

# Degenerative Disk Disease

## Managing the pain

By Brian Beise

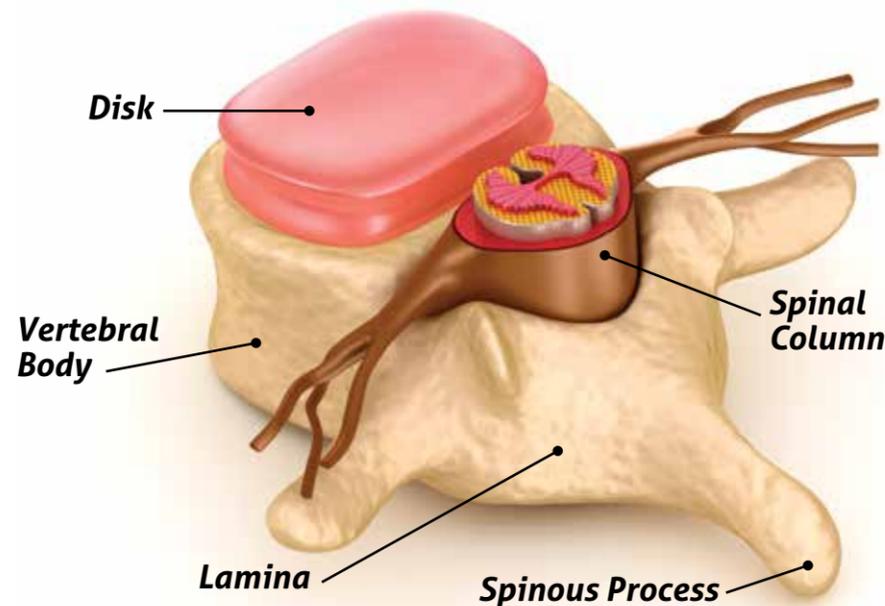
### EXPERT ADVICE

#### DDD

“Disc degeneration is a normal consequence of aging. It is uncommon before age 40 but common over age 50. By age 50, 85-95% of adults have some element of disc degeneration based on autopsy data. Additional influences are multifactorial and incompletely understood. Genetic factors are likely the greatest influence. Environmental factors involving physical loading such as: heavy lifting, postural loading, or vehicular vibration on a prolonged or repeated basis may also play a role. Cigarette smoking has also been associated with DDD.”



Michael Gallagher, M.D., Chattanooga Neurosurgery and Spine



#### What is DDD?

The term “degenerative disk disease” (DDD) can be misleading because DDD isn’t actually a disease. It’s a broad term used by radiologists and other doctors to describe the normal wear and tear (including dehydration, or drying out) of spinal disks as we age.

#### What are symptoms?

Often, there are no symptoms at all. However, if spinal disks continue to lose fluid and flexibility, they may start to “bulge” (herniate), putting pressure on the spinal cord and nerve roots which leads to pain and numbness. Or, they may flatten and lose their shock-absorbing properties, causing spinal instability and pain as the space between the vertebrae gets smaller.

Some people with DDD have no pain, and some have a great deal. Symptoms vary from

person to person depending on the affected disk’s location and degree of degeneration. An affected disk in the neck area may result in neck or arm pain, while an affected disk in the lower back may result in pain in the back, buttock, or leg.

#### How is it treated?

The majority (around 90%) of DDD cases can be resolved through some combination of physical therapy, rest, medication, and steroid treatment. Lower back exercises, proper ergonomics and posture, massage, and chiropractic manipulation can also help. In more severe cases—cases in which patients suffer from pain and/or disability—a doctor may recommend surgical intervention. Patients should then talk to a spine surgeon about what procedure is best for their specific issue. +

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