Lumbar Discectomy and Decompression Surgery

One-page summary of the full Spinemathema guide. Scan the QR code for the full guide, with references and audio.

Key points

- A discectomy removes the piece of disc pressing on a nerve; a decompression removes bone or thickened tissue narrowing the spinal canal.
- Both operations are mainly for leg pain (sciatica or spinal stenosis), not back pain.
- Most sciatica settles without surgery, so operations are usually reserved for pain that has not improved after several weeks.
- Surgery tends to speed up recovery, but long-term results with and without it are often similar.
- Serious complications are uncommon, and your surgeon will discuss your individual risks.

Contact your team or seek urgent help if you notice:

- Numbness around your back passage, genitals or inner thighs, or new bladder or bowel problems (possible cauda equina syndrome): call 999 or go to A&E.
- New or worsening pain, weakness or numbness in your legs.
- A hot, red, swollen or oozing wound, or a high temperature: contact your hospital or call NHS 111.
- Clear fluid leaking from the wound, or headaches, which can mean a spinal fluid leak.
- A painful, swollen calf, or sudden breathlessness or chest pain (call 999).

Not sure how urgent it is? Call NHS 111. More warning signs: spinemathema.com/warning-signs

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General information only, not personal medical advice.
If you are worried about your symptoms, contact your GP, NHS 111, or in an emergency call 999.

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