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Lumbar disc herniation in a 15-year-old girl: A case report

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Objective: Reporting a rare case of pediatric lumbar disc herniation, describing the use of microdiscectomy for the management of pediatric lumbar disc herniation.

Introduction: Lumbar Disc Herniation (LDH) is uncommon in the pediatric population. The lumbar spine biodynamics and architecture change with age, with adults being more susceptible to LDH than children. When conservative treatment fails for pediatric LDH, surgery may be considered. We described an unusual instance of pediatric lumbar disc herniation that was successfully treated with microdiscectomy.

Case presentation: A 15-year-old patient presented with back discomfort and pain in her left leg that had been deteriorating for over 4 years. Conservative treatment with nonsteroidal anti-inflammatory medications and piriformis injection is ineffective. An MRI of her lumbosacral spine revealed that the left L4 root was compressed by a disc herniation at the L4/L5 level. A microdiscectomy was performed on the patient. Within 48 h of surgery, the patient was released home with significant alleviation in sciatic discomfort.

Discussion: In the pathogenesis of LDH, trauma and a sedentary lifestyle are important factors. Back pain and radiating pain are typical LDH symptoms. If conservative treatment does not result in a positive outcome, the microdiscectomy procedure is the surgical approach of choice. Long-term outcomes have demonstrated the efficacy and safety of this procedure.

Conclusion: Every child who presents with back pain or radiculopathy should undergo a thorough evaluation for LDH especially if they have a high body mass index or a history of trauma. Careful patient selection and preoperative evaluation result in extremely excellent surgery outcomes in pediatric LDH.

Keywords: Lumbar disc herniation, Pediatric, Micro discectomy, Microsurgery.

Biography

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