

Iraqi Sample's Sciatica

Hazim Abdul Rahman Alhiti *

General Surgeon Specialist Al-Ramadi Teaching Hospital.

***Corresponding Author:** Hazim Abdul Rahman Alhiti, General Surgeon Specialist Al-Ramadi Teaching Hospital.

Received date: July 24, 2023; **Accepted date:** August 11, 2023; **Published date:** December 04, 2023

Citation: Rahman Alhiti HA, (2023), Iraqi Sample's Sciatica, *J. General Medicine and Clinical Practice*. 6(7); DOI:10.31579/2639-4162/110

Copyright: © 2023, Hazim Abdul Rahman Alhiti. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

Sciatica is a common medical problem. This is a documentation of sciatica in an Iraqi sample. In this prospective cross-sectional study of 581 Iraqi patients who had acute lower backache from both genders, over 21 months (2017-2019), after informed patient/family consent in Heet General Hospital. After a full assessment, the author utilized the "Back Pain Visual Analogue Scale", and excluded Diabetes mellitus & renal stones. Of 581 Iraqi patients who had sciatica 287 were women (49.3 %), and 294 were men (50.7 %). The peak age was (20-39) years old, 85 were men (14.8 %), 69 were women (11.8 %). Sciatica was reported left-sided in 191 patients (32.8 %), 180 patients (30.9 %) had right-sided, but 210 patients had bilateral (36.1 %). Sciatica is common in both genders of Iraqi people, more in adult men, left sided lumbar sciatica is common. What is known: Sciatica is a common medical problem in many societies. What is new: Sciatica is common in both genders of Iraqi people, more in adult men, left sided lumbar sciatica is common.

Key Words: sciatica; backache; iraq; sample; heet

Introduction

Sciatica is a type of nerve pain that radiates along the path of the sciatic nerve, which runs from the lower back down through the hips, buttocks, and legs. It is typically caused by compression or irritation of the sciatic nerve due to a herniated disc, bone spur, or spinal stenosis. Symptoms of sciatica may include pain, numbness, tingling, or weakness in the affected leg or foot, and it can affect one or both sides of the body. 1 Sciatica might adversely affect the quality of life. The pain and discomfort can make it difficult to perform everyday tasks such as walking, sitting, and standing, which can lead to decreased mobility, productivity, and overall well-being. Chronic sciatica can also lead to muscle weakness, imbalance, and eventually a loss of muscle mass. In severe cases, sciatica can cause bladder or bowel dysfunction, which requires immediate medical attention. Therefore, it is essential to properly manage and treat sciatica to prevent further complications and improve the quality of life. 2 Sciatica attacks many adults in any population. The incidence of sciatica varies widely depending on factors such as age and occupation. According to a systematic review and meta-analysis published in the European Journal of Pain, the incidence of sciatica in the general population ranges from 2.2 to 10.2 cases per 1,000 person-years. The prevalence of sciatica also varies depending on the definition and criteria used to diagnose the condition. However, estimates suggest that up to 40% of adults may experience sciatica at some point in their lives. Sciatica is more common in adults, certain occupations and lifestyle factors that involve prolonged sitting, physical labor, or heavy lifting may increase the risk of developing sciatica. 3 There are only fourteen articles on the "Iraqi Academic Scientific Journals" website as it is the main

Iraqi academic website concerning sciatica. The author chooses this topic to cover some aspects of the sciatica information in the Iraqi library in Al Anbar Provenance. This is a documentation of sciatica in an Iraqi sample.

Patients and Method:

In this prospective cross-sectional study of 581 Iraqi patients who had acute lower backache from both genders, over 21 months (2017-2019), after informed patient/family consent. The patients came to the outpatient consultation room in Heet General Hospital. The author took the essential history & related examination then did laboratory and radiological investigation accordingly. The author utilized the "Back Pain Visual Analogue Scale", and excluded Diabetes mellitus & renal stones. He utilized Excel 2016 file for information arrangement.

Results

Of 581 Iraqi patients who had sciatica 287 were women (49.3 %), and 294 were men (50.7 %). The peak age was (20-39) years old, 85 were men (14.8 %), 69 were women (11.8 %). Sciatica was reported left-sided in 191 patients (32.8 %), 180 patients (30.9 %) had right-sided, but 210 patients had bilateral (36.1 %). Acute Sciatica occurred in 378 patients (65 %), while 203 patients had chronic, recurrent Sciatica (34.9 %). Cervical radiculopathy occurred in 69 patients (11.8 %), whereas 496 lumbar Sciatica (86.4 %). Twelve cases were operated on (1.6 %).

Age (years)	Men	Women	Total
Less than 19	19 (3 %)	25 (4 %)	44 (7 %)
20-29	87 (14.9 %)	58 (9.9 %)	145 (24.9 %)
30-39	85 (14.8 %)	69 (11.8 %)	154 (26.5 %)
40-49	62 (10.6 %)	58 (9.9 %)	120 (20.6 %)
50-59	24 (4 %)	55 (9.4 %)	79 (13.5 %)
60-69	11 (1.8 %)	19 (3 %)	30 (5.1 %)
Older than 70	6 (1 %)	3 (0.5 %)	9 (1.5 %)
Total	294 (50.7 %)	287 (49.3 %)	581 (100 %)

Table 1: Distribution of patients who had sciatica according to their age & gender. N= 581.

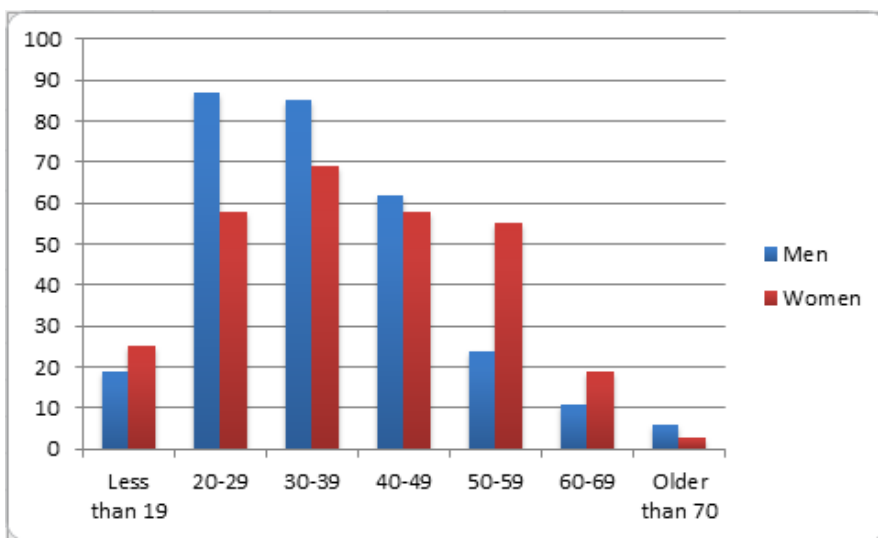


Figure 1: Distribution of patients who had sciatica according to their age & gender. N= 581.

	Men	Women	Total
Right	82 (14.1 %)	98 (16.8 %)	180 (30.9 %)
Left	99 (17 %)	92 (15.8 %)	191 (32.8 %)
Bilateral	113 (19.4 %)	97 (16.7 %)	210 (36.1 %)
Total	294 (50.7 %)	287(49.3 %)	581 (100 %)

Table 2: Distribution of side of sciatica in the suffered patients according to their age & gender. N= 581.

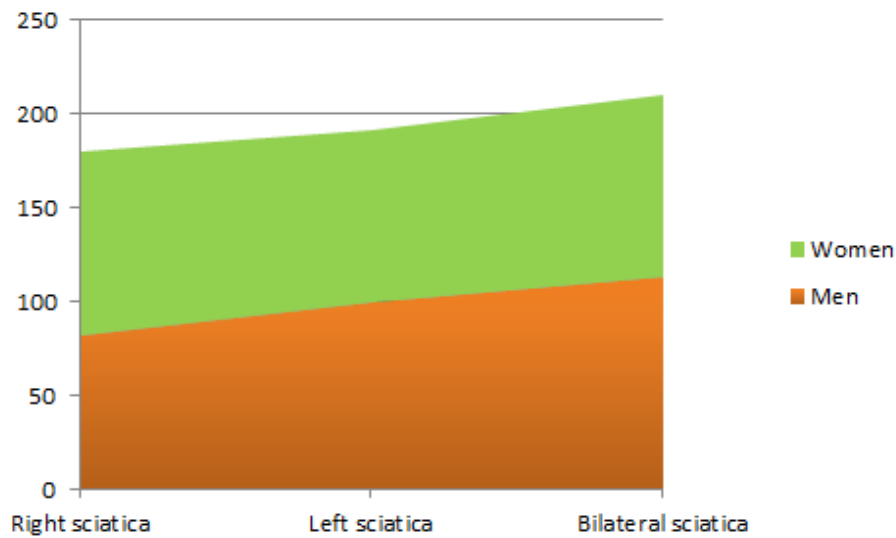


Figure 2: Distribution of side of sciatica in the suffered patients according to their age & gender. N= 581.

	Men	Women	Total
Acute onset	208 (35.8 %)	170 (29.2 %)	378 (65 %)
Chronic & Recurrent	86 (14.8 %)	117 (19.7 %)	203 (34.9 %)
Total	294 (50.7 %)	287 (49.3 %)	581 (100 %)

Table 3: Distribution of time of onset of sciatica in the suffered patients according to their age & gender. N= 581.

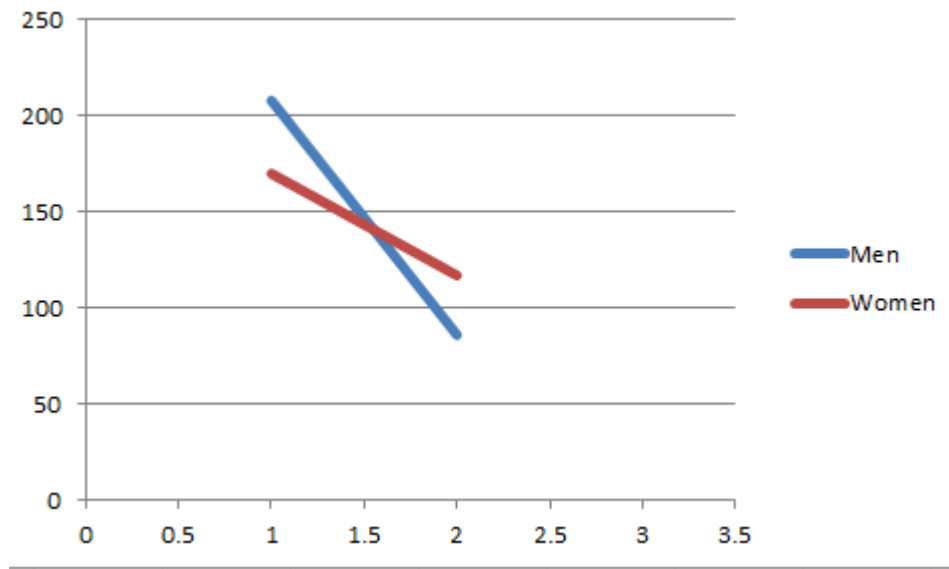


Figure 3: Distribution of time of onset of sciatica in the suffered patients according to their age & gender. N= 581.

	Men	Women	Total
Cervical pain	29 (5 %)	40 (6.8 %)	69 (11.8 %)
Lumbar pain	260 (44.7 %)	242 (41.6 %)	502 (86.4 %)
Operated on	5 (0.8 %)	5 (0.8 %)	10 (1.6 %)
Total	294 (50.7 %)	287 (49.3 %)	581 (100 %)

Table 4: Distribution of site of sciatica in the suffered patients according to their age & gender. N= 581.

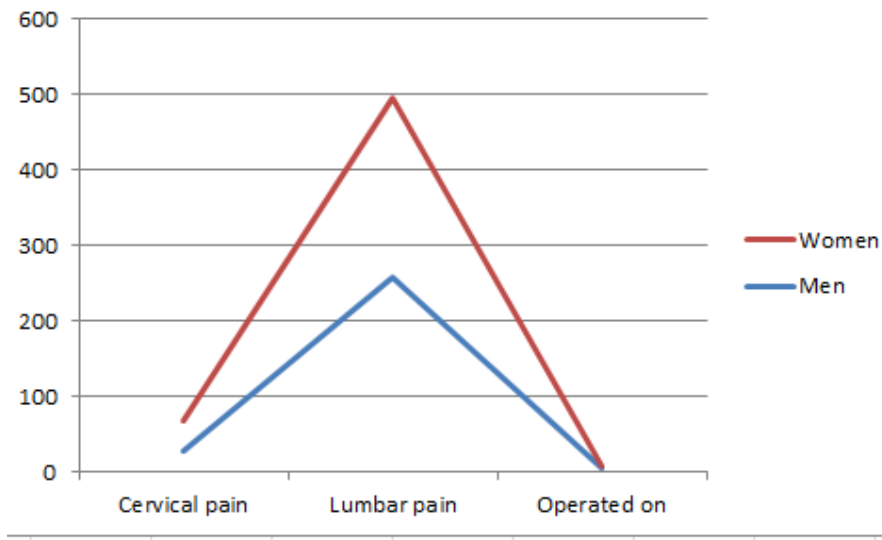


Figure 4: Distribution of site of sciatica in the suffered patients according to their age & gender. N= 581.

Discussion:

Sciatica is a type of nerve pain that radiates along the path of the sciatic nerve, which runs from the lower back down through the hips, buttocks, and legs. It is typically caused by compression or irritation of the sciatic nerve due to a herniated disc, bone spur, or spinal stenosis. This is a documentation of sciatica in an Iraqi sample. So, the author arranged this prospective cross-sectional study of 581 Iraqi patients who had acute lower backache from both genders, over 21 months (2017-2019), after informed patient/family consent in Heet General Hospital. After a full assessment, the author utilized the "Back Pain Visual Analogue Scale", and excluded Diabetes mellitus & renal stones. [4] The author chooses sciatica as an important topic. Sciatica is a common medical condition that affects the sciatic nerve, the longest nerve in the body that runs from the lower back and down through the legs. Sciatica can cause pain, numbness, and weakness in the affected leg and can be caused by various factors such as a herniated disc, spinal stenosis, or degenerative disc disease. 5

Table 1 and Figure 1 showed the age groups of Iraqi patients from both genders.

Men were the most common, as 294 patients were men (50.7 %), this outcome might be due to the type of work the Iraqi men frequently did. This finding is not correlated with the national fact as women are the main sufferers. 6 Still, this study showed that 287 were women (49.3 %), this finding is nearly parallel to the male sufferers due to the limited sample. Hence, Iraqi women had hard work in their homes, especially in the rural areas. Iraqi government developed many tactics to enhance healthcare measures like in the developed nations 7, 8, 9 Also, the reader can notice that men were the commonest among middle-aged adults, while in the younger groups and the oldest groups, women were the dominants. This result

is expected as adults are the most active age group in any society, and this result goes with the national studies. Sciatica can occur in adults of all age groups, but it is more common in adults due to factors such as injury, obesity, or occupations that require extensive sitting or standing. [10]

Table 2 and Figure 2 express that sciatica was reported left-sided in 191 patients (32.8 %). This significant outcome denotes the disturbance of forces in the affected small joints of the spine, type of work, and dominance of the leg in the victims. Moreover, 180 patients (30.9 %) had right-sided sciatica, but 210 patients had bilateral (36.1 %). Sciatica typically affects one side of the body, although it is possible to experience bilateral (both sides) sciatica. The pain and other symptoms of sciatica are usually felt in the lower back

and buttock area and can radiate down the back of the leg and into the foot. The exact distribution and intensity of the pain can vary depending on the location of the nerve irritation or compression. In addition to pain, other common symptoms of sciatica include numbness, tingling, and weakness in the affected leg. The side of the body affected by sciatica depends on which sciatic nerve (left or right) is being affected by the underlying condition or injury. [11, 12] From

(65 %), which is an expected finding as acute sciatica is the most common presentation, either as a new case or an acute on-chronic presentation. Acute sciatica refers to a sudden onset of symptoms associated with compression or irritation of the sciatic nerve. The symptoms of acute sciatica can be severe and debilitating and can include shooting pain, numbness, tingling, and weakness in one or both legs. Acute sciatica can be caused by a variety of factors, including a herniated disc, spinal stenosis, or trauma to the lower back. 13, 14 The other outcome from this table is 203 patients had chronic, recurrent Sciatica (34.9 %), this result is more common in the elderly age group from hard work or osteoarthritic changes. Chronic sciatica refers to a long-term or persistent condition where there is ongoing irritation or compression of the sciatic nerve. Chronic sciatica can be the result of a number of underlying conditions, including degenerative disc disease, spinal stenosis, or arthritis. The symptoms of chronic sciatica may vary in intensity but often include persistent pain, numbness, tingling, and weakness in the affected leg. Chronic sciatica can significantly impact your daily life, making it difficult to stand, walk, or sit for extended periods of time. Treatment for chronic sciatica often involves a combination of pain management strategies, such as physical therapy, medication, and exercise. In some cases, more invasive options such as spinal injections or surgery may be necessary to provide relief. [15]

(11.8 %), this finding denotes the type of activity they habituated, mostly clerck lifestyle in those victims. Those victims mostly were elderly. This result goes well with the worldwide papers. Cervical sciatica, also known as cervical radiculopathy, is a condition that occurs when there is compression or irritation of the nerve roots that exit the spinal cord in the neck region. This can cause pain, numbness, tingling, or weakness in the arms, shoulders, or hands. Cervical sciatica is less common than lumbar (lower back) sciatica but can be just as debilitating. There are several conditions that can cause cervical sciatica, including herniated discs, degenerative disc disease, or spinal stenosis. Injury or trauma to the neck can also be a contributing factor. Treatment for cervical sciatica typically involves a combination of pain management strategies, such as physical therapy to strengthen the neck muscles, medication to manage pain and inflammation, and injections to

reduce swelling. 16 There were 496 lumbar Sciatica (86.4 %), this outcome is expected as it resembles the weight-bearing activities, mostly men, which may be due to their hard activities. Lumbar sciatica, also known as lumbar radiculopathy, is a condition that occurs when there is compression or irritation of the nerve roots that exit the spinal cord in the lower back region. This can cause pain, numbness, tingling, or weakness in the lower back, buttocks, legs, or feet. Lumbar sciatica is a common condition that can be caused by a variety of underlying conditions, including a herniated disc, degenerative disc disease, spinal stenosis, or spondylolisthesis. The symptoms of lumbar sciatica may vary in intensity and may be triggered by movements such as bending, twisting, or lifting. Treatment for lumbar sciatica typically involves a combination of pain management strategies, such as physical therapy to improve flexibility and strengthen the muscles of the lower back, medication to manage pain and inflammation, and injections to reduce swelling. In more severe cases, surgery may be necessary to relieve the pressure on the affected nerve root. [17] Twelve cases were operated on (1.6 %), this result indicates that the intent of the Iraqi patient was not favorite surgery (discectomy), fearing its complication. discectomy is a surgical procedure used to remove all or part of a herniated or ruptured disc in the spine. The disc is a cushion located between each vertebra in the spine, and when it becomes damaged or ruptured, it can cause pain and nerve compression. During a discectomy, the surgeon makes an incision in the back and removes the damaged portion of the disc, relieving pressure on the surrounding nerves. Depending on the size and location of the herniated or ruptured disc, the procedure can be performed as an open surgery or a minimally invasive procedure. After the procedure, patients may experience some pain and swelling around the surgical site, but most are able to return to their normal activities within several weeks. Physical therapy may also be recommended to help the patient gain strength and mobility in the back and surrounding areas. [18]

Conclusions: Sciatica is common in both genders of Iraqi people, more in adult men, left sided lumbar sciatica is commoner, need to be in (Back Clinic) as it is an important concern.

References:

- Jensen R. (2019). Diagnosis and treatment of sciatica. *BMJ*. 367:l6273.
- Gadjradj P. (2022). Sciatica: predicting who would undergo surgery and who not. *J Spine Surg*. 8(4):406-408.
- Shiri R. (2019). Risk Factors for Low Back Pain: A Population-Based Longitudinal Study. *Arthritis Care Res (Hoboken)*. 71:290-299.
- Shafshak T. (2021). The Visual Analogue Scale Versus Numerical Rating Scale in Measuring Pain Severity and Predicting Disability in Low Back Pain. *J Clin Rheumatol*. 27:282-285.
- Ter Meulen B. (2021). Diagnosis and Treatment of Sciatica in the Netherlands: A Survey among Neurologists and Anesthesiologists. *Eur Neurol*. 84:219-229.
- Linher-Melville K. (2020). Sex differences in neuro(auto)immunity and chronic sciatic nerve pain. *Biol Sex Differ*. 11:62.
- Hamdan T. (2021). NONDISCOGENIC SCIATICA SYNDROME, A REPORT ON 41 PATIENTS. *Basrah Journal of Surgery*. 27: 3-11
- Alhiti H (2021) A Reviewing the Top Health Systems with Comparison to Iraqi Health System. *J Fac Med Baghdad* 63: 43e9.
- Alhiti H (2022) Comparing Iraq and USA Health Systems: 2009-2019. *Maaen J Med Scien* 1:10-15.
- Hashem M. (2022). Knowledge and Attitude of Sciatica Pain and Treatment Methods among Adults in Saudi Arabia. *Adv Orthop*. 2022:7122643.
- Tampin B. (2021). Disentangling 'sciatica' to understand and characterise somatosensory profiles and potential pain mechanisms. *Scand J Pain*. 22:48-58.
- Alhiti H (2021) Organizing Surgical Data Improves Surgical Care. *EJBI* 17: 45-46.
- Fritz J. (2021). Physical Therapy Referral from Primary Care for Acute Back Pain with Sciatica: A Randomized Controlled Trial. *Ann Intern Med*. 174:8-17.
- Alhiti H (2020) Editorial Note for journal of emergency and trauma care. *Open access*. 4: 17.
- Corrêa L. (2022). Neural management plus advice to stay active on clinical measures and sciatic neurodynamic for patients with chronic sciatica: Study protocol for a controlled randomised clinical trial. *PLoS One*. 17:e0263152.
- Dillingham T. (2020). Evaluation of persons with suspected lumbosacral and cervical radiculopathy: Electrodiagnostic assessment and implications for treatment and outcomes (Part I). *Muscle Nerve*. 62:462-473.
- Lu X. (2023). Microglia and macrophages contribute to the development and maintenance of sciatica in lumbar disc herniation. *Pain*. 164:362-374.
- Bailey C. (2020). Surgery versus Conservative Care for Persistent Sciatica Lasting 4 to 12 Months. *N Engl J Med*. 382:1093-1102.



This work is licensed under Creative Commons Attribution 4.0 License

To Submit Your Article Click Here:

Submit Manuscript

DOI:10.31579/2693-7247/110

Ready to submit your research? Choose Auctores and benefit from:

- fast, convenient online submission
- rigorous peer review by experienced research in your field
- rapid publication on acceptance
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

At Auctores, research is always in progress.

Learn more <https://www.auctoresonline.org/journals/general-medicine-and-clinical-practice>