

DIFFICULT PHYSICAL REHABILITATION IN A PATIENT WITH DISC HERNIATIONS AND MULTIPLE COMORBIDITIES

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Abstract

Introduction: One of the most frequent diseases of the century, disc herniation appears when degenerative processes occur on the intervertebral discs or by trauma, and can affect any segment of the spinal column.

Materials and methods: We present the case of a 50 years old patient, with disc herniations at C2-C3, L4-L5 and bilateral sciatic, vertebral compression and other health issues (high blood pressure, dyslipidemia, obliterative arteriopathy, chronic bronchitis, histiocytosis X). The patient came for cervical pain radiating on both arms, with symmetrical paresthesia, low back pain radiating on the sciatic nerve territory and limitation of the spine movements. Para-clinical investigations included usual blood tests, right shoulder X-ray, cervical and lumbar spine X-rays. Also, we completed the investigations with cervical and lumbar MRI.

Results: Considering the mechanical type of pain and the para-clinical findings, we initiated symptomatic treatment using NSAI, paracetamol and also specific treatment for his other diseases.

Because of the numerous comorbidities, such as distal sensitive neuropathy, obliterative arteriopathy and the ischemic heart disease with severe angina, the physical rehabilitation proved to be difficult to endure. In spite of his several rehabilitation procedures, there were no improvements but an aggravation of the patient's symptoms during the kinesio-therapy and physiotherapy sessions.

Conclusions: Although in the mechanical affectation of the spine, physical rehabilitation can lead to major improvements in the quality of life, the results depend on the patient's other diseases. Also, the level of education and motivation to improve his condition can be important factors. In this case, physiatry didn't rise to the expected outcome.

Considering his plethora of diagnostics and the fact that analgesics in high doses had a limited effect on his symptoms, we consider that the best treatment in this case involves a good balance between medication, personalized rehabilitation procedures and also educational and psychological counseling.