

News of Health

Artificial Discs May Provide Back Pain Relief

(NAPSA)—Mechelle Baker was working in a meat market unloading trucks. As she was pulling a pallet of meat out, the pallet got stuck, and as she tugged the pallet, she felt a pain in her back.

“Immediately, it wasn’t that bad,” she says. “After about a day or two, I couldn’t stand up straight. The back pain got worse, and then the pain went to both my legs. At work they tried to let me just do some things where I sat and handled the telephone. But then the pain was so severe I just had to completely stay home.”

Baker tried steroid injections, but they didn’t help.

“Our children had to stay with relatives because I couldn’t care for them,” she explains. “We lost our house because I couldn’t work. I kept thinking, ‘Am I always going to be like this?’ I was terrified I’d never be able to do anything without pain again.”

Finally, Baker elected to participate in a clinical trial involving the possible placement of an artificial disc. The clinical trial was just beginning, and there was evidence from the European experience that it was considered safe. Neurosurgeon Guy O. Danielson III, MD, a spine surgery pioneer with NeuroCare Network in Tyler, Texas, was the first surgeon in the U.S. to be chosen for the trials.

Baker received an artificial disc called PRODISC, and had gratifying improvement in her pain. “In a few days I was on my feet,” she says. “A week to the day after I had the surgery, my husband and one of my daughters took me shopping.”

Doctors in the trials predict that the artificial discs will most likely be recommended for physically active patients under 50.

While fusing the vertebrae has



Dr. Guy O. Danielson, III, MD prepares to operate using the revolutionary new artificial disc, PRODISC.

been the best available option for patients with certain back problems, the procedure does restrict mobility and can transfer stress to the surrounding vertebrae. Because the design of the artificial disc allows greater movement—in contrast to the stiffness of a fusion—it might ease the strain on surrounding discs and prevent further back trouble.

“Most patients with back pain can be treated with rest or conservative treatment, including pain medication and exercise,” explains Dr. Danielson. “Lumbar fusion is considered to treat severe chronic pain in which deteriorating discs cause pain.”

For more information on the PRODISC clinical trials, visit www.neurocare.org and click on “Artificial Disc Replacement.”