

Slip Disc Overview - Bombay Spine Clinic

- Slip Disc (Disc Herniation)

What Is It?

- A Slip Disc, also known as a Disc Herniation, Disc Prolapse or Herniated Disc, occurs when the soft inner portion of an intervertebral disc protrudes through its outer layer. This may irritate or compress nearby nerves, leading to pain, numbness or weakness.
- Despite the common term “slip disc,” the disc does not actually slip out of place. Rather, part of the disc bulges or herniates and may press on adjacent nerve structures.
- Slip discs most commonly occur in the lower back (Lumbar Spine) but can also affect the neck (Cervical Spine).
- Common Symptoms

Symptoms depend on the location and severity of nerve compression.

- Lumbar Slip Disc
- Patients may experience:
 - Low back pain
 - Pain radiating down the leg (Sciatica)
 - Tingling or numbness in the leg or foot
 - Burning or electric shock-like pain
 - Weakness in the leg or foot
 - Difficulty standing or walking for prolonged periods
 - Pain aggravated by coughing, sneezing or bending forward
- Cervical Slip Disc
- Patients may experience:
 - Neck pain
 - Pain radiating into the shoulder or arm
 - Tingling or numbness in the hand or fingers
 - Weakness in the arm or hand
 - Difficulty with fine hand movements

Causes & Risk Factors

- Common causes include:
 - Age-related disc degeneration

- Repetitive bending and lifting
- Sudden twisting movements
- Heavy physical work
- Poor posture
- Sedentary lifestyle
- Obesity
- Smoking
- Genetic predisposition
- Risk factors increase with advancing age due to gradual loss of disc hydration and elasticity.
- When Should You Seek Medical Advice?
- Medical evaluation is recommended if:
- Leg pain persists for more than a few days
- Pain radiates below the knee
- Tingling or numbness develops
- Weakness develops in the foot or leg
- Walking becomes difficult

Symptoms interfere with sleep or daily activities

- Seek Immediate Medical Attention If:
- Progressive weakness develops
- Foot drop occurs
- Difficulty walking worsens rapidly
- Loss of bladder or bowel control occurs
- Numbness develops around the groin or genital region
- These may indicate severe nerve compression requiring urgent assessment.
- How Is It Diagnosed?
- Clinical Examination
- A detailed history and neurological examination help identify the affected nerve and assess its severity.
- X-Ray
- May show age-related degeneration but cannot directly visualize the disc itself.
- MRI
- MRI is the investigation of choice and provides detailed information about:
- Disc herniation
- Nerve compression
- Spinal canal narrowing
- Associated spinal pathology
- CT Scan

- May occasionally be required when MRI is not possible.
- Blood Tests
- Generally not required unless infection or inflammatory conditions are suspected.

Treatment Options

- Non-Surgical Treatment
- Most patients with a slip disc improve without surgery.

Treatment may include:

- Activity modification
- Medications
- Physiotherapy
- Nerve mobilization exercises
- Core strengthening
- Posture correction
- Lifestyle modification
- Many disc herniations gradually shrink over time and symptoms improve with conservative management.
- Surgical Treatment
- Surgery may be considered when:
 - Severe leg pain persists despite treatment
 - Progressive neurological weakness develops
 - Foot drop occurs
 - Daily activities become significantly restricted
 - Bladder or bowel symptoms develop
- Common surgical procedures include:
 - Microdiscectomy
 - Endoscopic Discectomy
 - Minimally Invasive Discectomy
 - Cervical Discectomy (for cervical disc prolapse)
- The choice of procedure depends on the location and severity of the disc herniation.

Frequently Asked Questions

- 1. What is a slip disc?
- A slip disc occurs when part of the spinal disc bulges or herniates and may compress nearby nerves.
- 2. Does every slip disc require surgery?
- No. Most patients improve with non-surgical treatment.
- 3. Can a slip disc heal naturally?

- Yes. Many disc herniations reduce in size over time and symptoms improve with appropriate treatment.
- 4. Is bed rest recommended?
- Prolonged bed rest is generally discouraged. Early mobilisation is often beneficial.
- 5. What is Sciatica?
- Sciatica refers to pain radiating down the leg due to irritation of the sciatic nerve, commonly caused by a lumbar slip disc.
- 6. Can physiotherapy help?
- Yes. Physiotherapy is often an important part of recovery.
- 7. How do I know if my slip disc is serious?
- Progressive weakness, foot drop, walking difficulty or bladder/bowel symptoms require urgent medical attention.
- 8. Is endoscopic surgery an option?
- In selected patients, endoscopic spine surgery may provide effective treatment through a small incision.
- 9. How long does recovery take?

Recovery varies depending on severity, but many patients improve significantly within weeks to months.

- 10. Can a slip disc recur?
- Yes. Although many patients recover completely, recurrence can occur in some individuals.
- Related Conditions
- Sciatica
- Mechanical Low Back Pain (Lumbago)
- Lumbar Canal Stenosis
- Spondylolisthesis
- Cervical Spondylosis
- Myelopathy
- When Should You Consult a Spine Specialist?
- If you have persistent back pain, leg pain, numbness, weakness or symptoms affecting your daily activities, early evaluation by a spine specialist can help determine the cause and guide appropriate treatment.
- Need Expert Advice?
- Book a consultation with Dr. Siddharth Katkade or upload your MRI/report for review through our Patient Resource Centre.

Need Clinical Evaluation or Second Opinion?

This educational document was prepared by **Dr. Siddharth Katkade**. For appointments or to share MRI scan reports for clinical review, call **+91 88507 73095** or consult at Byculla (E) / Khar (W) clinics.