

Question: I have recently developed back pain with some leg pain. I went to my doctor and after examining me and reviewing my MRI she told me I have a degenerative disc disease. What is it? Is it dangerous?

Answer: Disk is composed of two rings of cartilage. An outside ring –annulus fibrosis, and an inside ring – nucleus pulposis. A healthy intervertebral disc behaves like a water bed. The high water content helps it act as a cushion in between vertebral bodies and helps resist spinal compression. Unfortunately, with increasing age the disc water content decreases and its tendency to resist compression also decreases. This decrease of the water content and subsequent degeneration of disc tissue is what referred to as degenerative disc disease. Not every degenerated disc causes symptoms. It is a part of normal aging process and there are a lot of people walking around with degenerated discs who never had a back pain in their life.

Question: What are the treatment options?

Answer: The first line of treatment for this condition is physical therapy and anti-inflammatory medication. Almost 90% of patients get better with this treatment. The goal of physical therapy is to increase the strength and flexibility of the abdominal and the back muscles. This in turn stabilizes the micro-motion across the diseased disc and helps with the symptoms. Anti-inflammatory medication is a very important aspect of the treatment as well. The pathology of the degeneration causes significant level of inflammation both in the joints of the spine and around the nerves. This inflammation is partially responsible for the symptoms of pain. Taking a course of anti inflammatory medication helps to decrease the inflammation and ease the pain. Other non-operative modalities that are available include injections, chiropractic manipulations, massage.

Question: I have done physical therapy and injections but I am still having the symptoms. What else should I do?

Answer: If the non-operative treatment modalities do not help and the patient had undergone the appropriate studies to rule out the more serious etiologies of the back pain, then the consideration can be give to a surgical procedure. This can be considered only after 6-12 months of extensive non-operative treatment. Surgery, as always, should be the last option. The surgical option usually involves some kind of instrumentation and fusion. One of the more recent developments is the use of minimally invasive surgical techniques that help minimize the muscle damage.