How can your doctor determine if your pain is due to a symptomatic disc?

Normal everyday activities can cause wear and tear on the discs in your spine, resulting in pain over time. Diagnostic accuracy studies show strong evidence that discography is a useful tool for imaging disc morphology missed by MRI and other tests, and for evaluating discrelated pain.⁵

What happens when a disc degenerates?

Your spinal column is made up of bones (vertebrae) that are cushioned by small discs consisting of a tough outer ring (annulus) and a soft center (nucleus). These discs act as shock absorbers, protecting the spine and nerves from the stress of daily activities.

When a disc degenerates, small tears appear in the annulus, which may cause pain. The tears heal, creating scar tissue that can weaken the disc wall and make it bulge or herniate. Over time, the nucleus of the disc becomes damaged, collapses, and loses its cushioning. When this happens, the vertebral bone above and below the damaged disc draw closer together, twisting the spine's facet joints. This unnatural positioning may eventually create bone spurs. If these spurs grow into the spinal canal, they may pinch the spinal cord and nerves.

Most people with degenerated discs will experience chronic low back pain, with intermittent episodes of severe low back pain.

Basic Symptoms

- Pain, numbness, or tingling in legs
- Severe pain that may come and go
- Pain that may get worse when bending, twisting, or sitting
- Pain that decreases when lying down

Signs and Symptoms

This patient is experiencing back pain along with these additional symptoms and would benefit from seeing a specialist about discography.

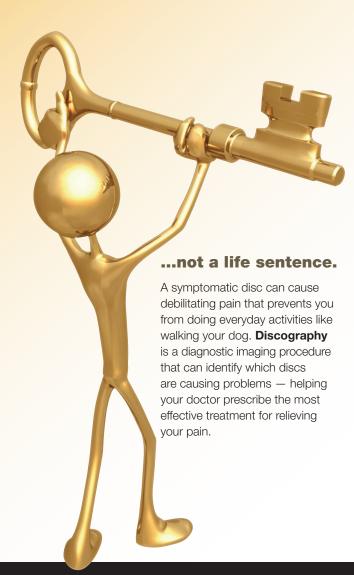
Patient Information:

Patient Name:

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Age	:
Refe	erring Physician:
Refe	erring Physician Phone:
Pat	tient Exhibited:
	Lower back pain
	Radicular pain
	Positive straight leg raise
	Numbness and weakness through the buttock and down the leg
	Pain that increases with activity and decreases with rest
	Pain that interferes with patient's ability to perform daily activities
	Pain that hasn't responded to conventional treatment
	Other symptoms:

Back pain is a symptom...

Nearly 10 million men and women suffer from back pain caused by a symptomatic disc.¹⁻⁴ Are you one of them?





Appt. Date & Time:

^{*} This information is not meant to be substituted for the advice provided by a physician or other medical professional. You should consult with a physician or medical professional to determine what instructions may be appropriate for you.

What is Discography?

Discography is an imaging procedure used to determine which discs are causing pain and to what extent. By injecting dye into one or more discs while monitoring for reproduction of your back pain, the doctor can identify which of the discs is the source of pain. Discography can detect structural damage in a disc and show if a disc has begun to rupture or has tears in its outer ring — helping to ensure optimal treatment planning. The procedure is covered by Medicare and most private insurers.

How Does Discography Work?

Under x-ray guidance, a thin guide needle is inserted into one or more discs. The discs are then pressurized one at a time with contrast dye to outline any damaged areas. If you experience pain that feels like your usual pain, that disc can be classified as a pain generating or symptomatic disc. During the procedure, your answers to questions about the intensity, type, and location of the pressure will help determine your diagnosis and appropriate treatment options.

Procedure Benefits

- Images the structural integrity of the disc
- Provides real-time information for detailed diagnostics
- Aids in treatment planning
- Minimally invasive
- Performed on an outpatient basis

What You Can Expect with Discography

Before Your Procedure

If you are a good candidate, your doctor will ask you for the following information:

- Recent x-rays, MRI films, and reports
- Current medications, including herbal supplements, and their dosages
- Drug, iodine, x-ray dye, or latex allergies
- Current health conditions

Your physician or the healthcare staff will also request that you:

- Abstain from aspirin, ASA-containing products (including Alka-Seltzer® or Pepto-Bismol®) and herbal remedies for 5 days before your procedure
- Abstain from ibuprofen or other non-steroidal anti-inflammatory drugs (NSAIDS) for 3 days before your procedure
- Abstain from eating or drinking for at least
 6 hours before your procedure, except necessary medications with sips of water
- Arrange for someone to drive you home after the procedure

During Your Procedure

Discography typically takes about 30-60 minutes to perform. During that time you will be awake but sedated so that you can tell your doctor what you are feeling as the procedure progresses.

To begin, a local anesthetic is used to numb the skin and all the tissue down to the disc area. Using x-ray

guidance, a needle is inserted into the center of the disc. This process may be repeated for multiple discs.

Once all the needles are placed, the discs are pressurized one at a time with injections of contrast dye. With each injection, you will feel either pressure or pain. If you feel pain, your doctor will ask how it compares to your usual pain in terms of type, intensity on a scale of 1 to 10, and location.

After each disc is tested, x-rays are taken and the needles are removed. You may be taken for a CT scan to obtain additional information about the exact pattern spread of dye through or out of the disc.

After Your Procedure

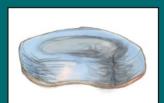
Typically patients go home within 30 minutes to an hour. You may experience soreness for a few days. The doctor will usually recommend taking non-prescription pain and anti-inflammatory medications as well as icing the treatment area for 20 to 30 minutes each day until the soreness subsides. You may also be advised to limit driving, twisting, and lifting anything weighing more than 10 pounds for a few days.

Bibliographic information can be found online at www.HelpingBacks.com/footnotes

Disc Degeneration



1. Normal disc



2. Degenerated disc



3. A degenerated disc is no longer able to act as an effective cushion between vertebrae

stryker