

Protrusion of the Lumbar Intervertebral Disk

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Protrusion of the lumbar intervertebral disk is a very common problem between the ages of 30 to 50 years. It is a combined outcome of degeneration of the intervertebral disk and a pulling or pushing force.

Intervertebral disks are situated between adjacent spinal vertebrae, except the axis and the atlas. There are 5 lumbar disks amongst a total of 23 intervertebral disks in the human body. The most common protrusion of lumbar disks is between L4/L5 and L5/ S1. Because the majority of upper body weight presses on L4/5, the most movable point or part is L5/S1. When either of these two disks is damaged, degeneration occurs easily.

Patients usually have back injury history or been experienced intermittent back pain for some time. Prolapse of a lumbar disk may occur when lifting heavy weights or have a coughing or sneezing severely whilst the back is bent. Ligaments and muscles surrounding the disk can be torn which causes incapacity to hold the disk in place. When the disk is subject to strong force, it is likely to protrude from the “gap” so created.

There are three types of Protrusion of the Lumbar Intervertebral Disk.

- (1) Cases with disk protrusion into and compression of the lumbar nerve root. Patients suffer back pain immediately, sometimes accompanied by sciatica.
- (2) Cases with disk protrusion into the spinal cord. Pain is not likely to be the main complaint but numbness and stiffness are likely to occur on the perineum and inner parts of the thighs. Enuresis and bowel disorder may also occur. In severe cases, gradual muscular atrophy and weakness may occur in one or both legs.
- (3) Cases with disk protrusion into the spinal cord and compression of the lumbar nerve root. A combination of symptoms arising from the first two types will occur.

In about 30-40 % of cases protrusions of intervertebral disks do not show up in normal X-rays. It is preferable to use either CT scan or MRI; such techniques can also classify the problem.

Tuina therapy (Chinese therapeutic massage, acupressure, joint and spinal manipulation) is the most effective and acceptable option for the protrusion of the lumbar intervertebral disk. In conjunction with acupuncture and herbal medicine, it is likely to produce a better result. The alleviatory rate is 96%. **Greatpatch-S** should be applied in the beginning to reduce pain and swelling. Once the swelling and pain is reduced, **Greatpatch-A** should be applied to assist recovery and to strengthen both soft tissue and the spine.

Spinal traction and swimming (either freestyle or backstroke) are also recommended therapies.