

## JOINT SPECIALIST CLINIC

Holistic Care with Precision

e-consult https://www.my-doc.com/join/bonejointspecialist b. L5/S1 disc protrusion with right sided neural compression consistent with patient's symptoms

## Future Treatment

His clinical diagnosis is L5/S1 disc protrusion with symptomatic radiculopathy. His symptoms have been present for 4 months. Despite initial physiotherapy with company clinic referral, his symptoms are persistent.

In view of persistent worsening symptoms, I have recommended that he should consider radiofrequency coblation procedure with annuloplasty. The estimated cost of this procedure as a 81 patient in restructured hospital is estimated to be \$15000 (including admission, operating theatre fees, doctors' fees, and implants).

Thereafter he needs to undergo at least 10 sessions of physiotherapy to optimize paravertebral muscle strength and estimated total charge will be  $$3000 \div GST$ .

If the symptoms are not sufficiently improved or if it relapses, there remains moderate possibility of microdiscectomy spine procedure costing \$25000 as a B1 patient in a restructured hospital.

## Percentage Disability

His latest computed percentage disability based on the 5<sup>th</sup> edition of workmen compensation booklet is:-

a) Persistent pain and restriction in motion without neurology deficit (Page 55) => 15%

Based on combined value chart, his total percentage disability is 15%.

## Expert Opinion

Mr Hanif Abu incurred in a disc injury at L5/S1 from work injury. He has nerve compression with disc protrusion. Since conservative treatment is inefficient, he will need to undergo surgical interventional procedure such as annuloplasty or microdiscectomy. Despite such a procedure, his working capacity is significantly reduced, and he cannot engage in the same type of vocation.

These injuries to the spine are permanent and his workload has to be more of administrative and not entailing lifting of heavy loads. Following surgical treatment, his prayers and squatting may return but he may not be able to do it for a long time since it may cause a relapse. Based on published medical literature, despite interventional treatments, patients continue to have back pain and risks of relapse in condition.