

Discography

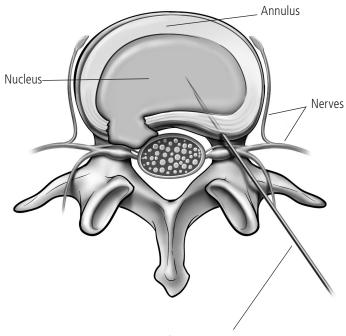
What is it?

Discography is a procedure used to diagnose whether your neck or back pain is caused by damaged discs in your spine. A doctor injects x-ray dye into several discs to see whether one or more discs are leaking and causing pain. As each disc is injected, you report to your doctor whether you feel pain, and the type and severity of any pain. These descriptions help your doctor diagnose the source of pain.

Why do I need it?

The **vertebrae** (bones) in your spine are separated by discs that cushion the vertebrae and allow them to move freely. If a disc is damaged, it can develop small tears in the outer ring **(annulus)**. Material from the inside **(nucleus)** can then leak out and irritate the surrounding nerves. This sometimes causes pain in your back or neck.

While other tests can show if a disc is torn, they often can't show whether the torn disc is the cause of your pain. Discography can help your doctor know more about where the pain is coming from. This helps your doctor know whether you need surgery, and which discs might need it.



Dye from the needle shows a tear that allows material from the nucleus to leak through the annulus and irritate the nerves.

Potential benefits	Risks and potential complications	Alternatives
 Can diagnose whether your pain is caused by material leaking from torn spinal disc(s) Can result in a more precise plan for disc surgery, or identify whether disc surgery is not required Does not require hospital stay 	 Infection of the disc space (fewer than 1 in 400 cases). Despite using antibiotics and careful sterile techniques, there is a small risk of developing an infection in an injected disc. This will be treated with additional antibiotics. Persistent or increased pain. Because the procedure triggers pain to help diagnose its source, you may have increased pain for a time. Allergic reaction or skin irritation. Rarely, patients are allergic to the injected x-ray dye. Others can experience redness or itching at the injection sites. Nerve complications. In very rare cases, the procedure can result in nerve root irritation or injury, or in injection of dye into the sac surrounding the spinal cord. This could result in numbness, pain, or neurological changes. 	Discography is usually used after other diagnostic tests. These tests include: • Physical examination • X-rays, MRI, CT scans Your doctor may also recommend doing surgery without first doing discography.

How do I prepare?

- **Food and drink**. You should not eat solid food after midnight the night before the procedure.
- Medication list. Bring a list of all your current medications with you to the hospital. This includes over-the-counter medications and vitamins. You may be asked to stop taking blood thinning medication, such as Coumadin.
- Current medical condition. You may need to fill out some paperwork, including a consent form. Be sure to tell your doctor about any history of allergic reaction to medications or x-ray dye, any medical conditions such as diabetes, and any infection that may be at the injection site.

What happens during discography?

The discography procedure takes 30 to 60 minutes, and you will be awake and able to communicate the entire time. Your procedure will include the following:

- Monitoring. You may have monitoring devices attached to you to check your heart rate and breathing.
- **Sedative**. You may be given a sedative to help you relax.
- **Local anesthetic.** You'll be given a local anesthetic near the injection site to numb the skin.
- **Injection**. For each injection, a needle will be inserted into the disc and inject x-ray dye.
- Fluoroscopic (x-ray) guidance. Fluoroscopic x-rays will be used to make sure the needle is in the best position. They will also be used to identify whether x-ray dye leaks out of the disc.
- Pain description. For each disc injected, you will be asked to describe your pain. A damaged disc will cause temporary pain when injected. It is important to describe the pain where it is, how strong it is, and if it feels like the pain you've been experiencing. Your descriptions for each injection will help the doctor identify which disc or discs are the source of your pain.
- **CT scan.** When the injections are finished, a computed tomography (CT) scan may be used to get a more detailed picture of whether discs are leaking x-ray dye and how much.

What happens after?

- You may stay in a recovery area and have your vital signs (heart rate, blood pressure, breathing rate) monitored.
- You should be able to walk after the procedure, and you will most likely be able to go home that day.

Going home

- **Driving home**. You will not be allowed to drive yourself home. Someone needs to drive you home. Don't drive at all on the day of the procedure. Your doctor will likely allow you to resume driving the next day.
- **Possible side effects.** Your pain may increase briefly, but should go away in the first few days.
- **Activity.** You should take it easy for a day or two after the procedure. Resume activity if you feel up to it, but avoid activities that strain your back.
- Pain relief. For the first day or so, you may want to use ice on the injected area for 20 to 30 minutes at a time but be careful not to apply ice to bare skin. If the IV site is painful, place warm towels on it for 20 minutes several times a day.
- Returning to work. After looking at your test results, your doctor will tell you when you can return to work.
- Follow up for results. Your doctor will use the
 discography results, along with other tests, to recommend
 a treatment plan. Be sure to follow up with your doctor as
 instructed to discuss the results.

When to call the doctor

Contact your doctor if:

- You see signs of infection at the injection site, such as increasing redness or warmth.
- You have increasing pain after the procedure that is not relieved by pain medication.

Other notes:			