IMAGES IN CLINICAL MEDICINE

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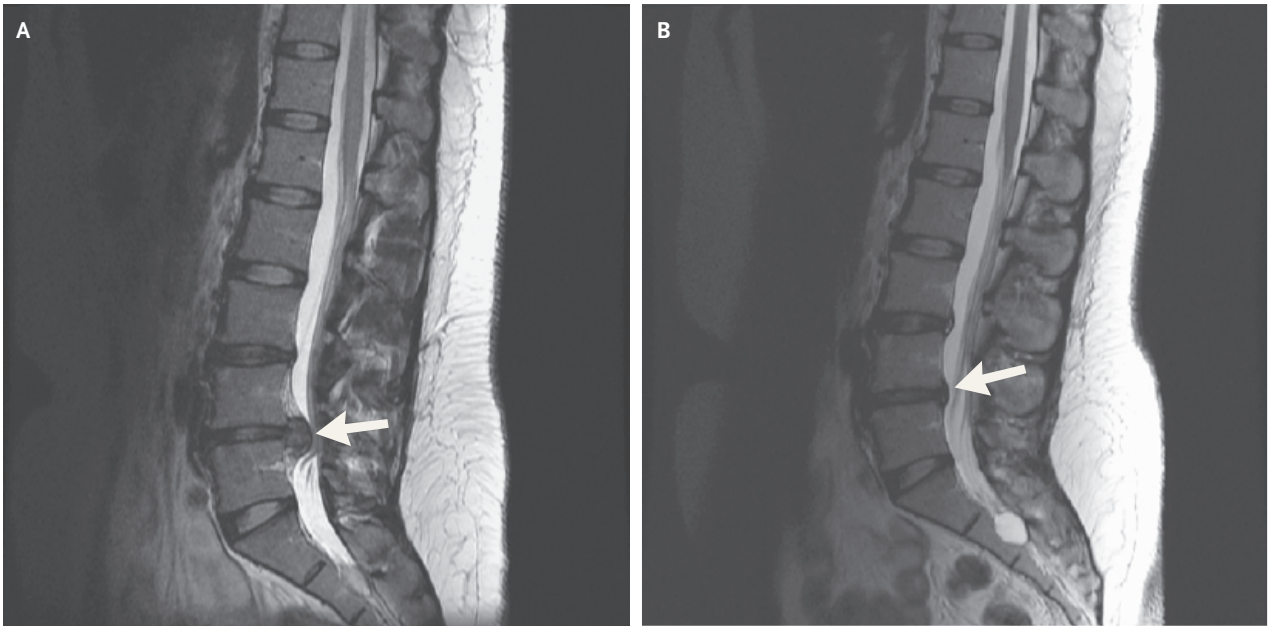
Resolution of Lumbar Disk Herniation without Surgery



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A 29-year-old woman presented to the spine clinic with new-onset pain in her right leg, accompanied by paresthesia. There were no bowel or bladder symptoms. Magnetic resonance imaging (MRI) of the lumbar spine revealed a lumbar disk herniation resulting in substantial spinal stenosis and nerve-root compression (Panel A, arrow). She elected conservative treatment with physical therapy and an epidural injection of glucocorticoids. A second MRI obtained at follow-up 5 months after presentation showed resolution of the herniation (Panel B, arrow). Lumbar disk herniation has an uncertain natural history. Data from clinical trials suggest that patients who have herniated lumbar disks have similar long-term outcomes whether they undergo surgery or elect conservative management. In addition, the risk of subsequent catastrophic worsening without surgery is minimal. This patient reported that she began to have back pain after playing volleyball several years before presentation, whereas the pain and paresthesia in her leg began 6 months earlier and were not associated with a precipitating event. Her clinical symptoms resolved, and she was discharged from the clinic, with follow-up recommended as needed.

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