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Choosing Back Surgery: Two Patients' Stories

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Patients must carefully consider the decision to undergo [back surgery](#). The spine is a difficult and delicate place to operate and surgeons are only sometimes able to lessen pain and improve movement, which is why doctors strongly recommend patients seek a [second opinion](#) before making a choice. Two patients share their stories about their decision to go under the knife.



The spine is a tricky place to operate, and surgery is not always successful. (ISTOCKPHOTO)

A fortunate discovery

Andrea Kramer, from Montgomery Village, Md., opted for surgery after living with nine years of pain from a herniated disk in her lower back. Physical therapy and Lidocaine patches had given her some relief, but finally she begged her doctor to refer her to a surgeon. "I'd always resisted surgery. But the pain was awful. It felt like a knife was being put in my back."

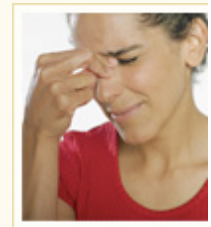
Make a Good Decision About Back Surgery



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The surgeon gave Kramer low odds on the surgery succeeding. "It was like 85 to 15—85 that it would not cure the pain, and 15, or maybe 20, that it would," says Kramer.

There may be a number of reasons why a back operation is not successful. The nerve may not be

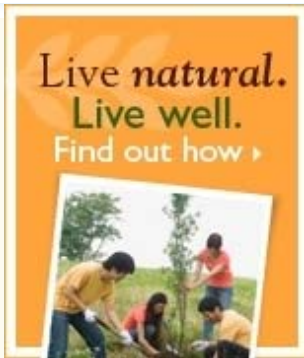


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[fibromyalgia](#)—which reduced her chances of success further.

Desperate, she went ahead, and it turned out to be a lucky choice: The gel in her disk had calcified, creating a sharp spur that, left in place, might soon have sliced her spinal cord.

"The surgeon said he was going to use a spoon to scoop out the gel and instead he had to go find a pick to actually stab away at the bone. The calcification could have paralyzed me from the waist down, so it was a blessing in disguise to have the surgery," says Kramer.

Though surgery only decreased Kramer's pain by one-tenth, avoiding paralysis was definitive proof that she made the right decision.

fully decompressed after surgery, or the surgery itself could cause nerve damage. There can also be scar tissue or permanent loss of flexibility, and degenerative disk pain can always return. In Kramer's case, she suffered from complicating factors—reflex sympathetic dystrophy and

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