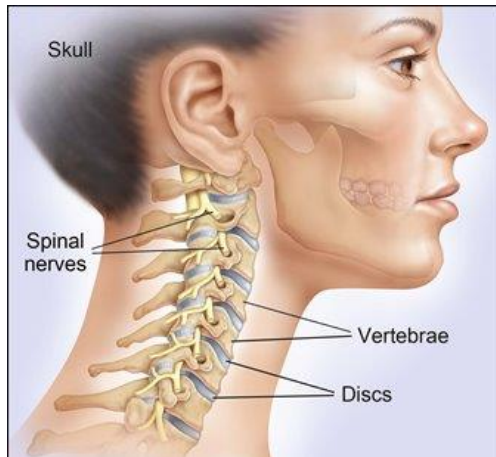
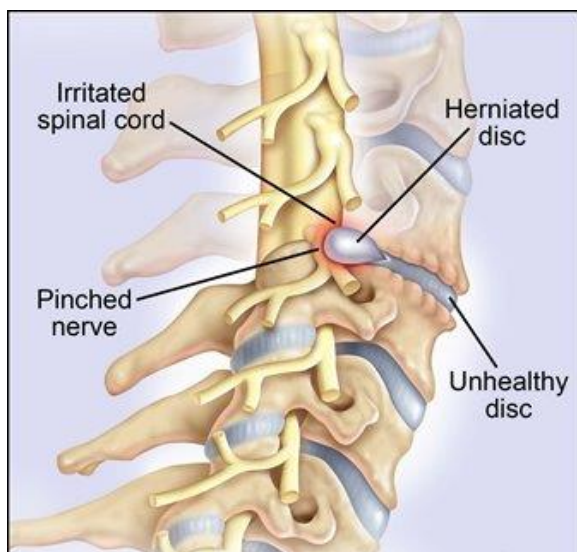


Cervical disc pain:

The cervical spine contains 7 collagenous discs in between the adjacent vertebral bodies. Each disc contains an inner nucleus pulposus surrounded by a tougher fibrous ring called the annulus fibrosus. The cervical discs give height to your spinal column, provide flexibility and act as cushions between the vertebral bodies.



The outer rim of the annulus fibrosus contains pain fibers. Therefore, a cervical disc can be a significant source of neck pain. Cervical disc pathology (disease) can present in several forms on imaging. **Degenerative disc disease** (internal disc disruption) **tears of the annulus fibrosus** and **disc herniations** are common forms of disc pathology that can cause pain. It is important to note that as we age all cervical discs undergo a normal aging process that can be observed on imaging studies. Some of these normal changes can be misinterpreted as pathology causing pain. It is important to not over-interpret all forms of degenerative changes noted on imaging studies. The clinicians at Buffalo spine and Sports Medicine can help correlate your pain syndrome with disc pathology and normal aged-related disc changes on imaging.



Patients with cervical disc pain may complain of centralized neck pain, unilateral neck pain, referred pain into the shoulder blade region, headaches, muscle spasms and tightness in the neck and shoulder girdle. If one of the cervical nerve roots adjacent to a cervical disc is irritated patients may complain of pain in one of the arms associated with numbness, tingling and even weakness in the arm or hand. Pain may be constant or intermittent. Symptoms are typically worse with end-range cervical extension, flexion, and rotation to one or both sides. It may be difficult to perform daily tasks, sit at a computer and even sleep when disc pain is severe.

Most patients with cervical disc pain can manage symptoms conservatively with over-the-counter anti-inflammatories (NSAIDs), analgesics (Tylenol), rest and specific exercises designed to restore normal cervical movement and lessen symptoms in the arms. Some patients may require oral steroids (Prednisone, Medrol), muscle relaxers, and in rare cases, a short course of opioids may be needed. You should consult one of our specialists if your symptoms do not seem to be improving.

When patients have symptoms in one or both arms consisting of pain, numbness/tingling this is called, "cervical radiculopathy." Radiculopathy is commonly associated with cervical disc herniations. If you have radiculopathy, you should see one of our clinicians to manage your symptoms and ensure you sensation and strength in the arm(s) is monitored. Sometimes patients will need a common procedure called a cervical epidural steroid injection to get control of their arm symptoms. Other patients may need to consider a surgical opinion.

