



Patient: Cut it Out! Surgeon: No Surgery for You!

Why the answer to a surgical request is sometimes no

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Few visits are more frustrating than the one where a patient in real pain asks for surgery and a surgeon says no. In most cases, it is a surgeon protecting a patient from an operation unlikely to help.

KEY TAKEAWAYS

- Surgery works best for a clear, correctable structural problem that matches the symptoms.
- Most adults have some disc wear on imaging that is not necessarily the pain source.
- Diagnostic injections and exam findings can confirm a surgical target before anyone picks up a scalpel.

THE FULL PICTURE

Surgery works best when there is a clear, correctable structural problem that matches the patient's symptoms, such as a nerve being pinched by a specific disc herniation, an unstable spinal segment, or a fracture. What surgery is not good at is treating generalized, diffuse, or poorly localized pain, even when an MRI shows some degenerative changes.

Nearly every adult over 40 has some disc wear or bulging on imaging. Finding it does not automatically mean it is the source of the pain, or that removing it will remove the pain. Surgeons also weigh the durability of results, including risks of hardware failure, adjacent segment breakdown, and chronic post-surgical pain if the underlying pain generator was never clearly identified.

A thoughtful surgeon would rather say "not yet" or "not this" than operate on a structure that is not actually causing the problem. This is exactly where a pain medicine physician fits into the picture.

Diagnostic injections, careful physical exam findings, and a pattern of symptoms over time can help confirm or rule out a surgical target before anyone picks up a scalpel. If surgery has been declined, that conversation is not the end of the road. It is an invitation to find the actual source of the pain first.

This handout is for general patient education and does not replace individualized medical advice. Discuss your specific diagnosis and treatment options with your physician.

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