

If conservative treatment is not effective, the next step is often an epidural steroid injection. During this treatment, a doctor at our office will slide a needle down near the pinched nerve and squirt “cortisone” and numbing medicine near the nerve. This may reduce the swelling and the symptoms may resolve.

If epidural steroid injections are not effective, some people need to have neck surgery. Sometimes this is the only way to relieve pressure on the nerve and prevent permanent nerve damage. There are times, however, when referral to a spine surgeon is indicated early in the course of your treatment and, as stated earlier, your neuromuscular expert will work with your regular doctors to determine this.



*We hope that this information is helpful in understanding your condition and possible further testing and treatment.*

## NECK, SPINE

### Cervical Radiculopathy- QUICK OVERVIEW

#### What is Cervical Radiculopathy?

- A pinched nerve in the neck

#### Symptoms:

- Pain in the neck and down the arm
- Weakness of certain muscles
- Shoulder blade pain
- Numbness
- Tingling

#### Treatment:

- Non-Surgical
  - Cervical traction
  - Anti-inflammatory medications
  - Soft neck collar
  - Physical therapy
  - Spinal injections with cortisone
- Surgery may be necessary in severe cases

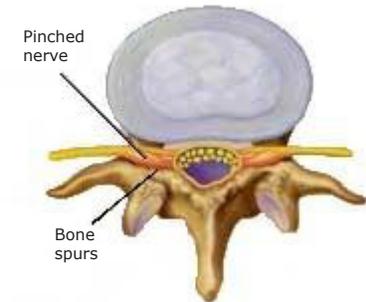


**NEUROMUSCULAR  
& REHABILITATION**  
ASSOCIATES OF NORTHERN MICHIGAN

3988 West Royal Drive Traverse City, MI 49684  
231.935.0860 phone 231.935.0930 fax  
800.770.8109 toll free tc-rehab.com

## Cervical Radiculopathy

(Pinched nerve in the neck)



RICHARD D. BALL, M.D. JAY H. JONES, M.D.  
JAMES R. MACKENZIE, M.D. J.A. GRONEK, M.D.  
STEPHEN J. ANDRIESE, M.D. JAMES C. FRICK, P.A.-C  
KIMBERLY B. AUGENSTEIN, M.D.

Physical Medicine • Rehabilitation • Electromyography • Interventional Pain

## PATIENT EDUCATION SERIES

Written by Jay Jones, M.D.



## Your Neuromuscular Specialist Has Diagnosed A Cervical Radiculopathy

In laymans terms, you have a pinched nerve in your neck.

### Causes Of A Pinched Nerve In The Neck

There are two main causes of a pinched nerve in your neck. If you are less than 50, chances are your pinched nerve is due to a herniated disc. The disc is a shock absorber between the bones in your neck. It is like a jelly donut. When you get to be about 18 years old, the disc starts to dry out. Sometimes the “jelly” squirts out of the side of the donut and presses on a nerve as it exits your spinal canal. The “jelly” can also chemically irritate your nerve. This results in swelling of the nerve root.

If you are 50 or older, chances are you have a bone spur that has pinched the nerve or mechanically irritated the nerve. Again, this causes swelling of the nerve as it exits the canal.



### Diagnosis

Diagnosis can be made by your neuromuscular specialist in the following ways:

- By asking you questions and examining you.
- By performing an EMG test on the nerves and muscles in the affected limb.
- By an MRI or CT/myelogram.

The MRI or CT/myelogram answers the question “Is something pressing on a nerve like a disc or a bone spur?”. The EMG answers the question “Okay, if something is pressing on the nerve, is it causing any “nerve damage”?”. We use the term “nerve damage” carefully since many people assume nerve damage is permanent. At the nerve root level, it is not permanent and the body can heal the nerve in most cases.

You may or may not need an EMG or MRI depending on the severity of your symptoms, your current activity tolerance, and the length of time it has been since the onset of symptoms.

Your neuromuscular specialist will work with your regular doctors to determine what testing and treatment is indicated.

### Treatment

There are three categories for treatment of a pinched nerve in the neck depending, again, on how long symptoms have been going on. The severity of the pain, numbness and weakness and results of EMG or MRI testing.

The most conservative treatment is medicines, immobilization and physical therapy with emphasis on traction.



Medicines could include anti-inflammatory medicines like Motrin or prednisone. Analgesics such as Tylenol, Ultram or in some cases narcotic pain relievers may need to be used short term. There are certain anti-depressants and anti-seizure medicines that also help with nerve pain and these may be prescribed temporarily as well.

You may be asked to wear a soft neck collar to prevent your head from moving in directions that would pinch the nerve more. A physical therapist can gently stretch the neck and use heat or cold to loosen muscle spasm. Neck traction eases the neck bones upwards to decrease the pressure on your nerve root and help the healing process.