



1-800-636-3971

Prince George's County

October 2006

Spine Surgery? Get a Second Opinion

By James L. Holding, DC, CCSP,
Holding Chiropractic &
Sports Injury Center

The bones of the spine, the vertebrae, are separated by flexible discs that attach each vertebra to the next vertebra but allow the spine to bend and turn. The discs have a tough rubbery outside layer with a softer jelly-like center. When a disc gets injured, possibly by an accident, sports injury, long-term bad posture, or even just age, it can bulge out or even rupture spilling the soft center material into the surrounding areas. Since the spinal cord runs down the center of the spine with nerve bundles coming off of it at each vertebra, these bulging or ruptured discs can pinch the spinal cord or nerves and cause pain. In severe cases it is fairly clear that ruptured discs do cause pain, but oddly enough these discs don't always cause pain. New imaging methods (MRI, CT Scan, Etc.) have found bulging and even ruptured discs in people with no back pain at all.

Surgical fusion is a procedure that is intended to take the pressure off a

bulging or ruptured disc by fusing the vertebra above and below it together and then removing the excess disc material that was believed to be causing pain from the surrounding area. In the process you permanently lose the flexibility of the spine at that level, but if it reliably relieved back pain it might be worth it. Unfortunately, a study in 2004 found only 43% of such cases have acceptable results and only 26.6% had complete relief of their pain.¹ In another study, patients with chronic back pain and disc degeneration were either given spinal fusion or an exercise program and both groups had similar improvements after a year in all measures, with the exercise group doing slightly better.²

The rate of spine surgery varies widely between various regions of the country and that variability far exceeds other common surgical procedures according to a recent studies. Surgery for hip fractures has very little variation between regions of the country because there is general agreement about the need for surgery in cases of hip fracture. By comparison, variabil-

ity between regions for spine surgery was 7 times greater than surgery for hip fractures and for spine surgery with spinal fusion the variability was 13 times greater.³

The point of all this is, that recommendation for spine surgery and fusion surgery in particular may not be based on reliable outcomes or objective evidence as much as on local physician opinion which varies widely from region to region. Add to this that they have found the number of fusion surgeries more than doubled, increasing 137% between 1992 and 2001.⁴ Studies from as long ago as 1995 conclude that disc herniation is primarily a non-surgical condition.⁵

So, if you are told you need fusion surgery, at the very least get a second opinion. We suggest that before submitting to spine surgery with its very real risks, and in the case of fusion, loss of movement at the fused level(s), that you try conservative measures like chiropractic first. Chiropractic care together with exercise is wonderfully effective for chronic back pain and is far less expensive and carries far less risk than surgery.