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NEWSLETTER

A radiculopathy, more commonly known as a pinched spinal nerve, can cause mild to disabling symptomology such as numbness, tingling, or pain. It is estimated that 3%-5% of the population has a lumbar radiculopathy. Low back pain may or may not be caused by a radiculopathy but is a leading cause of missed work, second only to upper respiratory illness. It is estimated that patients with chronic low back pain, which can be seen in radiculopathy, account for 80% to 90% of medical expenditure. Additionally, over 5 million people are disabled as a result of low back pain.

When low back pain is caused by a radiculopathy, symptoms may affect more than just the back with many patients reporting "shooting pains" in the gluteal region or even extending down to the foot. As such, a radiculopathy has the potential to be a very disabling disease and spinal injections or surgery may be warranted to correct the issue. If spinal injections fail to control symptoms, surgery to correct a radiculopathy caused by a disc protrusion which presses against a nerve root (pictured below) may be performed. Part of the disc may be removed to alleviate the pressure on the nerve in a discectomy or a segment of spinal vertebrae may be fused together to limit movement in an area where the nerve irritation is present.



MRIs and EMGs are diagnostic tools that can help guide the decision to seek treatment for a radiculopathy when used correctly. These tools can even help a patient avoid unnecessary surgeries like the ones described above. Radiculopathies are a serious cause of morbidity and an accurate diagnosis for the patient improves quality of life and facilitates a faster return to work. Accurate diagnoses also serve to improve efficiency of healthcare spending and can impact carrier bottom lines. **To learn more about how we can help you accurately diagnose radiculopathy, [have a sales representative contact you.](#)**

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