

Who Treats Prolapsed Lumbar Intervertebral Disc



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Introduction

Low back pain is common incident now days irrespective of age, sex, rural-urban dwelling, and rich-poor difference. It is affecting from farmer to service holder. Evidence suggests that 78% of car drivers reported LBP for at least one day during the past 12 months [1]. It is said that back pain is the third most common health problem reported by individuals after headache and tiredness [2]. I think every family has a back pain patient particularly who are aged though no age is immune. A recent community-based cross-sectional study showed that overall, the prevalence of low back pain was found to be 42%. The majority of women (60.9%) with low back pain experienced moderate disability [3]. So this is alarming indeed. Prolapsed Lumbar Intervertebral Disc is thought to be an important factor for low back pain. Usually when a person suffers from low back pain primarily he or she assumes that it will recover automatically or we can say he ignores it. Then he seeks suggestion from peer group or family member if it is not cured. In rural area most of the patients consult with local medical practitioner/traditional healer and usually get non-steroid anti-inflammatory drugs (NSAIDs) but it is only symptomatic treatment and underlying cause remains hidden or undiagnosed. Some conscious patients

consult with general practitioner (GP) and some patients directly go to specialist medical practitioner (orthopedics, neuromedicine/neurosurgeon, physiotherapists). There are several options for treating PLID patients such as painkillers, physical treatments (spinal manipulation). Surgery may be an option if the symptoms persist. In our country both orthopedic surgeon and neurosurgeon operate/deal PLID cases and sometimes patients become confused to whom he or she should consult. Though patients have independency but need clear cut guideline.

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