

# Radicular pain

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**Radicular pain**, or **radiculitis**, is pain "radiated" along the dermatome (sensory distribution) of a nerve due to inflammation or other irritation of the nerve root (radiculopathy) at its connection to the spinal column. A common form of radiculitis is sciatica – radicular pain that radiates along the sciatic nerve from the lower spine to the lower back, gluteal muscles, back of the upper thigh, calf, and foot as often secondary to nerve root irritation from a spinal disc herniation or from osteophytes in the lumbar region of the spine.

## Treatment options

Seeking treatment for radiculitis should not be delayed. Depending on the severity, certain muscles (i.e.: in the toes, feet and calf) may start to atrophy over time, which in turn requires physical therapy for recovery. Also, radiculitis is known to cause patients to "favor" certain muscles (or a certain side of their body) which can result in the overdevelopment of those muscles relative to others, causing abnormal torque on joints that can cause degenerative damage.

Initial treatment for the pain may involve one or a combination of the following interventions:

- One or two days of rest, if the pain is severe
- Application of ice (to reduce the inflammation) and/or heat (to encourage blood flow to help the irritated area to heal)
- Non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen or nabumetone
- Acetaminophen (paracetamol), e.g. Tylenol, which helps reduce the pain signals in the brain
- Spinal manipulation or mobilization when lumbar spine related<sup>[1]</sup>
- Gabapentin or the newer prescription medicine pregabalin
- Analgesics or pain killers, such as Vicodin, Percocet, or, in severe cases, a low dosage of Methadone
- Muscle relaxers, such as cyclobenzaprine or methocarbamol
- Epidural steroidal injections, which involves injecting a steroid (and sometimes a pain killer) directly into the problem area in the back to treat the inflammation that is irritating the nerve root

Once the initial period of severe pain is under control, a variety of treatments may be employed to address the underlying cause of the pain, such as a disc herniation, lumbar spinal stenosis, or degenerative disc disease:

- Physical therapy: stretching and physical exercise; often recommended after a period of one to two days of rest and treatment to get the pain under control.
- Massage therapy can be a useful adjunct in relieving pain; myofascial release may be helpful.
- Yoga therapy by a skilled yoga therapist is another excellent adjunct treatment.
- Chiropractic<sup>[1]</sup>
- Acupuncture<sup>[2]</sup>

**REVIEWED**

By *Chris Tighe* at 2:02 pm, May 07, 2015

### Radiculitis

#### Classification and external resources

<b>ICD-10</b>	M54.1 ( <a href="http://apps.who.int/classifications/icd10/browse/2015/en#/M54.1">http://apps.who.int/classifications/icd10/browse/2015/en#/M54.1</a> )
<b>ICD-9</b>	729.2 ( <a href="http://www.icd9data.com/getICD9Code.ashx?icd9=729.2">http://www.icd9data.com/getICD9Code.ashx?icd9=729.2</a> )
<b>DiseasesDB</b>	29521 ( <a href="http://www.diseasesdatabase.com/ddb29521.htm">http://www.diseasesdatabase.com/ddb29521.htm</a> )
<b>MeSH</b>	D011843 ( <a href="https://www.nlm.nih.gov/cgi/mesh/2015/MB_cgi?field=uid&amp;term=D011843">https://www.nlm.nih.gov/cgi/mesh/2015/MB_cgi?field=uid&amp;term=D011843</a> )

Modifying personal habits and lifestyle to prevent future exacerbation of the underlying cause of the pain is also important. For example, maintaining an appropriate body weight that's known not to aggravate the discs (this varies from patient to patient) as well as changing the way one goes about bending over for objects on the ground (heavy or light, it doesn't matter...all one has to do is bend in the wrong direction to invoke an episode). Another important lifestyle change that is usually recommended is to maintain a regular stretching and exercise program.

There are also a variety of surgeries that can be employed to treat severe cases of radicular pain, depending on the underlying condition that the surgery addresses. To treat a disc herniation, which may cause persistent radiating pain, a microdiscectomy surgery is usually performed. This is a minimally invasive approach that removes the portion of the disc that presses against the nerve root. The surgery has a high success rate, minimal healing time (typically the patient will go home on the same day as the surgery), and usually provides immediate relief of the sciatica and other symptoms caused by a herniated disc. This surgery may be recommended after several weeks of non-surgical treatment, or even earlier if the pain and other sciatica symptoms are severe. However, even in discal herniations, the long term outcomes do not differ between those who undergo surgery and those who do not. The decision to undergo surgery is not trivial, and is preferably made in consultation with two or more physicians.

## See also

- Intervertebral disc
- Sciatica
- Spinal disc herniation

## References

1. Leininger B, Bronfort G, Evans R, Reiter T (2011). "Spinal manipulation or mobilization for radiculopathy: a systematic review". *Phys Med Rehabil Clin N Am* **22** (1): 105–125. doi:10.1016/j.pmr.2010.11.002 (<https://dx.doi.org/10.1016%2Fj.pmr.2010.11.002>). PMID 21292148 (<https://www.ncbi.nlm.nih.gov/pubmed/21292148>).
2. Schmitt, H; Zhao, JQ; Brocai, DR; Kaps, HP (2001). "Acupuncture treatment of low back pain". *Schmerz* **15** (1): 33–37. PMID 11810327 (<https://www.ncbi.nlm.nih.gov/pubmed/11810327>).

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Categories: Musculoskeletal disorders

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