



Jack E. Marshall, M.D.

Scott A. Mitchell, D.O.

405.775.9355

Oklahoma Interventional Pain Management

TERMS AND DEFINITIONS

Who you see is what you get. Different health care practitioners are schooled in different terminology and methods. Each may view your back pain from the standpoint of what they are trained to treat. For example, a massage therapist may look for muscle tensions, while a physical therapist may focus on range of motion. A chiropractor may be more concerned with spinal alignment, while a neurosurgeon may be more concerned with a disc problem. When talking with health care practitioners, remember that each may use a different vocabulary word for the same problem.

Degenerative Disc Disease or Degenerative Joint Disease

Osteoarthritis and degenerative joint disease, or degenerative disc disease, are umbrella terms that apply to all of the larger, weight-bearing joints, including the spine. Osteoarthritis that affects the spine is often referred to as spondylosis. (Note: Osteoarthritis is not related to the more serious rheumatoid arthritis.) Spine care practitioners commonly use degenerative disc disease to describe the condition of a narrowing of the spaces between the vertebrae where the discs reside.

Degenerated discs become dry and stiff, and lose much of their vertical height and cushioning ability. This promotes the growth of bone spurs, or osteophytes, in an effort to reinforce the joint.

Stenosis

Stenosis refers to a narrowing of the spinal canal, with resulting pressure on the spinal cord and nerve roots. The narrowing may be caused by a protruding disc, or by the growth of extra bone, called hard stenosis. As a healthy disc degenerates due to improper resting posture, the vertebrae above and below produce additional bone tissue to help support the weight no longer supported by the disc. Surgery is often performed to remove the extra bone.

Disc Injuries – Herniated, Ruptured, Prolapsed, Bulging, Slipped, Protrusion

These terms describe various stages of disc displacement – the breakdown of the outer fibers of the disc and the squeezing of the nucleus through the weakened layers.

The initial stage of disc displacement is the weakening of the annulus fibrosis (fibrous outer layers of the disc) through years of poor posture. Once the annulus begins to give way, a bulge forms as the nucleus is pushed partway through the weakened fibers. Finally, the disc wall may tear, or rupture, allowing material from the nucleus to escape.

It may be difficult to determine whether a disc has actually ruptured or is simply bulging. To add to the confusion, terms such as “herniated disc” often are used to refer to either stage.

Ruptured or not, a bulging disc can put pressure on the adjacent nerve root, causing pain. Conversely, a ruptured disc may remain symptom-free if it is not pressing on a nerve.

Sciatica

Approximately 40% of the population will suffer from sciatica at some time in their lives. Sciatica's hallmark is a sharp, shooting pain that runs down the sciatic nerve along the back of the thigh and down the inside of the leg. Numbing or tingling also may be present. Sciatica pain is caused by pressure on the nerve root, which may be due to a bulging, herniated or ruptured disc, bone spurs, or hard stenosis.

Pinched Nerve

This is the colloquial term for pain caused by pressure on the spinal cord or on a nerve root as it exits the spinal canal. This pressure may be caused by a bulging or herniated disc, or a narrowing of the spinal canal due to growth of extra bone (stenosis). In cases of spondylolisthesis, a defective or cracked vertebra slips forward and may irritate the nerve root. Sciatica is the most common example of a pinched nerve.