

FACT SHEET

Degeneration of Lumbar or Lumbosacral Intervertebral Disc

What Else is it Called?

Degenerative Disc Disease, Low Back Pain, Lumbago

What Is it?

- A lumbar disc is a semi-rigid structure that separates and cushions the vertebral bodies in the lumbar spine.
- Degeneration of a lumbar disc occurs when the space between the vertebrae narrows, and bone spurs form (osteophytes).
- As in the cervical and thoracic spines, this is part of normal aging.
- The disc is usually soft and gelatin-like in the center (nucleus pulposus) and surrounded by a tough cartilage ring (annulus). The gelatin center is soft because of its high water content. The water content decreases with age, which causes the disc to become more rigid.
- A high percentage of individuals over the age of 40 have degenerative disc disease on X-ray examinations but have no symptoms.
- When the disc space narrow, it places stress on the other joints of the vertebrae (facet joints) and this degeneration of the joints and surrounding soft tissues may lead to chronic low back pain.
- Rarely work related except after major trauma, such as a spinal fracture.

How Is It Diagnosed?

History:

- Individuals may complain of pain limited to the low back and buttock. The pain is often brought on by activity and relieved with rest.
- Any change in the pain, such as radiation to the legs, could indicate compression of the spinal nerve roots (radiculopathy).
- Often a family history of back pain

What to look for:

- Physical exam is often unremarkable.
- Loss of the range-of-motion of the lumbar spine.
- The neuromuscular exam is directed at excluding any symptoms or signs of spinal nerve involvement.

Tests:

- Plain X-rays to show the narrowing of the disc space and some osteophyte formation on the vertebral bodies as aging changes. These changes are usually not the cause of the symptoms.
- Further testing is not indicated unless there are signs and symptoms of spinal nerve irritation.

What is the Expected Return to Work Time?

Medical Treatment. Disability may be permanent	
Job Classification.....	RTW Minimum – Maximum
Sedentary Work.....	0 days – 21 days Calendar Days
Light Work.....	0 days – 28 days
Medium Work.....	0 days – 42 days
Heavy Work.....	0 days – 84 days
Very Heavy Work.....	0 days – 84 days

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How is it Treated?

- Short periods of rest
- Moist heat
- Nonsteroidal anti-inflammatory agents (NSAIDs) (aspirin, if tolerated).
- It is important for the individual to understand the role of body mechanics and lumbar disc disease.
- Exercises to improve posture and a few gentle manipulative treatments to the disc are sometimes helpful.
- Physiotherapy often prescribed and important in teaching patients proper exercises and care for the back.

What is the Predicted Outcome?

Normal aging or lumbar disc degeneration is chronic and irreversible. Acute episodes of pain and weakness may be self-limiting to a few weeks. Much of the outcome depends on the activity level of the individual and how much they are willing to follow the guidelines of exercise and maintenance of normal activity.

What are the Work Restrictions and Accommodations?

- Temporary avoidance of heavy lifting and prolonged sitting or standing.
- Individuals may benefit from short periods of rest including an opportunity to lie down during such breaks.

What Are the Common Prescriptions?

- Anti-inflammatories
- Analgesics
- Muscle relaxants