



Understanding Sciatica

LOW-BACK PAIN CAN HAVE A MAJOR IMPACT ON YOUR FITNESS PROGRAM AND ABILITY TO PERFORM SIMPLE DAILY TASKS. WHILE MOST BACK PAIN IS SHORT-LIVED AND RESOLVED WITH MINIMAL INTERVENTION, MOST PEOPLE WOULD LIKE TO AVOID EXPERIENCING THE PAIN AGAIN. THE FIRST STEP IN PREVENTION IS KNOWING WHAT CAUSED YOUR BACK PAIN IN THE FIRST PLACE. IF YOUR PAIN WAS ASSOCIATED WITH A TINGLING DOWN ONE OF YOUR LEGS, YOU CAN BE FAIRLY CONFIDENT THAT YOU SUFFERED FROM SCIATICA.

SCIATICA BASICS

Sciatica results from irritation of the sciatic nerve. The sciatic nerve is the longest nerve in your body, running from your pelvis area to the back of your thighs, where it divides into two branches that course down to your feet. When the sciatic nerve gets compressed, you may feel back pain as well as pain or tingling in your legs or all the way down to your toes.

Sciatica most often results from a herniated disc (also known as slipped, ruptured, bulging or protruding disc). Discs are cushions between bony vertebrae. As people age, the discs lose strength, making a sudden twisting motion or back injury more likely to cause herniation. Poor biomechanics, curvature of the back, weak abdominal muscles or pregnancy also increase the risk for herniation. Spinal stenosis, or narrowing of the spinal canal, and spondyloisthesis, or slippage of a vertebral body in front of another vertebral body, can also cause sciatica.

While sciatica can be very painful, permanent nerve damage is rare. And fortunately, because the spinal cord does not extend through the lumbar (lower) spine, there is no danger of paralysis from a herniated disc in this area.

Note: If your symptoms include progressive weakness in the legs or bladder/bowel incontinence, this may indicate a serious condition called cauda equina syndrome that requires immediate medical attention.

SCIATICA

The best treatment for sciatica depends on the severity of the problem. If the pain is interfering with your ability to perform everyday tasks or if it lasts more than a week, you should see your doctor for a complete evaluation. Your doctor might order some tests to evaluate the source of your pain, prescribe you some prescription-strength pain medicine and/or give you a steroid injection at the site of inflammation. If your pain is particularly severe and prolonged, your doctor also may refer you to a surgeon to evaluate if surgery will provide you additional pain relief.

Most likely, your doctor might just recommend that you do the following:

- Apply heat (research suggests ice isn't as helpful) for 20 minutes every two hours, as needed.
- Relieve pain and inflammation with non-steroidal anti-inflammatory drugs (NSAIDs) like ibuprofen or aspirin as directed on the bottle.

- Maintain your regular levels of physical activity (but avoid what may have caused the back pain in the first place). Bed rest will not help relieve the pain.
- Begin a physical therapy program once your pain is adequately controlled so that you can learn how to prevent future injury.
- Do some passive lower-back stretches. This might help you feel better and relieve some of the nerve compression.
- If your pain is chronic (more than six weeks), a regular physical-activity program will help decrease the pain. It also improves your posture, strengthens your back, increases flexibility and helps with weight loss and fall prevention.

Sciatica is a painful annoyance that lasts for days for most people and months for others. Either way, it's a pain you surely don't want to experience again. Your local [ACE-certified Fitness Professional](#) can help you develop an exercise program to help manage current discomfort, and perhaps more importantly, prevent future pain.

ADDITIONAL RESOURCES

[Medline Plus](#)

[Mayo Clinic](#)