weakness in the affected leg or foot. You might have pain in one part of your leg and numbness in another part.

Treatments and drugs

If your pain doesn't improve with self-care measures, your doctor might suggest some of the following treatments.

Medications

The types of drugs that might be prescribed for sciatica pain include:

- Anti-inflammatories
- Muscle relaxants
- Narcotics
- Tricyclic antidepressants
- Anti-seizure medications

Physical therapy

Once your acute pain improves, your doctor or a physical therapist can design a rehabilitation program to help you prevent future injuries. This typically includes exercises to correct your posture, strengthen the muscles supporting your back and improve your flexibility.

Steroid injections

In some cases, your doctor might recommend injection of a corticosteroid medication into the area around the involved nerve root. Corticosteroids help reduce pain by suppressing inflammation around the irritated nerve. The effects usually wear off in a few months. The number of steroid injections you can receive is limited because the risk of serious side effects increases when the injections occur too frequently.

Surgery

This option is usually reserved for when the compressed nerve causes significant weakness, loss of bowel or bladder control, or when you have pain that progressively worsens or doesn't improve with other therapies. Surgeons can remove the bone spur or the portion of the herniated disk that's pressing on the pinched nerve.

Prevention

It's not always possible to prevent sciatica, and the condition may recur. The following can play a key role in protecting your back:



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- **Exercise regularly.** To keep your back strong, pay special attention to your core muscles — the muscles in your abdomen and lower back that are essential for proper posture and alignment. Ask your doctor to recommend specific activities.
- **Maintain proper posture when you sit.** Choose a seat with good lower back support, armrests and a swivel base. Consider placing a pillow or rolled towel in the small of your back to maintain its normal curve. Keep your knees and hips level.
- **Use good body mechanics.** If you stand for long periods, rest one foot on a stool or small box from time to time. When you lift something heavy, let your lower extremities do the work. Move straight up and down. Keep your back straight and bend only at the knees. Hold the load close to your body. Avoid lifting and twisting simultaneously. Find a lifting partner if the object is heavy or awkward.