Neurosurgery
Neuroimaging
Neuroaddiction
Consultation



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Spinal Injuries

The most common type of neck and back injuries are known as strain/sprain or myofascial syndromes. These injuries include tears and nonsurgical injuries to the ligaments, tendons, and muscles around the spine. Most of these Injuries heal without any intervention with simple nonsteroidal antinflammatory such as Aleve or Advil and a few days of rest. Primary care providers (family doctor, internist, etc.) may sometimes prescribe physical therapy or stronger analgesics, muscle relaxants and/or steroids to assist In the recovery, in essence, though most of the patients improve within as little as three days to six to eight weeks.

Some patients, with strain/sprain syndrome may also have deeper injuries to the spine such as a disc rupture In the neck or back. Very frequently the symptoms are similar if the disc rupture protrudes posteriorly into the spinal canal. In the neck this would lead to pain, weakness or numbness down the arms and in the lower back, pain, weakness or numbness down the legs. The treatment for ruptured disc is conservatives as well and again the patient's primary care provider may prescribe further therapy and stronger analgesics or muscle relaxants to help in the recovery. Overall most patients with ruptured discs improve without surgical intervention usually within six weeks.

If the patient's condition fails to improve or worsens with the usual conservative treatment the primary care provider may refer to a spine surgeon such as a neurological surgeon. At this point an MRI scan may be done to take a closer look at the spine, discs, nerves and spinal cord. Fortunately, most patients referred to a Neurosurgical practice can find some improvement with further conservative measures. If surgery is required new techniques allow patients to be out of the hospital quickly and back to their usual activities usually in a short amount of time.

The best treatment for spinal injuries though is prevention. New research suggest that smoking can aggravate the effects of degenerative disc disease and osteoarthritis in the spine and also help to lower the pain threshold in many individuals. Lifestyle management Issues such as a weight reduction program and a regular exercise program with activities as active as tolerated frequently will help prevent spinal problems as well. Routine neck and back care exercise programs are also beneficial for the maintenance of muscle tone and strength as most of the strength of the spine is within the supporting structures such as muscles and ligaments around the spinal axis. Further research has shown that for patients with chronic pain that antidepressants frequently are useful in improving an individual's pain threshold and improving sleep and function. Regular office visits with a primary care provider can help also to eliminate any other underlying medical problems that can lead to spine pain and spinal disorders. The primary care provider is in the best position to decide if an individual is in need of a referral on to a specialist.