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Sciatica

If your sciatic nerve becomes inflamed, the condition is called sciatica (pronounced si-ad'-i-ka). The pain can be intense! It often follows the path of your nerve - down the back of your leg, ankle, foot, and toes - but it can also radiate to your back! Along with burning, sharp pains, you may also feel nerve sensations such as pins-and-needles, tingling, prickling, crawling sensations, or tenderness. Ironically, your leg may also feel numb!

Very rarely, though, sciatica pain can be extremely severe and debilitating for patients who are recommended surgery. New surgical techniques like microsurgery and percutaneous removals allow patients to undergo these procedures and come out of the hospital much faster than ever before, decreasing the loss of work time.

Learning about potential risk factors and taking appropriate action will help ensure a stronger, more flexible, and healthier lower back. By Dr. Ralph Santonastaso

Risk factors for back pain may also be found in your personal and family medical history.^{2,3} During your initial visit your chiropractor will ask you about accidents and surgeries you've experienced, and discuss any important elements in your family history. For example, surgery to remove an inflamed gallbladder or appendix or to repair a hernia may result in weakened abdominal muscles. A motor vehicle accident or a fall from a height may have caused injuries that healed with soft tissue scarring.

Physical examinations include the following procedures. * The patient may be asked to lie down, face upward and the affected leg is then raised to various heights. * The doctor may also ask the patient to rotate the hip joint. Pain caused by these movements can often help in pinpointing the location of the pain and assessing the hip muscles. * Testing the strength of bending backward of the ankles and toes can also indicate the position where the nerve is likely to be pinched. * Another test used by many doctors is the reflex of your ankles.

Many people think of sciatica, symptoms of which include pain down the leg, some numbness and weakness of the limbs as just another case of lower back pain and believe that with sufficient rest, the pain will go away. However, sciatica is a little more serious than that.

Almost all these treatments are accompanied or followed by physical therapy, under a physician's supervision or on his prescribed course. This kind of physical therapy concentrates on building the muscles around the sciatica nerve roots so as to strengthen the lower back.

Occasionally, the sciatic nerve roots - which start at the base of the spine and stretch all the way to the feet through the buttock and legs - get compressed or irritated causing pain not only in the lower back but also in the buttocks, thighs, legs, extending even to the feet.

Livingston Chiropractic & Rehabilitation Center 65 East Northfield Road Livingston NJ 07039 <http://www.livingstonchiroandrehab.com>

Are there risk factors for back pain? And, if there are, what can I do to keep myself healthy and well? Your chiropractor can help answer these questions and more.

A related risk factor is weak abdominal muscles. When you were a kid, at some point one of your gym teachers probably told you to "suck in your stomach". Actually, it turns out that was pretty good advice. Your abdominal muscles support the muscles of your lower back. If your abdominals are weak or if you're not using them - letting them hang out and droop instead of keeping them activated - your body weight has to be held up by the muscles of your lower back. They're not designed to do that - they're designed to move your spine around. And eventually, these lower back muscles will give way under the excess strain. The result is a very painful lower back injury.

Tip 2: Lifting of Heavy Objects: Try to share the load of very heavy objects with others. If you have to lift something by yourself, hold it close to you and then bend your knees, rather than bending your back.

Tip 3: Exercise Regularly: Regular exercise will not only help you in your general fitness but also in the fitness of your lower back. Abdominal crunches are very helpful in strengthening your lower back. Swimming or Walking can also help with the lower back.

What are the causes behind the pain of sciatica? Sciatica is usually associated with compression of the sciatic nerve due to a slipped or a herniated disc. A degenerative disc disease is a condition that is brought about by the ageing process. The sciatic nerve is sometimes pinched by the piriformis muscle that is located deep in the buttocks. Sciatic pain can also be caused by conditions that are not related with disc. Bad postures can also lead to pseudo sciatica, a pain that is similar to *sciatica*.

One primary risk factor relates to exercise. Everyone has heard, "if you don't use it, you lose it". If you're not exercising regularly, your back muscles are deconditioned and much more susceptible to injury - the strains and sprains we're accustomed to calling "back pain".

Diagnosing sciatica is a complex procedure. Since the pain can be indicative of other conditions as well, it is also necessary to rule out more serious conditions like infection or cancer. Sciatic is a progressive disease that can immobilize the patient to a great extent. Sciatica alternative remedies like exercises, yoga and acupuncture can be very effective to stem the progress of a highly developmental condition. On the first signs of pain in the lower back an examination by a specialist is highly recommended.

For sciatica sufferers, a good night's sleep may be a thing of the past. Simple things like walking, sitting, or standing up can be difficult or impossible.

* X-Rays * Magnetic Resonance Imaging (MRI) * Computed Tomography (CT) Scan. * Electromyography - passing an electric current through a nerve to record the electrical waves associated with the activity of skeletal muscles. * Myelography - X-rays done after injecting a contrast medium into the space between vertebrae.

For more info on sciatica treatment head to: <http://www.sciaticatreatment.org> today!

About the Author:

for more info visit http://ezinearticles.com/?expert=Neil_Jones

A physical examination and the medical history of the patient are very important for diagnosing sciatica. The doctor needs to eliminate normal back pain or lumbago before proceeding for sciatic nerve treatment. There is always a possibility that a difference in lengths of the two legs may cause pain in the lower back.

In most cases, medical history is able to identify patients that are likely to have a herniated disc. Sciatic pain is superficial and localized. It also gives a feeling of numbness or tingling. It aggravates when pressure is applied between discs.

Symptoms such as a disability in walking suggest nerve root compression. In cases symptoms that are severe enough to consider a surgical intervention the physical examination is mostly followed by other investigative procedures. To confirm any doubts the physician might ask for, the doctor might perform any or all of the following tests:

The quality of pain may vary. There may be constant throbbing, but then it may let up for hours or even days; it may ache or be knife-like. Sometimes postural changes like lying down or changing positions affect the pain, and sometimes they don't. In severe cases, sciatica can cause a loss of reflexes or even a wasting of the calf muscles.

There are three parts to the brain stem: top, middle and lower. The mesencephalon is the top part of the brain stem. A high output of the mesencephalon will cause an increased pulse and heart rate, the inability to sleep, or a waking, fitful sleep. Other symptoms might include urinary tract infections, increased warmth and sweating, and sensitivity to light. Along with a high mesencephalic output, the migraine patient may present with a decreased output of the cerebellum. The cerebellum controls balance, coordinated movement, and the involuntary muscles of the spinal column.

There are many ways of treating **sciatica** but there also many ways of preventing sciatica in the first place. We will look at some of the best ways to prevent and treat Sciatica.

<http://www.gardenstatepainrelief.com/1>

1Jones MA, et al. Recurrent non-specific low-back pain in adolescents: the role of exercise. *Ergonomics* 50(10):1680-1688, 2007 2Cherniack M, et al. Clinical and psychological correlates of lumbar motion abnormalities in low back disorders. *Spine J* 1(4):290-298, 2001 3Plouvier S, et al. Biomechanical strains and low back disorders. *Occup Environ Med* 2007 (in press)

There are many easy-to-do exercises for your abdominal muscles. The key is to actually do them - and do them after you're finished doing the rest of whatever exercises you've scheduled for that day. How often? Three times a week is plenty. Abdominal routines are quick - no more than 10 minutes. And, remember to use your abdominal muscles throughout the day. Imagine your abdominals are being pulled in and lifted up. This is not a "tightening" - your thought should be "activate". Your body will know what to do, once you've started adding consistent abdominal training to your exercise routine.

Tip 1: Posture, Posture, Posture: Maintaining a good posture while standing and sitting go a long way to avoid damage to the spine. Also one should avoid sitting or standing for very long periods.

For example, chiropractic treatment is one such method in which you are offered non-invasive and medication-free therapies, to treat your **sciatica**. Chiropractic treatments can involve ultrasounds, TENS, spinal adjustments and cold therapies. Other alternative methods of treatment include acupuncture or acupressure, in which fine needles are stuck at specific points to help relieve pain; yoga, which involve stretching exercises and help a certain kind of sciatica pain and biofeedback, which is said to be a mind-body therapy helping you train your mind and body in controlling your reactions to pain.

To complicate matters, although sciatica pain is usually in the back of the legs or thighs, some people may feel pain in the front or side of the legs or even in the hips. For some, the pain is in both legs: bilateral sciatica!

No matter what the condition, it is imperative that the chiropractic neurologist performs a thorough and comprehensive exam to determine the exact nature of the patient's condition.

As a Board Certified Chiropractic Neurologist, I take a different approach to the treatment and prevention of sciatica. After a thorough neurological exam, I determine which part of the nervous system is not functioning properly. In many sciatica patients, I find a high mesencephalic output.

Tip 5: Alternative Methods of Treatment: Other than medication and surgery, many patients suffering from sciatica have tried alternative methods of treatment and have claimed great success with them.

Muscles get stronger when they're required to do work. Also exercise helps "train" the soft tissues around a joint - the ligaments and tendons - these supporting structures "learn" how to withstand mechanical stresses and loads without becoming injured. Basically, when you exercise - when you do any kind of exercise - your body gets "smarter" and you're less likely to get those annoying back problems.¹

Tip 4: Medication and Physical Therapy: If you are suffering from lower back and leg pain, you could start off with simple painkillers, such as ibuprofen or paracetamol. If the pain is severe, affecting your day-to-day activities and simple painkillers do not work, you could have an anti-inflammatory medication prescribed for you. At times, these too are not enough and your doctor may suggest an epidural injection. In this, the medication is injected into the spine, which directs it to the areas of the sciatic nerve roots, soothing them and relieving the pain.

About the author:

Richard provides articles and information about herbal remedies on his site at <http://remedyguidance.com>

Edward Wiggin

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