

WHEN TO HAVE AN MRI

Question: I have low back pain that radiates into my leg. My chiropractor wants me to get an MRI, but this will cost me several hundred dollars. Do you think I should do this?

Answer: MRI is an excellent diagnostic tool for looking at your spine. It is the gold standard test for looking at disc herniations that may be compressing the nerve into your leg.

MRI stands for Magnetic Resonance Image. You are placed in a tube which creates a magnetic field. You must lay still for up to 45 minutes to get good images.

You can not have an MRI if you have certain types of metal in you body. This include shrapnel, vascular clips, brain clips, cochlear implants, insulin pumps, heart valves or heart pacemaker. If you have already had back surgery and have screws, rods or cages, you can still have an MRI.

Some patients are claustrophobic and can not lay in a small tube. There are now open MRI's that almost everyone can tolerate. It is controversial whether the open MRI obtains as clear as picture as the closed MRI.

MRI is excellent for detecting infections, tumors, scar tissue, easily-missed fractures, disc injury, pinched nerves and looking at the spinal cord.

When should you get an MRI? This depends on how your back pain began and how long ago. If you have significant trauma, such as a car accident, you need an MRI sooner rather than later.

However, many people develop low back and leg pain gradually or with simply lifting something too heavy. In this case, it may be best to wait until later to have an MRI and see if you improve with conservative care. This includes chiropractic care, physical therapy or medication per your medical doctor.

Your body is capable of healing a disc injury without having surgery. Having an MRI too early may push you into a surgery sooner than needed. Most doctors agree that only 5-10% of those with leg pain require disc surgery.

It is reasonable for you to wait 4-6 weeks to see how you improve. Some insurance companies want you to wait up to 12 weeks before allowing this test. This is too long to wait if you are not improving.

There are red flags that tell you to get the test now. This includes progressive weakness or numbness in one or both legs. Other red flags include back or leg

pain combined with fever, chills, weight loss, history of cancer or recent infection (especially urinary tract infection).

Cauda Equina Syndrome is a serious condition that requires immediate attention. The nerves in your low back that operate your bowel and bladder are compressed, resulting in a loss of control of either or both systems. You may also have numbness in your seat as if sitting on a saddle. Without surgery you may have permanent loss of bowel or bladder control.

One of the most important features of an MRI is proper interpretation of those results. The MRI findings need to "clinically correlate" with your back and leg pain. For example, the MRI may show a disc compressing the left nerve, but your pain is in the right leg. The MRI findings do not fit your symptoms and surgery to the left side of your spine would not be helpful.

Therefore, an MRI may reveal all sorts of things wrong with your back, none of which may be causing your pain.

Trying chiropractic care for 4-6 weeks makes sense before rushing into unnecessary testing and more invasive treatment, such as injections and surgery. If no better, now it's time for the MRI.

Copyright © 2008 - Konicki Schumacher Chiropractic. All rights reserved.

Dr. Tom Konicki is a board certified chiropractic orthopedist and has practiced for 17 years in South Dayton. You can reach him at www.kschiro.com or mail your questions to Ask the Chiropractor, 2165 Miamisburg-Centerville Road, Dayton, Ohio 45459.