Abstract:

Background: Prolapsed lumbar intervertebral disk (PID) disease can be managed conservatively or surgically with different outcomes. Objective: The present study aimed at assessing the management and outcomes of slipped intervertebral disk disease at the Kenyatta National hospital. Design: A retrospective cross-sectional study. Setting: Kenyatta National Hospital (KNH) a referral and teaching hospital in Kenya. Patients and Methods: Consecutive files of all cases of slipped intervertebral disk disease from January 1997 to December 2007 were retrieved from the Medical records at the Kenyatta National Hospital. The biodata, management methods and the outcomes of the procedures were recorded. The collected data were analyzed using the SPSS 17.0 for Windows. Results: Six hundred and three cases were reviewed. All patients received analgesics and bed rest. Five percent of the patients were put on bilateral traction for two weeks while 4% of the patients had corsets. Thirty five per cent of the patients were surgically managed. Over a third of the surgically managed patients had laminectomies. Microdiscectomy was increasingly popular in the latter half of the study period. Of the managed patients 95% reported improvement while 92% were complication free. The rate of reherniation and reoperation was 1.5% and 1.2% respectively. Conclusion: The management of PID at Kenyatta National Hospital is largely successful with few cases of complications. In selected patients both conservative and surgical care are used in tandem. Microdiscectomy is an increasingly popular surgical procedure at the KNH.