

Sciatica *Explained!*

If you've ever had shooting pains from your lower back travelling down your thigh and leg, you've likely experienced sciatica. Here, DR COLUM NOLAN, senior consultant neurosurgeon at Oxford Spine & Neurosurgery Centre fills us in on this common cause of back and leg pain, and how it can be treated.



What is sciatica?

Sciatica is a symptom caused by an underlying injury to the sciatic nerve, the body's longest, largest nerve, which originates from nerves in the lower spine and runs through the buttock and back of the thigh, with branches all the way down to the heel and sole of the foot. It usually occurs on one side but can occur on both sides.

Common causes of sciatica include:

- herniated lumbar disc, or slipped disc;
- lumbar spinal stenosis, a progressive wear and tear condition that causes narrowing of the spinal canal and compression of the nerve roots;
- spondylolisthesis, where one vertebra slips out of line with the vertebra below it, compressing the nerve roots; and
- osteoarthritis, where bone spurs develop and compress the nerve roots.

Who is at risk of sciatica?

Sciatica is more prevalent in people whose occupations involve heavy lifting, prolonged sitting or prolonged periods of leaning over. It's important to maintain good posture when sitting, standing, squatting down, and carrying and lifting heavy objects. Regular exercise, weight control and cessation of smoking are all important.



What are the symptoms?

Sciatica can happen suddenly or gradually, depending on the underlying condition. For example, a herniated disc can cause sudden pain, but arthritic pain tends to occur and worsen over time. Nonetheless, there are common symptoms, including the following:

- A shooting pain or burning sensation that starts in the lower back and travels down through the buttock and radiates down the thigh, and sometimes, all the way down to the lower leg and into the foot;
- pain that can be worse in certain positions such as sitting, bending forward, trying to stand up or twisting movements;
- numbness or tingling in the leg, often in the same area as the pain;
- weakness of the leg in severe cases; and
- disturbance of bowel and bladder control in severe cases.

When should a doctor be consulted?

Luckily, for most patients, the pain is self-limiting and recovers naturally in four to six weeks. Some home remedies you can use to alleviate the pain include simple painkillers, hot or cold compresses and regular stretching. If your condition doesn't improve or it starts to worsen, seeing a doctor for assessment is advised. If there is any weakness or difficulty with bowel or bladder control, an urgent assessment is highly recommended. If there has been any trauma, or if you have fever, weight loss, a history of cancer or are immunosuppressed, then seeking help from a medical professional is also recommended. Depending on your condition, your doctor may order an MRI scan.

How is sciatica treated?

The mainstay of treatment is usually a combination of medication for symptom control and physiotherapy. A physiotherapist can design a rehabilitation programme to correct posture, strengthen the back muscles and improve flexibility.

In some cases, steroid injections can be useful for symptom control, particularly if medication is not helping. In severe cases with progressive symptoms, surgery may be an option. The purpose of surgery is to address the cause of the nerve compression and relieve the pressure on the nerves. Surgery is often done using keyhole techniques. *a*

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