2. Fonti S, Lynch M. Etiopathogenesis of lumbosciatalgia due to disc disease; chiropractic treatment. In J. Mazzarelli (Ed.), *Chiropractic: Interprofessional Research*. Torino, Italy: Edizioni Minerve Medica, 1983:59-68.

3. Stover BD, Turner JA, Franklin G et al. Factors associated with early opioid prescription among workers with low back injuries. *Journal of Pain.* 2006;7(10):718-725.

4. Patrick C et al. Lack of effectiveness of bed rest for sciatica. *NEJM*. 1999;340:418-423.

5. Johnson EW. Sciatic nerve palsy following delivery. *Postgrad. Med.* 1961;30(5).

6. Barge FH. The chiropractic vertebral subluxation and its relationship to vertebrogenic lumbar pain, cruralgia and sciatic syndromes. *Chiropractic Research Journal*. 1995;3(2):25-39.

7. Livingston M. Spinal manipulation: a one year follow-up study. *The Canadian Family Physician*. July 1969:35-39.
8. Mathews JA et al. Back pain and sciatica: controlled trials of manipulation, traction, sclerosant and epidural injections. *British Journal of Rheumatology*. 1987;26:416-423.
9. Osterbauer PJ, Fuhr AW. Treatment of chronic sciatica by mechanical force, manually assisted, short lever adjusting and a video assisted stretching program: a quantitative case report. Proceedings of the Consortium for Chiropractic Research Conference on Research and Education, 1992. Palm Springs, CA.
10. Orlin JR, Didriksen A. Results of chiropractic treatment of lumbopelvic fixation in 44 patients admitted to an orthopedic department. *JMPT*. 2007;30:135-139.

11. Cox JM, Shreiner S. Chiropractic manipulation in low back pain and sciatica: statistic data on the diagnosis, treatment and response of 576 consecutive cases. *JMPT*. 1982;7:1-11. 12. Bronfort G et al. Non-operative treatments for sciatica: a pilot study for a randomized clinical trial. *JMPT*. 2000;23(8):536-544.

13. Downs S. Unilateral intermittent claudication of the left lower extremity. *JMPT*. 1988;11:322-324.

14. Nall SK. The role of specific manipulation towards alleviating abnormalities in body mechanics and restoration of spinal motion. *JMPT*. 1982;5:11-15.

# 224

© 2009 Tedd Koren, D.C. All rights reserved. TEI Koren Publications Inc. 1-800-537-3001 korenpublications.com





<image>

#### Sciatic Nerve

Your sciatic nerve is the longest and largest nerve in your body. It begins in your lower back as five smaller nerves joining together and extends to your pelvis, thigh, knee, calf, ankle, foot and toes.

### What Is Sciatica?

Your sciatic

nerve beains

in your lower

back as five

nerves joining

together and

extends to

your pelvis,

thiah, knee,

calf, ankle,

foot and toes.

smaller

When this large nerve becomes inflamed the condition is called sciatica (pronounced si'ad-a'ka) and the pain can be intense! The pain may follow the path of your nerve—down the back of your legs and thighs, down to your ankle, foot and toes—but it can also radiate to your back!

Along with pain there may be burning, pins and needles, tingling, prickling, crawling sensations or tenderness. Ironically, the leg may also feel numb!

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

## Like A Knife

The quality of the 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 calf muscles. For sciatica sufferers, a good night's sleep may be a thing of the past. Simple things like walking, bending, turning, sitting or standing up can be difficult or impossible. Those with low back pain and sciatica show the highest level of disability of all back pain patients.<sup>1</sup>

#### **Causes Of Sciatica**

Like most other conditions, sciatica has a wide variety of causes. An unhealthy spine with a protruded or ruptured disc which can irritate the sciatic nerve is one cause. Sciatica has been reported following accidents, injuries and even childbirth, usually due to spinal misalignment.<sup>2</sup> However, advanced diabetes can also cause sciatic nerve irritation, as can arthritis, constipation, tumors and even vitamin deficiencies.

### The Medical Approach

The medical approach to sciatica is usually to treat its symptoms with painkillers, muscle relaxers and orthopedic devices such as traction and physical therapy. Sciatica is particularly frustrating to treat

with drugs because in many cases even strong painkillers bring little or no

relief. Patients with sciatica are significantly more likely to be prescribed opioids for their condition.<sup>3</sup>

However, relief may be obtained by injecting painkillers directly into the nerve roots! As with all painkillers, there is always a risk of drug dependency. In extreme cases orthopedic surgery may be resorted to.

For years medical doctors have prescribed bed rest for sciatica, yet there is little objective data to show it works. In fact there is increasing evidence that it is ineffective for low back pain as well as sciatica.<sup>4</sup>

## The Chiropractic Approach

Many sciatica sufferers have experienced dramatic relief after chiropractic care.<sup>5-6</sup> Many sufferers of sciatica and leg pain have found that chiropractic was superior to traction and pain injections, often saving them from spinal surgery.<sup>7-9</sup>

An interesting study of 44 workers with sciatic pain so severe they were hospitalized was performed in Norway. The hospital chiropractor performed adjustments and 91% returned to work full-time within an average of 21.1 days (others returned at reduced work levels). The average patient with sciatica is disabled for 72 days; in this study, the time to return to work was just 21 days—a 70% reduction.<sup>10</sup>

All sciatica sufferers should see a Doctor of Chiropractic. In a controlled study four different approaches (spinal care, traction and two types of injections) were used to deal with low back pain and sciatica. The group that had spinal care experienced the greatest

Your sciatic nerve is formed

from lower lumbar

nerves.

degrees of recovery. Interestingly, a large number in the traction group eventually required surgery.  $^{\rm 11}$ 

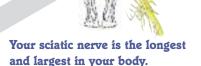
In another study 20 patients aged 20-65 with low back-related leg pain were divided into three groups that were given medical care, chiropractic care or steroid injections. After 12 weeks the medical and steroid injection groups showed no advantage over the safer, non-drug improvements the chiropractic patients experienced.<sup>12</sup> Chiropractic care appears to have the most effect on sciatica when used first. Unfortunately many people seek medical care first. Even so excellent results may be obtained with subsequent chiropractic care. In another study, 3,136 people with lower back and sciatica pain who had previously had physiotherapy and drugs with no positive results were given chiropractic care.

A follow-up two years later showed that 50.4% had excellent results with no painful relapses, 34.4% had relapses but then responded favorably after further chiropractic care and 15.2% showed no significant improvement.<sup>13</sup>

## **Neurogenic Claudication**

Another cause of leg pain involves damage to the spinal nerves that go to the legs. This condition is called neurogenic claudication. The sufferer can't walk for long periods of time and has to stop periodically and rest. Symptoms may include pain and parasthesias (nerve sensations) that commence after walking and disappear following a rest period. There may be cramping, pain, numbness, aching, and/or fatigue usually in the calf but also in the foot, thigh, hip or buttocks. Although





one way of dealing with this condition is surgery, spinal care should be tried first before medical and surgical techniques are resorted to.<sup>14</sup>

## **Conclusion**

All sciatica sufferers should see a doctor of chiropractic to ensure they have spines free from subluxations. A subluxation causes spinal misalignment, disc and nerve pressure and stresses the entire body. If you do have sciatica, from whatever cause, a chiropractic adjustment is needed to remove pressure on your nerves, rebalance your spine, take stress off your discs and permit your body's muscles, glands and tissues to function in a more balanced manner.

## References

1. Arana E et al. Relationship between low back pain, disability, MR imaging findings and health care provider. *Skeletal Radiology*. 2006;35(9):641-647.

Chiropractic adjustments help keep your spine off your nerves.