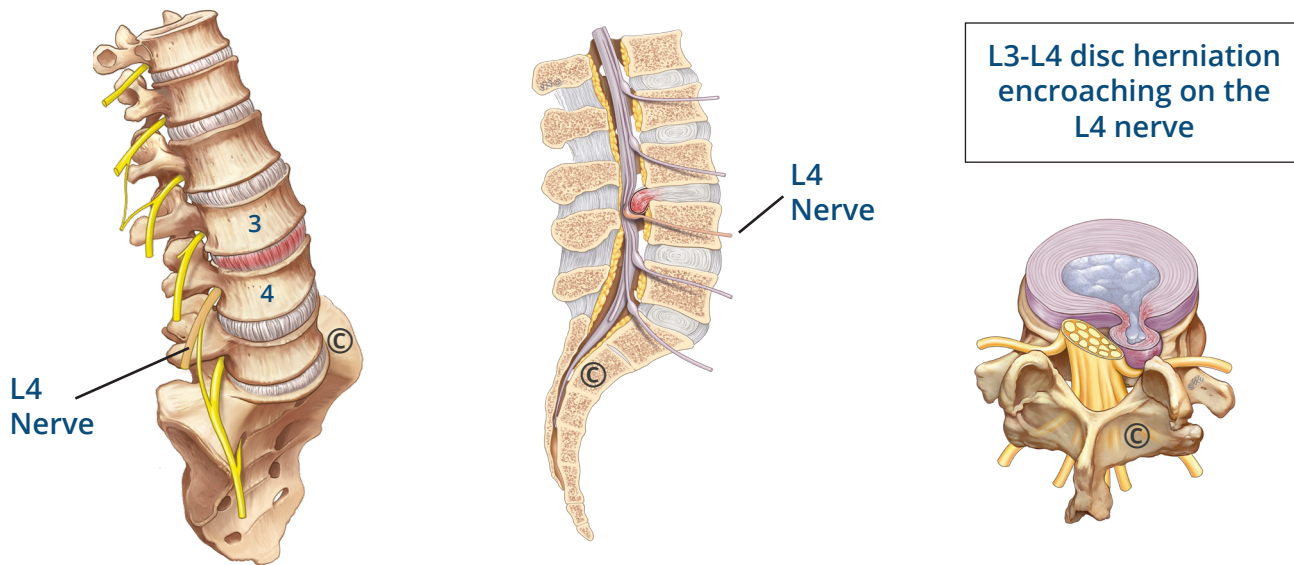


Disc Herniation - L4 Radiculopathy

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What is Disc Herniation with Radiculopathy?

Spinal discs are composed of a soft inner core and a tough outer section. Discs protect the spine and act as shock absorbers. When they herniate, they may compress one or more of the spinal nerves, resulting in the production of pain and other symptoms along the course of the nerve. This is referred to as radiculopathy. Radiculopathy is usually diagnosed by testing reflexes, muscle strength, skin sensation, and the aggravation of symptoms produced by special maneuvers. CT or MRI is often performed to help confirm the diagnosis.

What are the symptoms?

- Low back and leg pain that is worsened when sitting, coughing, or straining at the toilet.
- Muscle weakness, numbness, and/or pins and needles in the leg.

How is it treated?

Conservative treatment may include the application of ice, rest, massage, gentle joint manipulation and mobilization, dry needling, acupuncture, rehabilitation exercises and stretches, and the use of modalities such as laser and ultrasound.

What can I do?

- Rest and avoid any aggravating postures and activities (e.g., bending forward and prolonged sitting or standing).
- Apply ice over the affected region for about 10 minutes, several times a day. Ice can be applied as often as every hour.
- If required, wear a suitable lumbopelvic brace, but only for a few days. Avoid sitting with your wallet in your back pocket.
- Avoid twisting your body when you get into or out of a car. Avoid long-distance driving.
- Sit in a chair that provides ergonomic support (e.g., an office-style chair with armrests to assist with rising from the seated position). Sit on a chair or a bed when removing or putting on trousers, socks, or shoes.
- Perform your prescribed exercises daily within your pain tolerance. Stop the exercises if they worsen your symptoms and inform your health practitioner so that your exercise plan can be modified.

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