Eldercare Q&A July, 2017

**The Care And Treatment Of Sciatic Pain**

**Q: Is sciatic nerve pain something I just have to put up with?**

**A:** No, sciatic pain does not have to be a chronic condition. The medical condition called “sciatica” is a major cause of work absenteeism and a major financial burden to both employers and our health care system. Your sciatic nerve is the largest nerve in your body. It begins as a bundle of nerves in your lower back and passes through your pelvis and down the back of each thigh. In the back of the thigh, the sciatic nerve splits into two smaller nerves called the tibial nerve and the peroneal nerve. The sciatic nerve carries impulses from nerves in your lower back to the muscles and nerves in buttocks, thighs, and lower legs. Sciatic pain consists of leg pain, which feels like a ‘pinched nerve’ or cramp, that can shoot down your leg to your foot, making sitting or standing very painful. Sciatica can occur suddenly, or develop gradually. You might feel a numbness, or a burning or tingling ("pins and needles") sensation in your legs or toes.

The term ‘sciatica’ has come to be used to describe any pain felt in the leg along the length of the sciatic nerve. The incidence of sciatica is related to age. It is rarely seen before the age of 20, and it peaks in the fifth decade and declines thereafter. Between 13% and 40% of Americans will have sciatica sometime in their life. Sciatica has been called a symptom, a pinched nerve affecting one or more of the lower spinal nerves. The nerve might be pinched inside or outside of the spinal canal as it passes into the leg. Sciatic pain seems to involve a complex interaction of inflammatory, immune, and pressure-related elements. Symptoms like paralysis or incontinence indicate a more serious problem like nerve damage or a disease, and should be reported immediately to your primary care doctor.

The exact nature of the relationship of sciatica to disc, nerve, and pain is not yet certain. A herniated or ‘slipped disc’ is the most common cause of sciatica, but there is no one basic cause. Not everyone’s spinal disks age at the same pace. Spinal disks lose their elasticity over time: they lose fluid and become brittle and cracked. These changes are a normal part of aging.

Another cause can be a small muscle deep in the buttocks that becomes tight or spasms, which puts pressure on the sciatic nerve. Narrowing of the spinal column, or a vertebra that is out of line, can affect the sciatic nerve. Fortunately, most cases of sciatica are short term, and the pain resolves within a matter of weeks or months. But some cases do not resolve quickly, and 10% to 40% of cases can require treatment for chronic pain.

Most patients with sciatica can be treated by their primary care doctor without the need for further diagnostic testing. The goal is to reduce pain and increase mobility. Physical therapy, with customized stretching exercises to improve flexibility of tight muscles, are often where treatment will begin, along with the use of NSAIDs (nonsteroidal anti-inflammatory drugs) like aspirin or ibuprofen to temporarily relieve pain and inflammation. In other cases, tests like Magnetic resonance imaging (MRI) or computed tomography (CT) scan are used to obtain images of the structures of the back. Spinal injections of an anti-inflammatory medicine, or surgery is available for people who don’t respond to other treatment, and who have severe pain. Many people believe that massage, yoga or acupuncture can improve sciatica.

You can take steps to protect your back and reduce your risk for getting sciatica pain:

* Practice proper lifting techniques: Lift with your back straight, bringing yourself up with your hips and legs, and holding the object close to your chest. Use this technique for lifting everything, no matter how light.
* Avoid/stop cigarette smoking, which promotes disc degeneration.
* Exercise regularly to strengthen the muscles of your back and abdomen, which work to support your spine. Whether you are sitting or lying down, tighten your stomach muscles often, hold them tight, then release.
* Use good posture when you are sitting, standing, and sleeping. Good posture helps to relieve the pressure on your lower back. Wrap up a towel for lower back support in your car seat or desk chair.
* Avoid sitting for long periods.