

CURRENT ISSUES OF SPINAL NERVE FRACTURE TODAY

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Abstract. Intervertebral hernia (herniated intervertebral disc) is an overloaded spine disease, a punishment for the vertical position of the human body, lifting heavy loads, sitting a lot in the car, in front of the computer, TV. Intervertebral hernia is one of the well-known stages of osteochondrosis. Osteochondrosis is a popular medical term in the CIS countries and is associated with the development of degenerative processes in the spine as a result of pathological changes in the intervertebral discs. In the West, the term "spondylosis" or degenerative spine is mainly used.

Key words. Intervertebral hernia , lumbosacral region , disc degeneration , horse tail syndrome.

The spine is made up of bones (vertebrae), between which there are intervertebral discs. Discs act as shock absorbers, reducing the load on the spine, and they also help the spine move. The intervertebral disc consists of a hard outer fibrous annulus and a soft inner pulpy nucleus. Intervertebral hernia relatively rarely requires surgical intervention; however, more than 200,000 interventions are performed annually in the US and 20,000 in Germany. In 48% of cases, hernias are located at the L5-S1 level of the lumbosacral region, in 46% of cases - at the L4-L5 level, and the remaining 6% - at other levels or at several levels of the lumbosacral region. (2)

When an intervertebral hernia occurs, a small portion of the nucleus pulposus is pushed out through the annulus fibrosus fissure into the spinal canal. An intervertebral hernia can crush a nerve, which causes pain in the lower back, which can radiate to the arm or leg depending on the location of the pain. (3) Intervertebral hernia can be treated conservatively with medication and rest in most cases. In some cases, only a neurosurgeon can help the patient, an operation will be required immediately. One day of crushing the spinal cord or its roots is an additional week of recovery.

Current at the time of the disk degeneration hernia reason that considered main factor is considered But disc degeneration inciting factors and next hernias complete not understood . This process multifactorial to etiology dependent .(1) 3 factors available : constant microtrauma and intervertebral disc structures step by step no to do due to genetic, metabolic or nutrition diseases and mechanic.

With that together , on the disk degenerative of changes nature and speed not only genetically endogenous factors , but exogenous effects too determines _ Weight lifting , torsional loads raise , that is weight twist or with " golf " . together lifting , driving shaped physical activity disc degeneration and later on hernia take coming main risk factors as is determined .

In adults intervertebral on disk blood supply no and his nutrition osmotic way , that is when moving , for example , walking during happened will be .(4) Therefore according to , motionless marriage style with to disk electricity supply enough not and time pass with it moisture loses and fragile will be To this fragility heredity too effect does _

Also hernia _ harvest of being trigger theory there is His to his words according to the root reason of muscles reduction being , they are inappropriate like intervertebral disk squeeze emits and with that his normal to eat interrupt gives _ As a result , by disk of moisture little by little loss and his causes brittleness . (7)

With that together with disc protrusion phenomenon , his small in appearances physiological is considered That's why the person is in the morning to the evening than higher will be Intervertebral of hernias a lot occurring symptoms

1. Loin pain, sometimes aching and aching, starting from the buttock and spreading to the sides and outer parts of the leg.

2. Pain in the arms, chest, shoulders, neck, lower back and legs, general weakness, pain in the back and legs and paleness,

3. Pain in the back and legs,

4. Pain when coughing and sneezing.

When to consult a doctor:

Back pain develops as a result of various factors and has a serious impact on a person's life: as a rule, the pain that appears gradually disappears after 6 weeks, but if the pain that lasts for 3 weeks interferes with living, if it increases in intensity and does not feel relief, consult a doctor immediately.

If the pain increases when coughing or sneezing, this hernia is suspected.

Consult a doctor immediately if:

When intestinal and urinary tract control is disturbed, pain increases over time, or pain in both legs, general weakness, and pallor are felt.

A herniated disc or a tumor of the spinal cord can compress several nerve fibers. This compression is as rare as cauda equina syndrome, but the complication is dangerous. It may require emergency surgery.

Reasons: The main 2 reasons for the origin of intervertebral disc herniation: Age-related changes in the disc, traumas of the spine.

Despite its strength, the intervertebral disc has "two sensitive areas": the lack of blood vessels in the intervertebral disc. The tissue around the disc is nourished. In this case, the products of nutrition reach the spine only when it is moved. In a normal lifestyle, no tension is observed, so the result of low movement is the nutrition of the intervertebral disc. it breaks down, its strength decreases and cracks.

The fibrous fibrous structure of the disc neck determines the direction and size of the spinal movement. The physical stress directed to the disc constantly erodes the fibrous neck. (8)

This process takes years. Movement, sneezing or physical exertion can be the "last straw".

Risk factors. Young. Disc herniation occurs in people aged 35-45, because the discs degenerate and age. We perform surgery on patients aged 12-85. (10)

Smoking. Hernias appear in the intervertebral discs due to smoking, because the amount of oxygen in the blood decreases and it can provide the tissues necessary for life with food.

Weight. Obesity, excess weight puts strain on the lower back.

Height. Intervertebral disc herniation is common in tall people. Tall women are taller than 170, tall men are taller than 180.

Hernias appear due to the high load on the spine in people who are engaged in physical labor.

Complication. In most cases, emergency surgery is not necessary for hernias. But sometimes, when nerve root compression and horsetail syndrome appear, emergency surgery is necessary, because irreversible paralysis may develop. When horsetail syndrome occurs, the following symptoms develop: enlargement of the pain zone, paleness or weakness, pain spread to one or both legs.(1)

Bladder and bowel dysfunction, urinary incontinence or difficulty urinating when the bladder is full. Numbness around the spine in the inner thigh area and around the rectum in the legs.

We must be active while waiting for a doctor's consultation. Lying in bed for a long time reduces the strength of the muscles, which leads to an increase in the problem, especially (fitness, aerobics, running, shaping, etc.). If you feel pain during these physical exercises, stop the training immediately. It is recommended to take NSAIDs, such as diclofenac, ibuprofen, meloxicam, naproxen, but not in excess.

Diagnostics. Your doctor will determine if you have a herniated disc by taking a medical history and performing a physical examination (for example, Lasega symptom, severe pain when raising the leg properly). Neurological examination. These examinations include muscle strength, reflexes, walking on the heel, and the doctor will determine the sensitivity around the rectum, which indicates the presence of a herniated intervertebral disc.

Treatment. Conservative treatment - avoiding painful situations and taking painkillers. Most patients experience relief after a month or two of conservative treatment. Diagnostics shows that the bulging disc shrinks over time, which reduces symptoms and improves the condition. Depending on the patient's condition, the following is recommended: changing work activities, avoiding activities that aggravate symptoms, such as strong pulling, bending, heavy lifting, exercising on exercise machines, and reducing sitting for too long. Physiotherapy treatments and therapeutic exercises are recommended to maintain good physical condition and reduce inactivity. Intervertebral disc herniation is not a fragile, fragile problem of the spine, so it is not necessary to stop physical activity. A doctor or physiotherapist should be consulted to find a comfortable combination of active and rest.

Physiotherapy. A physical therapist may use heat, cold, traction, ultrasound, or electrostimulation to relieve pain. In addition, physical therapists can show you exercises and movements to help reduce the pain of a herniated disc. Once the pain begins to subside, you will be recommended a rehabilitation program that strengthens the back and prevents future injuries.

Painkillers. If the pain is mild or of moderate intensity, the doctor may recommend painkillers.

Nonsteroidal anti-inflammatory drugs. It should be remembered that the risk of bleeding from the gastrointestinal tract increases when taking NSAIDs in high doses. (9)

Sleep mode. A herniated intervertebral disc sometimes requires bed rest for a day or two due to constant severe pain. Strict bed rest for more than a day or two can delay recovery by reducing muscle strength and tone.

Time. A herniated disc usually heals in 4-6 weeks.

Epidural block. If conventional treatment measures do not help the patient, but there are contraindications to surgical treatment, in such cases, epidural blockade is performed with the help of hormones. This method is carried out on a special table with the help of an X-ray machine, where hormones and painkillers (for example, depomedrol and bupivacaine) are injected between the vertebrae to the location of the pathological focus. This method is carried out using local anesthesia, the patient can go home within 1-2 hours after the blockade. The effect occurs quickly, the patient immediately feels better, which is the starting mechanism of recovery. This method can be repeated 1-2 times.

Operation. About 10% of patients with a herniated intervertebral disc will require operative treatment over time. If conservative treatment does not work for you, you may be a good candidate for surgery. If the hernia piece gets into the spinal canal and compresses the nerve, or if there are problems in various situations and walking, this will be an indication for surgery. The most commonly used operation for herniated intervertebral discs is microdiscectomy.(3)

A standard or open spinal discectomy is an operation on the spine in which a portion of the spine is cut to access the herniated disc and crushed nerve roots. In the microdiscectomy operation, surgeons determine the location of the hernia using a surgical microscope, a special operating table, and an operating X-ray machine, and open it using the smallest possible incision. Small incisions help the surrounding tissue to heal faster and reduce pain.

Prevention . To prevent intervertebral disc herniation:

Exercises. Regular exercise slows down the aging and degeneration of the discs, strengthens the muscles, and helps maintain the stability and strength of the spine. If you have a hernia, then you should consult a doctor before engaging in physical exercises (tennis, running, fitness, aerobics). **Correct posture.** (11) Correct posture reduces the load on the spine. Keep your back straight, especially in a sitting position, as this puts the greatest load on the spine. **Maintaining a healthy weight.** Excess weight increases the pressure on the vertebrae and teeth and their sensitivity increases. **Quit smoking.** Smoking increases back problems.

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