### Nerve Root Pain

#### Contact Details

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<th>Spinal Triage</th>
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<td>Nuffield Orthopaedic Centre</td>
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<td><a href="http://www.noc.nhs.uk">www.noc.nhs.uk</a></td>
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#### Your back pain diagnosis

- **Lumbar Vertebrae**
- **Lumbar Disc**
- **Lumbar Nerve Root**
You have been diagnosed as having nerve root pain. This leaflet gives you up to date advice on what to expect and how to manage it.

**What is a nerve root?**

Your spine is made up of many blocks of bone (vertebrae) with discs between the vertebrae. At each level of the spine two nerves comes out (nerve roots). One on the left and one on the right. In the lower back these nerves pass into the leg. In the neck the nerves pass into the arm.

If something is irritating a nerve then you will experience pain and/or pins and needles in the area the nerve supplies. Have a look at the picture on the opposite page.

If the nerve has pressure on it (compressed) then, in addition to pain, your leg/arm may be numb or weak in the area supplied by the nerve. When this happens the pain in the limb is usually much more severe than the spinal pain.

The most common cause of nerve root pain is that hole where the nerve exits is narrower than normal. The hole can be narrowed by something soft like a disc bulge or something hard like increased bone due to aging change. If the nerve has been getting irritated for a while then it is likely that that the nerve will be inflamed. An inflamed nerve tends to increases in size and therefore takes up more room in the hole through which it exits from the spine.

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**Useful Information**

**Books**

**The back book**
The Stationary Office
ISBN: 011322312 9

**Treat your own back**
Author R McKenzie
ISBN: 0959804927

**Manage Your Pain**
Michael Nicholas
ISBN: 0285636790

**Websites**

[www.workingbacksscotland.com](http://www.workingbacksscotland.com)
An excellent site that gives you work and medical information

[www.rcgp.org.uk/rcgp/clinspec/guidelines/backpain](http://www.rcgp.org.uk/rcgp/clinspec/guidelines/backpain)
This gives the current best practice guidelines for management of spinal problems in the UK.

[www.backpaineurope.org](http://www.backpaineurope.org)
Have a look at the summary pages to get a feel for what current research recommends.

[www.patient.co.uk](http://www.patient.co.uk)
A useful website for patient information

[www.prodigy.nhs.uk](http://www.prodigy.nhs.uk)
Another useful website for patient information
Useful things that I could start to do now

Fitness:

Work:

Household:

Hobbies:

Pain control:

Nerve root pain can range from mild to severe. Often nerve root pain and back pain are present at the same time. If the limb pain is worse than the back pain it is more likely to be from the nerve.

Who gets nerve root pain?
Spinal pain is very common in human beings. 70% of us will get spinal pain at some time in our lives. Around one in twenty people with spinal pain will have nerve root pain. The most common age for nerve root pain is 30-50. Things that increase the risk of you getting nerve root pain include: your family history of spinal problems and driving more than 1000 miles a week. Surprisingly, heavy manual work and repetitive lifting do not seem to be risk factors for nerve root pain.
Is nerve root pain serious?
Nerve root pain can be very painful but is not usually serious. The only situation that is considered an emergency is Cauda Equina. This is when you have nerve pain and suddenly develop numbness between the legs and around the buttocks, and/or have difficulty with bladder or bowel control. More often than not it is the pain or medication which is upsetting the function of the bladder or bowel, but it is best to get it checked out.

<table>
<thead>
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<th>Cauda Equina</th>
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<td><strong>This is rare but needs urgent medical attention</strong></td>
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| • Difficulty passing water (retention)  
• Incontinence of urine  
• Incontinence of the bowel  
• Numbness around your back passage or genitals |

If you suddenly develop any of the above symptoms then it is strongly recommended that you contact your GP as an emergency.

Do I need any tests?
Your doctor or therapist will normally be able to diagnose nerve root pain from the description of the pain, and by examining you. In most cases imaging of the spine is not helpful in that it does not change the treatment or time for recovery. A scans may be advised if the nerve root pain persists and an operation or epidural injection is being considered.

Pain Control

Medication
Because nerve root pain is nasty, many people use medication to help them remain active and cope with the pain. It is recommended that you take medication regularly because it is easier to keep pain away rather than trying to get rid of it once it is established. There are many painkillers on the market and they may cause side effects. Knowing which tablet is best is complicated so it helps to get advice from a pharmacist or GP.

If you need medication advice then the best people to speak to are a pharmacist or your GP.

Pain relief without medication
Many people use other forms of pain relief alongside or instead of medication. Some people find these are helpful in that they may provide short term pain relief. But despite the claims they rarely provide a cure or have any lasting effect. What is important is that if the pain is less then they can help you stay active.

- Acupuncture
- Cold Packs
- Heat packs
- TENS (Transcutaneous Electrical Nerve Stimulation)
**Traction**
Current research does not support the use of traction for back or nerve root pain. This is because trials have shown that traction is no more effective than a placebo.

**McKenzie**
Some people find that they can control the nerve root pain by using the McKenzie method. The emphasis is on self management. Following an assessment with a therapist trained in this approach you will be advised on a personalised exercise programme. The aim of the exercises is to move the pain in your limb upwards into the spine.

**Epidural**
If your leg pain is severe and tablets and physical therapy are not helping, then an epidural injection is a non-surgical treatment option which may improve the leg pain. It is an injection that deliver an anaesthetic and anti-inflammatory medication (steroid) directly into the epidural space in the spine.

**Surgery**
If the nerve root is compressed, particularly if it is causing muscle weakness then an operation will be considered. In most cases this results in an improvement in the leg pain but the back pain often persists. The weakness and numbness also improve in most cases.

**What is the prognosis?**
Most nerve root pain will fully recover whether you treat it or not. The severe pain often lasts for around 8 weeks. Thereafter milder pain may persist for many months. Don’t panic if you have an increase in your pain; small set backs during the healing period are quite common. Luckily for some the pain does not recur. But for others nerve root pain can be recurrent.

![Graph showing number of patients complaining of nerve root pain over time.](image)

Nerve root pain affecting the leg used to be called sciatica.
What can I do to help myself?
You know that activity is good for your health – it is just the same for your back. Keeping your back moving stops the working parts of your back from seizing up. It may hurt a bit at first, but it does not do any damage – hurt is not the same as harm. It’s worth working through any initial discomfort – because you’ll get back to normal that much quicker.

What type of exercise is best?
You don’t have to do special exercises. Simply continue to do your ordinary activities as normally as possible. Of course you may need to take it a little easier at first. Being active little and often is a good idea. Being fit and active will help you get better faster and reduce the risk of more back trouble later.

The ones that you enjoy and will keep doing

What about work?
People of working age commonly get back problems and it impacts on their work. Nerve root pain may make it more difficult to do some parts of the job. However research suggests that working will not do any harm. You don’t have to wait till the pain is 100% gone. Work is good for the back as it keeps the back moving and strong. In fact getting back to work can help you recover faster.

What can other people do for me?
With or without treatment nerve root pain generally gets better with time. Quick fixes are rarely reported. Healthcare professionals may help get you back to activity quicker or make things more comfortable.

Health care professionals can help you help yourself.

Manipulation
Most healthcare practitioners recognise that manipulation is helpful to some people with nerve root pain. It seems to work best when the symptoms are acute (have been there for less than 6 weeks). Unfortunately it does not help everyone. If you have had your pain for more than 6 weeks the chance of manipulation helping is a lot less. If manipulation is going to help then you should feel an improvement after two to three sessions. If your symptoms are worse or no better then it is not a good idea to continue.

You should not have a manipulation if you have:
• Weak muscles in your legs
• Difficulty passing water (retention)
• Incontinence of urine
• Incontinence of the bowel
• Numbness around your back passage or genitals