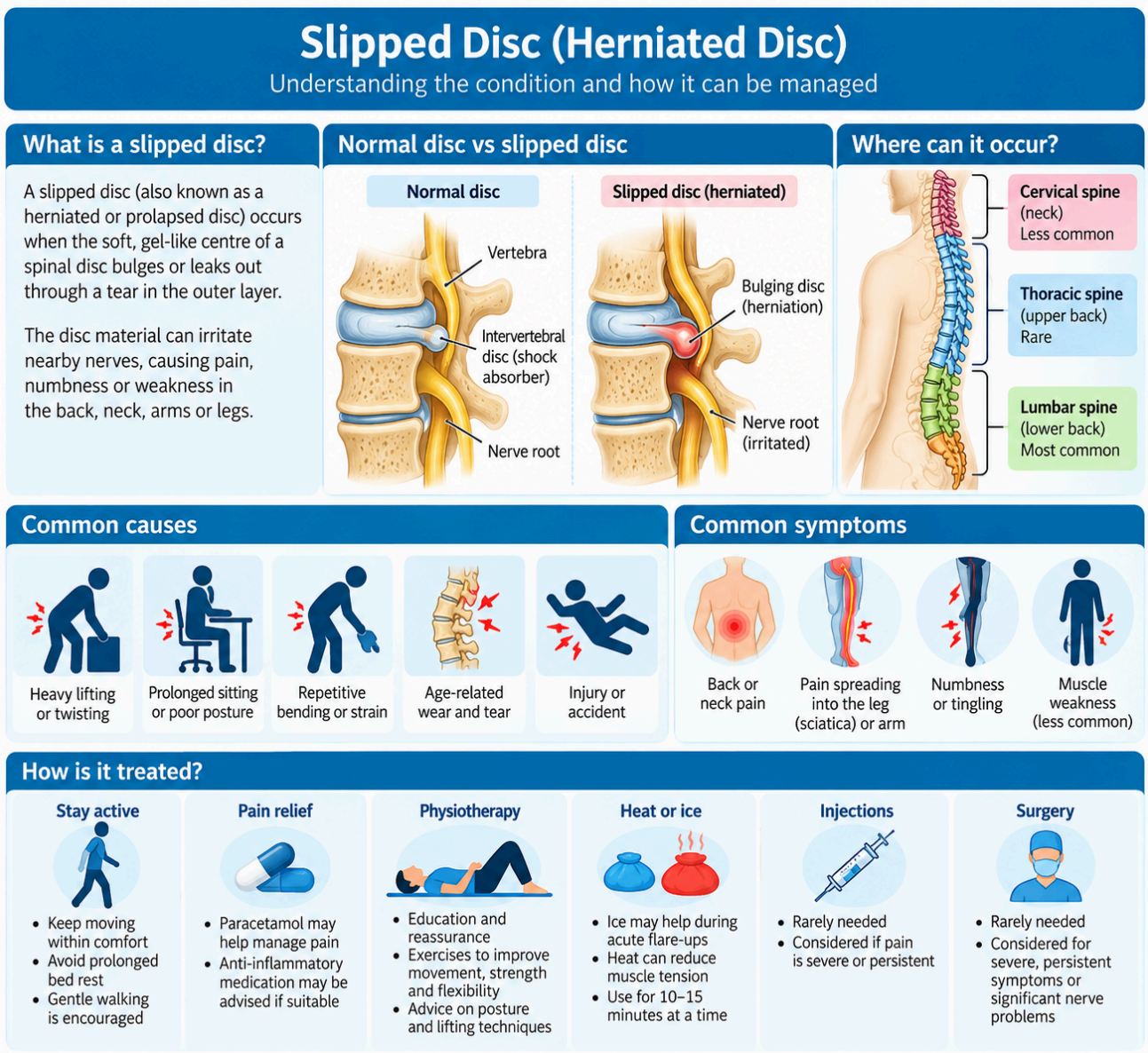
Slipped Disc (Herniated Disc)

Understanding symptoms, causes and recovery

Slipped Disc: Understanding and Management

A guide to causes, symptoms, treatment and exercises



What is a slipped disc?

A slipped disc (disc herniation or prolapse) occurs when part of a spinal disc bulges or leaks out and may irritate nearby nerves. The disc does not actually slip out of place.

Where can it occur?

It can occur anywhere in the spine, most commonly in the lower back (lumbar spine) or neck (cervical spine).

Causes and symptoms

Recognising slipped disc symptoms and diagnosis

Common causes

Age-related wear and tear; heavy lifting or twisting; repetitive bending or strain; prolonged sitting or poor posture; sometimes an injury.

Common symptoms

Back or neck pain; pain spreading into an arm or leg (sciatica); sharp, burning or electric-like pain; numbness, tingling or sometimes muscle weakness.

Symptoms can vary

Some people have a slipped disc without significant pain. Symptoms depend on whether nearby nerves are affected.

How is it diagnosed?

Diagnosis is usually based on symptoms and a physical examination. MRI scans are not routinely required unless symptoms are severe, worsening or not improving.

Staying active

Keep moving within comfort, avoid prolonged bed rest and try gentle walking. Most slipped discs improve with conservative treatment.

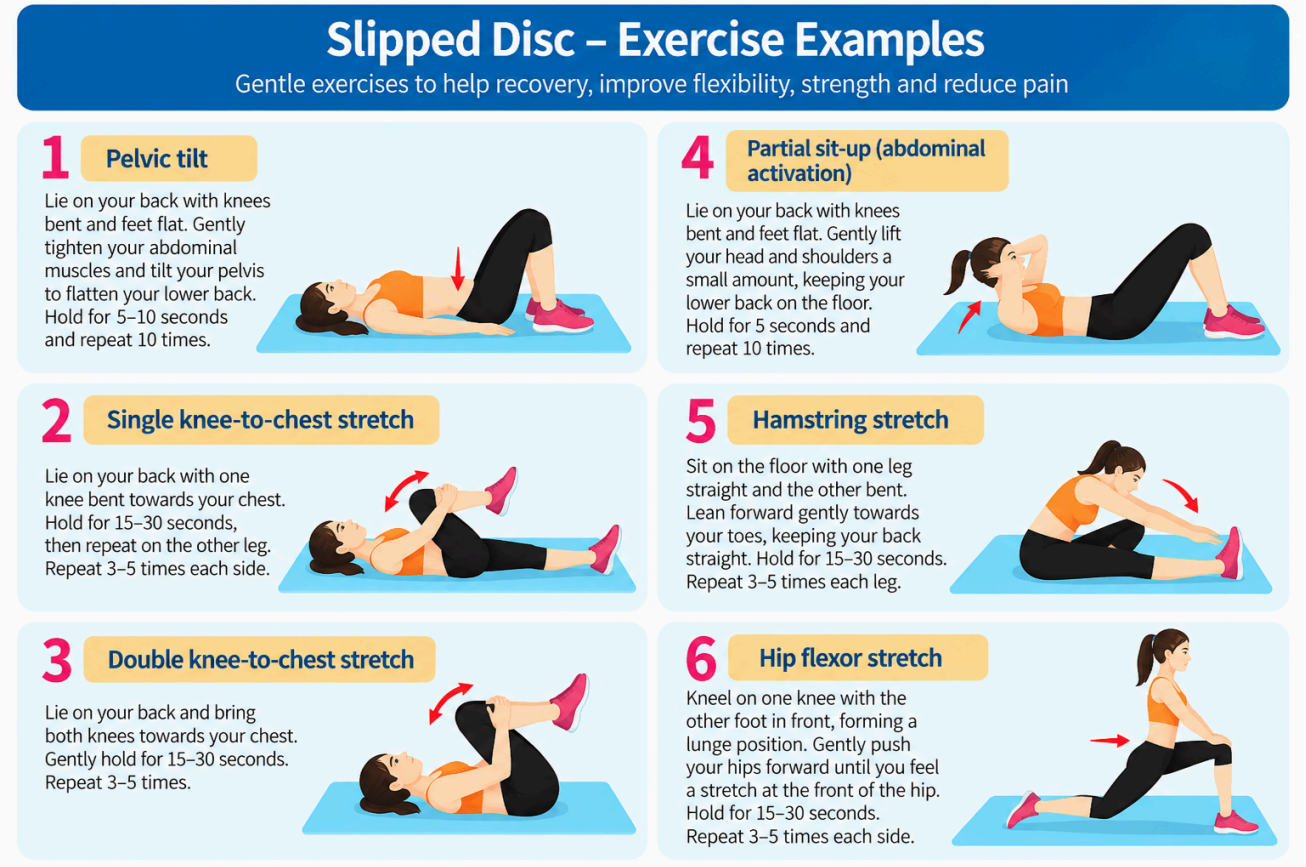
Exercises and rehabilitation

Gentle movement to support mobility and recovery

Exercise guidance

Gentle spinal exercises can support movement and reduce stiffness. A physiotherapist can advise which exercises are suitable for your symptoms.

Slipped disc exercise examples



Exercise safety: Move gently and stop if symptoms worsen. Ask your physiotherapist for advice.

Treatment and next steps

Practical recovery advice and when to seek help

1. Activity and physiotherapy

Keep moving within comfort. Physiotherapy can help with movement, strength, flexibility, posture and lifting advice.

2. Pain relief

Paracetamol or anti-inflammatory medication may be appropriate for some people. Ask a clinician or pharmacist about suitability.

3. Heat or ice

Ice may help during flare-ups; heat may ease muscle tension. Apply with skin protection for 10–15 minutes.

4. Injections or surgery

Rarely needed, but may be considered for severe, persistent pain or significant nerve problems.

5. Outlook and recovery

Most people improve within weeks to months. Staying active and following advice can support recovery.

When to seek urgent medical advice

Seek urgent medical help for loss of bladder or bowel control, numbness around the genitals or anus, progressive limb weakness, or severe pain after a major injury.

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