



Institute for Low Back and Neck Care

*Physicians dedicated to relieving pain
and improving function*



For any questions, please call your
physician's medical secretary at
952-814-6600.

Discography



Introduction

Sometimes a physician may recommend a diagnostic procedure called a “discogram”, which means “picture of the disc” or “discography” which means, “study of the disc”. This test may be necessary to learn more about the internal structure of the disc itself and its relationship to a patient’s symptoms.

The Intervertebral Discs

The intervertebral discs are the cushions that separate the vertebrae in the spine. Each disc is comprised of a firm outer ring called the annulus and the “jelly-like” center is called the nucleus.

Degenerative Disc Disease

This is a broad descriptive term used to describe wear and tear changes within a disc or discs. This can be hereditary or a result of the aging process to some degree. It may also be caused by trauma or repeated injury.

As a result, narrowing of the intervertebral disc space, abnormal spinal movement, and possibly spinal nerve root compression can occur. Degenerative disc disease is a common problem; however, it is not always painful.

The Purpose of Discography

Generally, in situations where history, physical examination, and other diagnostic studies suggest disc disease, this study can be helpful in determining if the disc(s) is the source of the pain. This study is reserved for patients who have not done well with traditional and conservative treatment and for whom the possibility of surgery or more invasive procedures are being considered because of the magnitude of persisting pain. It is also important to know the health status of the disc above or below the surgery, where there may be added stress, load and movement after surgery.

Expected Results

- Re-creation of painful symptoms if the disc tested is abnormal.
- Confirming a diagnosis and/or determining which disc(s) is the source of pain.

The Procedure

Prior to the procedure, an IV is placed in the arm for intravenous antibiotics and mild sedation over the course of the procedure. For lumbar discography, the patient is placed on the table laying face down with a pillow underneath the abdomen. For cervical discography, the patient is placed laying face up with a pillow under the neck. The skin is sterilely prepared. Using fluoroscopic (x-ray) guidance, the safest path into the appropriate disc(s) is determined. The skin is anesthetized and a thin needle is advanced under fluoroscopic guidance into the central portion of each disc to be tested. During the actual discogram, a small volume of contrast solution is injected into the disc to better determine the internal structure of the disc, as well as to pressurize the disc to levels that would be experienced in normal activities of daily living. This helps to determine whether or not the disc is actually causing pain. Each disc is tested individually. The results are recorded and used to plan treatment. Following the procedure, the patient is cared for in the recovery area for approximately 30-60 minutes.

Preparing for Discography

- **You should have no solid foods for 6 hours before your procedure.** You may have clear liquids up to 2 hours before your procedure. Example: water, broth, clear fruit juices such as apple, cranberry and grape juice. These juices should not include pulp. Tea, black coffee with no cream and carbonated beverages are also allowed. Please take your regular medications the day of your procedure, especially any **heart or blood pressure** medications. If you are on medication for **diabetes**, be sure to take it the day of the procedure. No gum for 2 hours before the procedure.
- While the procedure usually takes less than an hour, you will need to allow for at least 2-3 hours at the procedure center and for a possible CT scan.
- Please shower/bathe with antibacterial soap, if possible, the evening before the discography.
- You need to arrange for a driver to be present for the entire time you are at the facility. If you do not have a driver with you, your procedure may have to be rescheduled. If you use a taxi or volunteer ride service, you still must have a responsible adult with you in order to help take care of you after your sedation procedure.
- Be sure to let us know if you have any allergies as medications and dye will be administered before and during the procedure.

- If you are taking prescription blood thinners such as Coumadin (warfarin), Plavix (clopidogrel bisulfate) and Ticlid (ticlopidine), please inform your doctor’s medical secretary. These medications will need to be stopped before the procedure, but only after you receive permission from the doctor who is prescribing these medications.

Preparing for Discography continued

- Inform your doctor’s medical secretary if you are on high doses of aspirin (more than 2 per day).
- If you develop a fever, night sweats, or an active infection, your procedure will need to be rescheduled. Please contact our office at **952-814-6600** immediately to inform us of your change in condition.

After the Injection

Follow the specific instructions given to you by the nurses at the procedure center.

- A prescription for pain medication is often provided, as it is common to have a pain flare for a few days.
- Plan to rest for the remainder of the day. Resume activity as tolerated.
- For discomfort, apply ice packs to the area for 15 minutes several times a day.
- Do not soak in a tub for 24 hours after the procedure. You may take showers.
- Observe for any signs of infection including redness and warmth at the injection site, increasing pain, swelling, drainage, chills, night sweats, fever above 100° F. Report any signs of infection or other unusual symptoms.

Potential Risks of Discography

Increased pain and muscle spasms can occur after discography. This study is considered invasive and does have potential risks. These include, but are not limited to:

- There is a risk of infection in the disc. This is uncommon because strict sterile techniques are used in the procedure.
- There is a slight risk of nerve injury.
- There is a slight risk of bleeding.
- Allergic reactions to any of the medications or contrast dye used (be sure to inform us before the procedure if you have any known allergies).
- For cervical only: there is a slight risk of esophageal puncture.