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Do You Need Back Surgery?

Six essential steps to deciding whether surgery's the answer to your back pain problem.



By Catherine Winters

Back surgery is often touted as unnecessary. So if your doctor suggests it, should you go for it? While there's no one-size-fits-all profile of the perfect candidate—and no guarantee that surgery will leave you completely pain free—there are clues to who is most likely to get good results. Here are six indicators of whether back surgery is a good option for you.

1. Check your diagnosis. Thanks to the landmark Spine Patient Outcomes Research Trial (SPORT), there's clear evidence surgery can help three common problems: spinal stenosis, a narrowing of the spinal cord that causes pain in the buttocks and legs; degenerative spondylolisthesis, which occurs when one vertebra slips forward; and a herniated disc with leg pain, which results when one of the cushiony discs between your vertebrae tears. In each of the three SPORT studies, people with these conditions who chose surgery fared better in areas such as pain relief and ability to function than people who favored usual care.

2. Exhaust other options. Even the people in the SPORT study didn't head for the OR right away. Those with a herniated disc tried other treatments for at least six weeks and those with spinal stenosis and spondylolisthesis waited a minimum of three months. In fact, whether your aching back is caused by one of these conditions or the cause can't be found, trying other treatments first is a smart idea. The reason? "The natural history of some of these disorders is that they improve," says Dr. William A. Abdu, medical director of The Spine Center at Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire. "You only want to operate on people who are not getting better." For most back pain, over-the-counter anti-inflammatories or acetaminophen are the first pain-easing step. You also need to keep moving; bed rest isn't a good idea. If OTC meds don't help, your doctor may recommend steroid injections, muscle relaxants, prescription opioids, physical therapy and/or chiropractor care. Even massage or acupuncture may be worth a try.

3. Assess your pain level. At what point should you opt for surgery? "It's different for every patient," Abdu says. Some people manage their pain medically and/or let nature take its course: Most back pain resolves within a year. For others, the pain may be unbearable. "They wake up one morning and decide it's time for surgery," says Dr. Abdu.

4. Do your homework. “Ask the surgeon why you need surgery,” advises Dr. Ralph F. Rashbaum, co-founder of The Texas Back Institute in Plano. “Ask him to explain anatomically what is wrong with you and what the potential damage to you will be if you have surgery or don’t have surgery. That information enables a patient to make a clear decision.”

5. Get a second opinion. Consult an orthopedic surgeon or neurosurgeon who specializes in the spine and is affiliated with a center that deals with back pain. Don’t share your previous diagnosis with the doctor; let him take a fresh look at you. He may agree with the first doctor or offer a different diagnosis. The reason? In the world of back pain, “there is a degree of uncertainty about diagnosis and which treatment is best,” Abdu says.

6. Weigh the risks. If you’re on the fence about whether surgery is a smart choice, weigh the risks and benefits of an operation against those of medical management. Anti-inflammatories can cause stomach bleeding; narcotics can make you drowsy; and back pain affects your ability to sleep or work. And keep in mind: Whether you have surgery or not, says Abdu, “sometimes you just can’t make the pain go away.”

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