



# MICRODISCECTOMY

*Understand your condition.  
Know your next steps.*

## ***What is a disc?***

A vertebral disc is a highly specialized joint between the bones of the spine. Some people use the analogy of a “jelly donut” or “rubber engine mount” to describe the look and function of a disc. The disc serves three important purposes:

- » Distribute weight
- » Dampen vibration
- » Absorb shock

The disc is made up of two parts, either of which can cause trouble if something goes wrong. The interior (jelly) portion is a goopy crabmeat consistency and, if it leaks out, can cause severe irritation to the nerves. The exterior portion is a rubbery ring that has the bony vertebral bodies as a roof and floor. It can stretch or tear; either injury can physically push on nerves and cause inflammation.

## ***What are the symptoms?***

Generally, the symptoms will be severe neck or back pain with respective severe arm or leg pain that is bad enough to stop you from your regular activities of work and play for more than a few weeks. In addition, there can be weakness in the affected arm or leg. Surgical consultation should be used only as a last resort after all other options have been attempted (physical therapy, medications, and injections).

Please note: No surgeon wants to operate on something they cannot see, so you should always have a recent (less than six months) MRI or CT scan of the affected area (neck or back) before consulting with a surgeon. The most common and detailed imaging study is an MRI, which allows visualization of nerves and soft tissues. If you have an implant like a pacemaker, then a CT scan or CT myelogram may be an alternative.

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## ***How did my specialist diagnose it?***

The vast majority of the time, a good conversation and a thorough physical exam can properly diagnose a disc herniation.

If the pain and/or weakness are bad enough to warrant treatment beyond medications and physical therapy, imaging studies can be performed to specifically locate which disc is causing trouble.

## ***How do you treat a disc herniation?***

Most of the time, disc herniations and their resultant symptoms will resolve on their own with time and supportive care. Physical therapy is often pursued for spine stabilization and exercises that decrease pressure on the nerve. Disc material is inflammatory to the nerve, so epidural steroid injections can decrease inflammation and lessen pain while the body attempts to heal itself. If pain medicines, physical therapy, and epidural steroid injections are ineffective, or if pain or weakness is too severe, surgery can be pursued.

## ***What is microdiscectomy?***

A microdiscectomy is a type of spine surgery that should be reserved *only* for those cases where everything else has been tried or the limb weakness is so severe that you cannot do even the most basic of daily activities. With surgery, the most common type is called a “microdiscectomy.” In this surgery, a 1- to 2-inch incision is made in your spine on the side of the herniation. The surgeon then finds the herniation and cuts it out. The surgery usually lasts about 1 to 2 hours, and many people feel better right upon waking up. If you have other medical problems like obesity, diabetes, or a smoking habit, then surgery can quickly become much more complicated.



Summit Orthopedics' Eagan location was awarded the prestigious Certificate of Distinction for Spinal Fusion by The Joint Commission. Summit is the first group in Minnesota to have received this award for patient satisfaction and key outcome measurements.

## NOTES

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