Radicular Pain

Radicular pain in either the arm or leg is usually from a bulging or herniated disk in the spine. A piece of the herniated disk may press against the nerves as the nerves exit the spine. This causes pain which is felt at the tips of the nerves down the arm or leg. Other causes of radicular pain may include:

- Fractures.
- Heart disease.
- Cancer.
- An abnormal and usually degenerative state of the nervous system or nerves (*neuropathy*).

Diagnosis may require CT or MRI scanning to determine the primary cause.

Nerves that start at the neck (nerve roots) may cause radicular pain in the outer shoulder and arm. It can spread down to the thumb and fingers. The symptoms vary depending on which nerve root has been affected. In most cases radicular pain improves with conservative treatment. Neck problems may require physical therapy, a neck collar, or cervical traction. **Treatment may take many weeks, and surgery may be considered if the symptoms do not improve.**

Conservative treatment is also recommended for sciatica. Sciatica causes pain to radiate from the lower back or buttock area down the leg into the foot. Often there is a history of back problems. **Most patients with sciatica are better after 2-4 weeks of rest and other supportive care**. Short term bed rest can reduce the disk pressure considerably. Sitting, however, is not a good position since this increases the pressure on the disk. **You should avoid bending, lifting, and all other activities which make the problem worse**. Traction can be used in severe cases. Surgery is usually reserved for patients who do not improve within the first months of treatment.

Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver. Narcotics and muscle relaxants may help by relieving more severe pain and spasm and by providing mild sedation. Cold or massage can give significant relief. **Spinal manipulation is not recommended. It can increase the degree of disc protrusion.** Epidural steroid injections are often effective treatment for radicular pain. These injections deliver medicine to the spinal nerve in the space between the protective covering of the spinal cord and back bones (*vertebrae*). Your caregiver can give you more information about steroid injections. These injections are most effective when given within two weeks of the onset of pain.

You should see your caregiver for follow up care as recommended. A program for neck and back injury rehabilitation with stretching and strengthening exercises is an important part of management.

SEEK IMMEDIATE MEDICAL CARE IF YOU DEVELOP:

- Increased pain, weakness, or numbness in your arm or leg.
- Difficulty with bladder or bowel control.
- Abdominal pain.

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