

The Herniated Disc Healing Guide

What they are...

why they happen...

and how to recover fast!

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What Exactly Is a Herniated Disc?

The funny thing is, the medical community still hasn't standardized the term for this common spinal condition. So, if you've been told you have a herniated disc, a slipped disc, a prolapsed disc, a bulging disc, a ruptured disc, or even degenerative disc disease, it's essentially the same thing. The terminology depends on who you're asking.

Spinal discs are soft cushions found between the vertebrae that make up the spinal column (your backbone). In the middle of the spinal column is the spinal canal, a hollow space that contains the spinal cord. The nerves that supply the arms, legs, and torso come from the spinal cord.

The nerves from the neck supply the arms and hands, and the nerves from the low back supply the butt and legs. It's the discs between the vertebrae that allow your back to move freely. They also serve as shock absorbers while you walk and perform other activities.

The disc itself is made up of two main sections. The outer part, called the annulus, is made up of tough cartilage that is comprised of a series of rings. The center of the disc is a jelly-like substance called the nucleus pulposus.

A disc herniates, or ruptures, when part of the jelly center pushes through the outer wall of the disc into the spinal canal, and puts pressure on the nerves. A disc bulge is when the jelly substance pushes the outer wall but doesn't completely break through the wall.

Technically, a herniated disc occurs when the outermost part of the disc begins to weaken and the inner soft part starts to press outward. Most people don't even know they have a herniated disc until the herniation touches a nerve.

And, yes, you can have a herniated disc and not have pain. By some accounts based on MRI studies, 60% or more of adults *without pain* have herniated or bulging discs.¹ That's why as little as a 1mm movement may make the difference between no pain and agonizing pain. That's why, even if you don't have back pain now, this guide may be very useful aid in *preventing pain*.



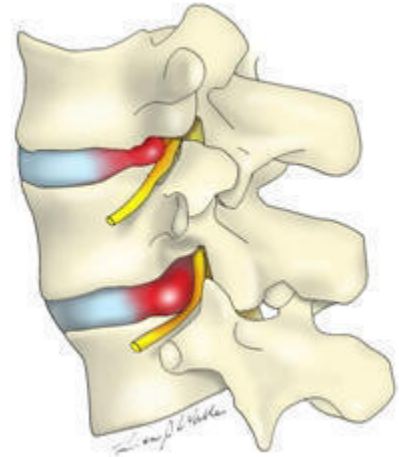
¹ Jensen MC, et al. Magnetic Resonance Imaging of the Lumbar Spine in People without Back Pain. New England Journal of Medicine. 1994 Jul 14; 331:69-73.

Herniated Disc Symptoms

Herniated discs are a common source of back pain. However, symptoms alone are not enough to diagnose a herniated disc.

Your medical history is key to a proper diagnosis. A physical examination can usually determine which nerve roots are affected and how seriously. A simple x-ray may show evidence of disc or degenerative spine changes. An MRI (magnetic resonance imaging) is usually the most accurate (and most expensive) testing option to determine which disc has herniated.

Pain and other symptoms from a herniated disc can vary widely from one person to the next. Complaints range from local pain to radiating pain. Depending on where the herniation is, you may experience arm pain or leg pain in addition to back pain.



One of the most common set of symptoms associated with a herniated disc is sciatica.

Contrary to popular opinion, sciatica is actually a set of symptoms and not a condition in and of itself. When a herniated disc presses on the sciatic nerve it often leads to one or more of these symptoms:

- Sharp, shooting pain starting in the buttocks that travels down the back of one leg
- Numbness and tingling in one leg (pins & needles)
- A burning pain centered in the lower back
- Back pain with gradually increasing leg pain
- Weakness in one leg or both legs
- Loss of bladder or bowel control

While these are the most common symptoms of the condition, keep in mind that you may experience multiple symptoms from a herniated disc... or even none at all.

IMPORTANT: Loss of bowel or bladder control or weakness in both legs at the same time should be considered a medical emergency. Seek immediate attention.

Your Three Step Recovery Plan

Fixing a bulging or herniated disc means different things to different people. Usually it either means a) help me stop my back pain, or b) help me fix the herniated disc. The end result may be the same but the perspective is critical.

If you simply want to mask the back pain you could take one of the many non-steroidal anti-inflammatory drugs, get repeated cortisone shots, or beg your doctor for another pharmaceutical drug alternative. While you might reach the perceived goal of ending back pain, you of course have not addressed the real problem.

On the other hand, if you choose to fix a herniated disc by actually treating the underlying cause as well as the symptoms you'll have a greater likelihood of both ending the pain and preventing its recurrence. That's what our three step recovery plan helps you accomplish.

Step 1 Identify the Cause

First, understand that outside of cases of trauma a herniated disc does not occur overnight. It may seem like you "threw your back out" all at once, yet it was a process of weakening over time that allowed your disc to suddenly become noticeably problematic.

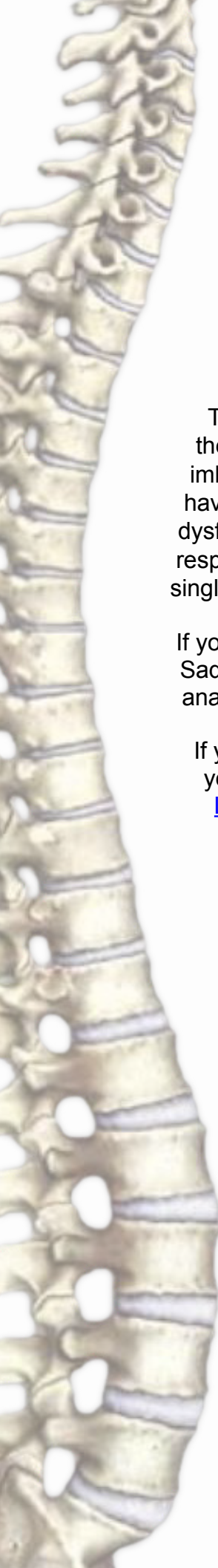
Many people have a herniated disc without pain. It's only when the bulging disc or inner material from a herniated disc press against a nerve that pain results.

Discs are primarily composed of water. As we become older (after the age of 30), the water content decreases, so the discs begin to shrink and lose their shape. When the disc becomes smaller the space between the vertebrae decreases and become narrower. Also, as the disc loses water content the disc itself becomes less flexible.

While aging, excess weight, improper lifting and the decrease in water in the discs all contribute to the breaking down of discs, the primary cause of a herniation or bulge is uneven compression and torsion that's placed on the discs.



*Lasting back pain relief made simple as
1...2...3...*



This uneven pressure is caused by imbalances in muscles that pull the spine out of its normal position. This forces your body to function with what I call a physical dysfunction. Every human being develops these dysfunctions over time and eventually they cause enough damage to create pain if left uncorrected.

The first step to recovery is identifying the dysfunctions you have and the muscle imbalances which created them. We have found that there are four primary dysfunctions that are either directly responsible for, or contribute to, nearly every single case of back pain or sciatica.

If you've never heard of muscle imbalances before it may not be your doctor's fault. Sadly, most healthcare professionals have never been taught the basic human anatomical and biomechanical approach used for identifying muscle imbalances.

If your healthcare provider is not familiar with muscle imbalances you can identify them yourself by performing a series of self assessments such as those taught in our [Lose the Back Pain System](#).

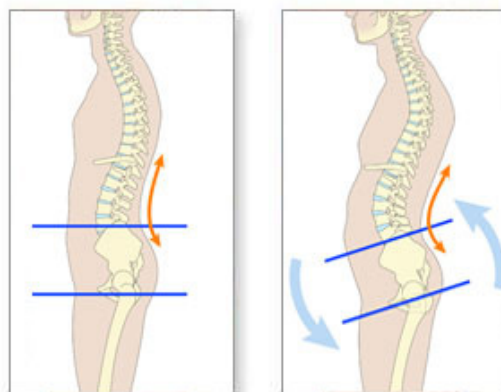
Once you've identified your dysfunctions and imbalances, then it's time for step two.

Step 2 Treat the Symptoms

You can't correct the problem if your pain is so severe you can't move. So in this step you'll implement various strategies to help reduce and manage your pain so you can focus on correcting the dysfunction(s) that are responsible for your pain.

The jelly centers of your spinal discs are roughly 70% water. Gravity squeezes water out of these discs throughout the day as you go about your regular activities. That's how you can lose as much as $\frac{3}{4}$ of an inch in height by the end of the day. Perhaps you've noticed as you re-adjust your rear view mirror before driving home from work. It's also this thinning of your spinal discs that might lead to more pain late in the day.

While you sleep most of this fluid gets soaked back into your discs. But if you're dehydrated or don't get enough sleep your spinal discs aren't able to fully recover. So one of the easiest things you can do as you start treating a herniated disc – or even to help avoid one – is to drink plenty of water (not soda, coffee, etc.) and regularly get a good night's sleep.



Physical dysfunctions caused by muscle imbalances force your body into unnatural positions leading to painful conditions such as a herniated disc



Many people turn to medicine, especially non-steroidal anti-inflammatory drugs (NSAIDs) like ibuprofen and naproxen at the first sign of pain. While inflammation almost certainly plays a role in your pain, there are significant health risks in taking them.

A better strategy is to cut back on inflammatory foods such as sugar, dairy, fried or processed foods. Introduce more fresh fruits and vegetables into your diet. And again, water should be your beverage of choice when working through pain.

You can also supplement with [proteolytic systemic enzymes](#) which actively reduce inflammation throughout your body and help your body recover from injury. While systemic enzymes won't directly cure a herniated disc, they will help reduce inflammation easing pain and making recovery much easier.

When pain flares up, a local topical ointment can offer quick pain relief. Our favorite is [Rub-On-Relief](#) which combines the all-natural pain reliever Arnica proven as powerful as prescription anti-inflammatories with MSM, menthol and other powerful ingredients for fast pain relief and actual healing power.

Finally, and we've truly saved the best symptom treatment for last when it comes to herniated discs, is spinal decompression. The reason it works so well is it relieves the pressure your vertebrae place on your spinal discs.

This reduced pressure gives a herniated disc room to return back to its normal position. Sometimes a herniated disc will suddenly recover from spinal decompression alone.

Once pressure on the disc is reduced it can reabsorb lost fluid to properly cushion your spine. More importantly for your symptoms of pain, once the herniated disc recovers enough to no longer touch surrounding nerves it'll immediately relieve your pain.

Spinal decompression doesn't require a huge machine in a doctor's office with thousands of dollars in payments. Two of the most effective decompression devices run only a fraction of that – and then you can have them at home to use whenever needed.

The time-tested [inversion table](#) not only works gently by using gravity itself to release pressure, one study by Newcastle University even found 70% of patients using them were healed enough to cancel their scheduled back surgeries.²

² Manjunath P, et al. Inversion therapy in patients with pure single level discogenic disease: a pilot randomised trial. 2006. Newcastle University.

Death by NSAIDs (nonsteroidal anti-inflammatory drugs)

"On average, 1 in 1,200 patients taking NSAIDs for at least two months will die from gastrointestinal complications who would not have died had they not taken NSAIDs."¹

Risk of Dying from Using NSAIDs More than Two Months **1 in 1,200**

Gastrointestinal bleeding and perforation are not the only potential hazards of NSAID use. The AHCPR guidelines warn that "high doses of acetaminophen (a NSAID) can lead to liver damage, and massive single doses sometimes lead to fatal hepatic necrosis."² Eight to 10 percent of the 50,000 annual kidney failures in the United States are caused by acetaminophen.³

1. Tramer MR, Moore RA, Reynolds DJM, McQuay HJ. Quantitative estimation of rare adverse events which follow a biological progression: a new model applied to chronic NSAID use. *Pain* 2000;85:169-182.
2. Biggs S, Bowyer G, Breen G, et al. Acute Low Back Problems in Adults. *Clinical Practice Guidelines*, No. 14. AHCPR Publication No. 95-0042. Rockville, MD: Agency for Health Care Policy and Research, U.S. Department of Health and Human Services, December 1994.
3. Parmer TV, Whelton PK, Klag MJ. Risk of kidney failure associated with the use of acetaminophen, aspirin, and nonsteroidal anti-inflammatory drugs. *N Engl J Med* 1994;331:1675-1678.



Another excellent device for decompression of the lower and middle spine is the Nubax® Trio. This device is incredibly easy to use and can provide even more decompression force than an inversion table, though it won't help herniated discs in the upper spine and neck.

We provided a video review and comparison of inversion tables and the Nubax on our blog awhile back along with Pros & Cons for both. To view that video [click here](#).



Uneven pressure on a disc can cause the jelly-like center to rupture through the outer disc wall

Step 3 Treat the Cause and Condition

Herniated discs are primarily caused by uneven pressure. Think of driving a car that's out of alignment. The tires wear unevenly due to more pressure on one edge than the other. Keep driving without fixing the problem and sooner or later you'll experience a blowout on the worn side.

The effect of postural dysfunctions on spinal discs is similar. Uneven pressure caused by muscle imbalances cause the less-pressured side of the disc to bulge or rupture, squirting the jellylike interior through the fibrous disc membrane into the spinal column. Picture stomping one end of a jelly donut – the jelly would be pushed out the other side.

Even if a treatment like spinal decompression helps you, if you don't take care of the problem that caused your disc to rupture it's just like replacing that blown out tire while leaving your car's alignment uncorrected.

That means getting lasting pain relief requires correcting the postural dysfunctions that are putting pressure on your discs. Correcting those dysfunctions requires eliminating the muscle imbalances that caused them.

Treating the herniated disc – and the underlying cause – with [muscle balance therapy](#) is the best way to recover and remain pain free. Muscle balance therapy identifies which sets of muscles are imbalanced: where one muscle is extra tight and overpowers the opposing muscle which becomes weak and stretched out.

Specific stretches to relax the overly tight muscles combined with targeted exercise of weak stretched out muscles restores the natural balance of tension between them. Once that balance is restored the muscles will maintain your spine in proper alignment allowing your herniated disc to heal – and stay healed.

One of our customers said it best, "Bones only go where our muscles put them." Get your muscles right and the rest will follow.



How to Get Lasting Pain Relief When Nothing Else Works

Have you been dealing with chronic back pain or sciatica from a herniated disc for months... or even years? Does it seem like you'll never find lasting relief?

Well here's some good news for you: you're not beyond help. Over the past decade we've helped tens of thousands of people, many in agonizing daily pain, find relief from their pain. People who thought there was no hope left. And today, thousands upon thousands of them remain pain free.

On the other hand, there are many others who came to us who did not find lasting relief. They continue to struggle with the same old pain year after year. Often it grows even worse.

Amazingly, in almost every case, the difference between those who found pain relief and those who did not boils down to a willingness to follow a few simple "ground rules" for dealing with pain. Follow these three simple rules and you'll greatly improve your odds of joining those who find relief.

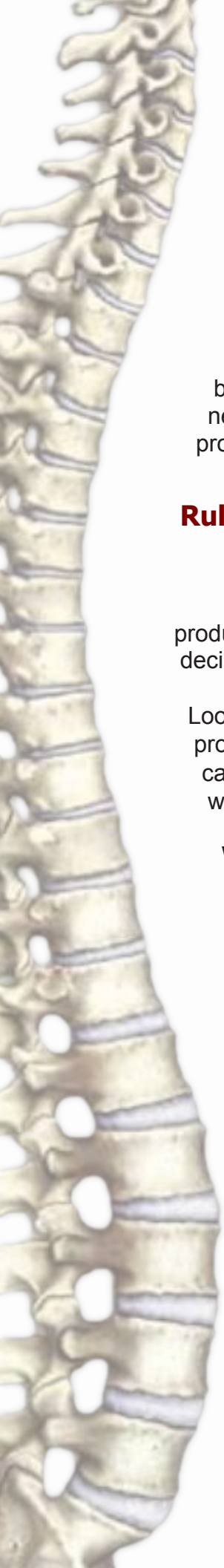


Yes, even you can get relief from your back pain

Rule # 1 Take responsibility for ending your pain

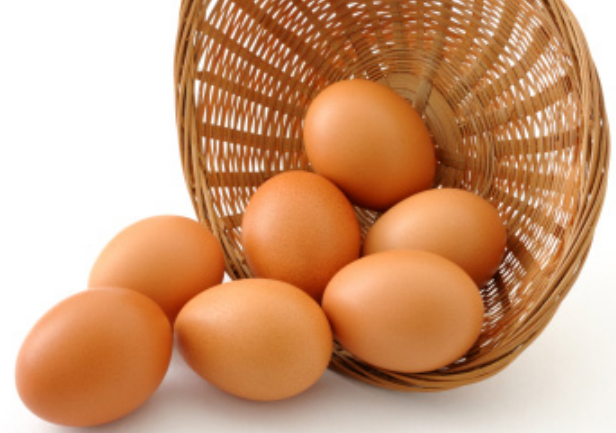
Relief from pain is first and foremost a personal responsibility. After all, no one cares about your pain more than you do. Maybe you're seeing a doctor, chiropractor or any number of natural health practitioners. That's great, but ask yourself these questions:

- Has my health care provider conducted a complete head-to-toe assessment on me or only focused on the area of pain? (Pain is often referred from other areas of the body.)
- If a diagnosis has been made, has it been completely explained *to my understanding*?
- Has my health care provider identified the *root cause* of my pain? (Not a condition, like a herniated disc, but what *actually caused the condition*, like a specific muscle imbalance.)



- Have I been given a step-by-step care plan that addresses both the pain symptoms and the underlying root cause of the identified condition?

If you haven't received a satisfactory answer to all of these questions, ask! Don't accept a brush off. It's your body and you need to get the right responses to properly address your pain.



Be careful of putting all your hopes for pain relief in any single treatment

Rule # 2 Don't put all your eggs in one basket

I can't tell you how many times someone has purchased one of our products, tried it, and when their pain wasn't 100% gone in the first day or week they decided to return the product for a refund.

Look, we don't want anyone paying for a product that doesn't help them. And we gladly process refunds all the time. But let's be honest here. Chances are the condition causing your pain didn't happen overnight. It may have taken years to get to the point where your back "suddenly" gave out and pain became noticeable.

We have a lot of testimonials on our website from people who have experienced amazing results in just days. But when you're talking about correcting conditions that took months or years to get as bad as they are, you have to realize some people may take a little longer to work through the healing process.

So what am I saying? I'm saying that if you want to get back to a pain-free life, you might have to invest a little effort. And it might be that one treatment only gets you part of the way there. So you have to be willing to try different approaches. For example, you may only find some pain relief by using [muscle balance therapy](#) to address muscle imbalances, but need to also work out trigger points to finally get the full pain relief you're looking for.

Most importantly, don't give up. Too many people never get pain relief simply because they give up on a treatment approach too soon. Give your body time to heal and don't quit until you get the relief you're looking for.

Rule # 3 Stop doing what doesn't work

Ok, now you've made the commitment to follow through to make progress in your fight against pain. You're not going to quit on yourself. But here's the other side of the coin: don't blindly keep doing what doesn't work.

Let's say you're going to a chiropractor. If you've been going for over three months and haven't made any progress yet, it's likely time to seek another approach. That's my rule of thumb... if you're not getting some measure of increased pain relief in three months, try something else.

If you have made progress but are still in pain, try combining multiple approaches. You might find [inversion therapy](#) gives you significant pain relief from a herniated disc, but [trigger point therapy](#) is needed to completely end referred pain while muscle balance therapy addresses what caused your disc to herniate in the first place. It's all a process of finding what works for your body.

I hope this makes sense to you. We want to help as many people as we can live a pain free life, but ultimately, it's up to you to make the necessary changes to improve your health. Don't give up and a life free of pain can be yours.



Additional Resources

Lose the Back Pain System

Guaranteed to make a difference in your back pain by helping you identify and eliminate the muscle imbalances and related postural dysfunctions which lead to herniated discs.

[Click here to learn more](#)



Inversion Therapy

Inversion therapy has been proven to help back pain sufferers for over 2,000 years. Using gravity to gently decompress the spine, inversion tables provide instant relief from painful pressure on your spinal discs.

[Click here to learn more](#)



Nubax® Trio

The Nubax takes spinal decompression to a whole new level. Simply kneel into the Nubax Trio, clip on the waist belt, and lean forward for an immediate pain-relieving lower back stretch.

[Click here to learn more](#)



Rub On Relief

Simply rub it on and muscle pain vanishes. By getting rid of pain caused by tight muscles you'll more easily work through muscle imbalances and get the lasting relief you're looking for.

[Click here to learn more](#)



Praise for Our Lose the Back Pain System

"I have to say - I've been dealing with Back Pain for over 30 years now. I have 4 issues going on. Without all the fancy terms - I have an "S" curved spine, a slipped vertebrae (class 2) a bulging disc - lower back and some stenosis.



Carole Gardner

I've had a bad time with Sciatica, hip, butt, leg and low back pain - and 3 surgeons, (2 orthopedic and one neurosurgeon) are all just dying to get a hold of me. They all say I need surgery - but thanks to your information and stretches and good advice regarding muscle imbalances - I'm not having surgery. I am almost pain free, and some days I am totally pain free. My abilities totally defy my MRI films! Because of you I've made a lot of changes - including the inversion therapy and I want to thank you for keeping me out of surgery. I talk to people every week at the pool who have had surgeries and regret it.

I'm thankful that I don't have to be one of them. With all the doctors, surgeons, specialists, chiropractors, physical therapists I've seen over these many years - you would think they could have told me some of these simple things - but it took you guys - making it understandable and easy to do.

Over the years I've been in casts and braces which only served to make my muscles weak, I've been given wrong advice on exercises to do, I've paid for adjustments which actually made things worse and more. I really want to Thank you for all the down to earth - plain good information.

It's the best I've ever seen. I now understand what is going on with my body and what is causing the pain. The fusion surgery that's recommended to me has an 18 month recovery period, many risks and not much hope really for total relief of the back pain. I sure would much rather spend some time learning from your information, relaxing on an inversion table, doing some simple exercises and stretches and eliminating some of the things I was doing wrong - in order to live my life - free from the hassle, pain, expense, sheer dread of having a major surgery.

I don't understand why some people just won't catch on to this - maybe they think a Doctor will just "fix" them and that's the easy answer - but going that route doesn't make sense to me at all - unless it's absolutely necessary and you've exhausted all other options.

Again. Thank You!!! You guys have even returned my calls when I had questions - I'm amazed at your level of service and dedication and what you have given me for so little cost. I would have to spend tons of money on surgery and therapy otherwise. I am a real person and I'd be more than happy to tell anyone my story."

Carole Gardner



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www.JoeyAtlas.com