

Lumbar Microdiscectomy

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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What is a slipped disc?

A slipped disc is where the spongy centre of a disc bulges out and puts pressure on a nerve where it leaves your spine.

Each disc is made up of a tough fibrous outer coat with a soft spongy centre.

Eventually the spongy centre can bulge out and press on a nerve, or some of the spongy centre can squeeze out of the fibrous coat and press directly on a nerve. This is called a slipped disc and it can cause severe pain, as well as weakness and numbness in the area that the compressed nerve supplies.

What are the benefits of surgery?

The aim is to relieve the pressure on the nerve so it can recover. This should improve leg pain (sometimes called sciatica) and help you to get back to your normal activities.

Are there any alternatives to lumbar microdiscectomy?

For many people, symptoms get better without surgery. Treatment involves painkillers and rest, followed by an exercise programme. If you have a lot of pain, you can also have a steroid injection near the affected nerve into the epidural space (an area near your spine).

What will happen if I decide not to have the operation or the operation is delayed?

If you develop any of the following symptoms, contact your healthcare team.

- Reduced dexterity. Common symptoms are difficulty using cutlery, being unable to do up buttons or a change in your handwriting.
- Poor balance and increased falls especially when getting up from a seated position.
- New weakness.
- Increased pain.

What does the operation involve?

Various anaesthetic techniques are possible.

The operation usually takes between 1 and 2 hours. Your surgeon will make a cut on the centre of your back between the vertebrae. They will usually use an operating microscope or another magnification tool to make a hole in the ligament between the vertebrae to show the nerve and the disc. Your surgeon will hold the nerve out of the way and remove the disc.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health. Nicotine is known to prevent wounds from healing properly following back surgery, and increases the risk of unsightly scarring and chronic pain.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight. Being overweight puts unnecessary strain on your back.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you might need to reduce your risk of serious illness while you recover. When you come into hospital, practise social distancing and hand washing and wear a face covering when asked.

What complications can happen?

Some complications can be serious and can even cause death.

General complications of any operation

- Bleeding
- Infection of the surgical site (wound)
- Allergic reaction to the equipment, materials or medication
- Blood clot in your leg
- Blood clot in your lung
- Difficulty passing urine
- Chest infection

- Heart attack or stroke

Specific complications of this operation

- Worse pain or numbness down your leg
- Numbness between your legs, loss of normal bowel and bladder control and, for men, problems having an erection
- Neuropathic pain. This is a burning pain that may happen once the pressure on the nerves has been released
- Tear of the thin membrane that covers the nerves in your spine
- A disc herniation can reappear at some point in time after surgery

Consequences of this procedure

- Pain
- Unsightly scarring of your skin

How soon will I recover?

You may be able to go home the same day, however your doctor may recommend you stay in hospital for a little longer.

Keep your wound dry for 10 days.

Do not lift anything heavy or twist your body. Make sure you keep a good posture when sitting and walking, and regularly change your posture to avoid strain on your back.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Summary

A slipped disc is where the spongy centre of a disc bulges out and puts pressure on a nerve where it leaves your spine. The aim is to relieve the pressure on the nerve so it can recover.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

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