



Updated on – Sep 10, 2018 by Dr. Rick Morris

This Doctor's Warning To His Patients About MRIs

By Dr Rick Morris

"Doctor, I know what's causing my back pain. I have a herniated disc at L5."

"Why are you so sure this is the source of your pain?" I question, attempting to check the validity of her statement.

With great confidence she responds, "I saw my MRI and I could plainly see it bulging." She continued, "At least I finally know what's really causing my pain. In fact, my doctor told me the only real answer was surgery."

I suggested that I first examine her back before making a final diagnosis. She consented, while believing the exam was unnecessary as the MRI clearly showed the problem and she'd already seen two doctors before me.

After giving her a detailed and thorough exam, it was obvious her assessment was wrong. She damaged her **right 4th lumbar nerve** while the disc herniation, visible on her MRI, was on the **left** side and **not near the 4th lumbar nerve**. In fact, the herniated disc did not produce symptoms at all and was not the cause of her back pain!

MRIs Often Lead To An Incorrect Diagnosis

Even more startling, this discrepancy isn't uncommon. It happens everyday in doctor's offices around the world and leads to inaccurate diagnoses and incorrect treatment.

Here are a couple of facts that may startle you and, unfortunately, is not well understood by many doctors:

One-fourth of all people under 60 have MRIs that show a herniated disc, without pain.⁴

Half of all people have MRIs that show a bulging or degenerated disc, again, **without pain**.⁴

One can see how easily an innocuous herniated, bulging or degenerated disc could incorrectly be blamed for severe back or neck pain (while the real culprit was left undetected and

untreated).

How Could An MRI Not Be Accurate...Isn't It A Picture?

No...it's an image, not a picture. In fact, it's a computerized rendering of the magnetic energy of the different tissues in the back. From this information, the computer software makes an image. But, that's not the most important reason for incorrect spinal diagnoses from MRIs. These are the most important ones:

- MRIs are usually taken lying down often not showing problems that only appear when you're sitting, bending or lifting (Did you know there is 16 times more pressure within your spinal discs when you sit compared to when you lie down?).
- Many important structures in your back aren't visualized in current MRIs such as most of the spinal ligaments. Could you imagine having surgery to your knees, shoulder or any other joint without examining the ligaments?
- Spinal MRIs do not show most muscle tears, spasms, atrophy and imbalances. Again, do you want a diagnosis of your back condition without this information? Imagine examining your shoulder without ever checking for a tear in your rotator cuff?
- Subtle structural misalignments, joint fixations and hypermobilities are not even programmed into the MRI software and are completely ignored.

Shocked? Well you should be since the diagnosis and treatment of your back pain is too often primarily made by what your MRI does or does not show.

Many of my patients have been told their backs were fine because nothing significant showed up on the MRI. Others were given diagnoses like arthritis and degenerative disc or joint disease because it showed up on MRIs even though they've had those findings for years even without back pain. In both cases, these doctors don't completely understand what's causing their problem and their treatments will probably be equally ineffective.

What Happens If A Disc That Appeared Herniated On An MRI Is Treated Surgically or With Injection, But Wasn't The Cause Of Your Symptoms?

Unfortunately, I don't believe this is a rare situation. Doctors have become far too reliant on MRIs and less skilled at physical examinations. The result—the wrong area is treated and the patient doesn't get well. In fact, if surgery is performed on the wrong area, their problem usually gets worse. Now you'd have another damaged area in your spine alongside the original problem.

Following surgery, the treated spinal section and those around it will begin to move abnormally, leading to future problems that could become severe.

Was this malpractice by the radiologist who read the MRI? Did the orthopedic surgeon

misinterpret the MRI results? What about the “herniated disc” that was so obvious on the MRI...it must mean something!

Actually, we don't always understand why disc herniations sometimes cause pain and sometimes don't; but, we have a few ideas. One of the most important of these has to do with the strength of the disc—can it support your body weight. Will it bulge or herniate into pain sensitive nerves when you sit in a bad seat or stretch or bend? Will the jelly-like substance within the disc leak through cracks in its walls and produce pain and protective spasms? Therefore, not all herniations that appear on MRIs produce symptoms and not all normal MRIs lead to healthy backs.

Are There MRI Findings That Should Bring Up A Red Flag?

Yes! Certain MRI findings are nearly always associated with pain. These include:

Yes! Certain MRI findings are nearly always associated with pain. These include:

- Severe nerve compression and disc extrusions (a certain type of disc herniation)¹
- Infections
- Cancers
- Fractures
- Severe Stenosis
- Spinal Instability

How Many Back Problems Are Really Mistreated Due To MRIs ?

The Journal of the American Medical Association (JAMA) followed 380 patients with similar lower back problems. One group could only use x-rays while the other used MRIs. Those that had MRIs had two and one-half times more surgery than did those who didn't without any improvement in treatment outcomes³ This study suggests that a great many people are having surgeries and treatments, based on MRIs, that aren't helpful to their back problems.

What Are MRIs Really Good For?

MRIs are the best technology available in finding cancer, bone diseases and fractures. They can be helpful in corroborating what is observed by a good, structural and thorough exam. But explain the patient's symptoms only about 50% of the time.

That brings us to the most important single tool...the exam. THE EXAM IS EVERYTHING. I'm not referring to a 5-minute case history, stand up, bend over and knee tap. I'm referring to an exam that gets to the root of your problem. One that measures:

- Alignment
- Function
- Muscle tone and balance
- Stability versus flexibility
- Nerve compression or interference, and
- Lifestyle factors and habits that caused or continue your problem, and most importantly,
- Locate the exact location where your pain is generated from.

This takes, at least 1-1 1/2 hours.

The exam has to find the cause and location of your pain and the mechanical problems that are associated with it. THEN...look to the MRI to find additional information that is essential. MRIs are great technology, but only tells us half the story. We all know how misleading half the story can be.

How Can I Find A Proper Analysis?

If you're a chronic back pain sufferer, you already know this is the hardest of questions. You've already gone through the brief exams, the bouts of physical therapy, exercises, anti-inflammatory pills, shots, adjustments, acupuncture and surgery. Each doctor or therapist did their one magical treatment. Pain management doctors gave shots and pills, physical therapists gave exercises, chiropractors gave adjustments and acupuncturists used needles. There didn't seem to be a doctor who understood the whole palate of treatments and knew which should be used and when. You want a doctor who knows all the treatments that are best for your condition and tries the safest approaches first-- using injections and surgery only if there is no other way.

We believe that our office leads every other in the care of the spine. We have a full understanding of all the fields that treat spinal problems and use the best from each area to return you back to your life before it was run by your injured spine.

Everyone with severe back or neck problems that haven't responded to treatment needs to schedule an appointment with our office and find some real answers. You need to spend, at least 1-2 hours face to face with us to get to the bottom of these difficult conditions.

Don't let any friend or family member go into surgery, take endless pain medications or start injections until they see us first.

For Further Information

To learn more about our research study or the specifics of our decompression program, click the appropriate link below:

- [Spinal Stenosis Research Performed in our Center](#)
- [The Specifics and Differences of Our DRX 9000 Spinal Decompression Program](#)

These are the conditions that we specialize in treating. Click on the condition you need answers to:

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Click here, [Letters and Videos From Our Patients](#), to learn from those who suffered with and know most about these conditions. They offer understanding and good advice.

Have a Free [On-Line Consultation](#) with one of our doctors by clicking, Free On-Line Consultation. You'll get a meaningful response today or tomorrow.

Your welcome to schedule an appointment or ask us questions at our spinal stenosis and disc center by calling [1-310-451-5851](tel:1-310-451-5851) or you may [E-Mail Us](#).

*Please see the [research](#). Of course individual results may vary.

1 Spine; Associations between patient report of symptoms and anatomic impairment visible on lumbar magnetic resonance imaging. 2000 April 1; 25(7):819-28.

2 Spine Associations between back pain history and lumbar MRI findings. 2003 March 15;28(6):582-8.

3 JAMA; Rapid magnetic resonance imaging vs. radiographs for patients with low back pain: a randomized controlled trial. 2003 Jun 4; 289(21): 2810-8.

4 LA Times, January 12, 2009.

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