



Back Pain: Myths and Facts

Back pain is one of the most common medical complaints. It can affect anyone. Although it is common, there are many myths about the causes and treatment of back pain. Here's information to help you know what to expect with your back pain care.

Myth Most back pain is caused by injury or heavy lifting.

Fact People who have jobs where they sit all day are just as likely to have back pain as those who do very physical jobs.

Myth Back pain is usually disabling.

Fact Back pain can be intense, but it is rarely serious or disabling. In fact, 7 out of 10 people typically get better in 2 weeks. Nine out of 10 typically get better in 4 to 6 weeks with or without treatment.

Myth Rest – and not working – is the best medicine for back pain.

Fact Early movement and return to all your usual activities, including work, usually helps speed up healing. It also helps prevent deconditioning (loss of strength).



Myth Slipped disks require surgery to repair.

Fact Surgery is rarely needed to repair even herniated disks. Most get better on their own or with spine therapy.

Myth You need narcotics for back pain.

Fact Your doctor may recommend over-the-counter medicines. Narcotics are rarely used and can actually make the pain worse. They also cause drowsiness and constipation and have a risk of addiction.

Myth MRIs and CT scans can identify the source of pain.

Fact There are many pain-producing tissues in the back, including muscles, ligaments, tendons, joints and disks. Most of the time we can't identify the exact cause of the pain. Even sophisticated tests like MRIs and CT scans aren't of much help. In fact, MRIs are often abnormal in people who don't have any back pain at all.



Warning Symptoms

Back pain is usually not serious, though it may hurt a lot. It typically improves quickly if you follow your doctor's suggestions. In rare cases, back pain can be a sign of a serious medical problem. If you have any of these symptoms, tell your doctor right away:

- Unexplained weight loss
- Pain that keeps up all night or is not relieved by lying down
- Fever
- Changes in controlling your bowel or bladder
- Leg weakness that gets worse
- Numbness and tingling in the upper part of your legs, along with back pain



Treatment of Back Pain

There are many ways to treat back pain. Treatments range from staying active, physical therapy, medicines you can get with or without a prescription, to injections and even major surgery. Simply returning to normal activities or exercising can be effective in most cases.

The latest research tells us that rigorous physical therapy is often the most effective treatment for patients who are not getting better on their own. This kind of treatment builds muscle strength. This approach should be tried before thinking about invasive and potentially harmful procedures that may not help.

Major surgeries such as spinal fusion and disc replacement have much greater risks and complications. Exercise and time often work better. After years of research, we now know that lifestyle changes and self-management of back pain can be the best treatment of all.

Here are the most common forms of treatment for back pain. You can begin many of them at home. Your doctor may discuss other treatments with you as well.



Bed Rest

Recent studies show that bed rest is not needed for most back problems. In fact, staying in bed can worsen symptoms and delay recovery. What is helpful is moderate, steadily increasing activity that doesn't make your pain much worse. This includes getting back to work.

Ice and Heat

There is some evidence that heat may help reduce some back pain. Ice is not likely to do any harm, but it has not proven to help back pain. Until more studies are done, you might experiment to see what works best for you.

Medicine

In many cases, despite pain and discomfort, you will heal better if you do not use medicines. When needed, acetaminophen (Tylenol®) can ease back pain. Anti-inflammatory medicines can also be helpful. These include ibuprofen (Motrin® or Advil®), naproxen (Aleve®) and aspirin. You can get these medicines without a prescription.

Other medicines are rarely needed. Their side effects and risks are often worse than just waiting to get better by staying active and exercising. Narcotics can make the back pain better today. However, they can lead to prolonged difficulties or even worse pain in the future if taken over time. Contact your doctor if your pain is not improving.



Surgery

Surgery is rarely needed for back pain. It is more effective for severe, radiating leg pain that does not improve with time. It may be needed for weakness that gets worse. Sometimes it is needed when there is severe pain in the back or leg that lasts for weeks despite exercise.

Research shows that conservative, nonsurgical treatments and exercise are more effective at relieving pain and preventing its return. If you do need surgery, your doctor will consult with a spine expert.



Exercise

Exercise and activity are keys to recovery. They can help prevent back problems from coming back. To stay active, keep yourself in the best physical condition you can. Back pain can recur, so plan to improve your fitness now.

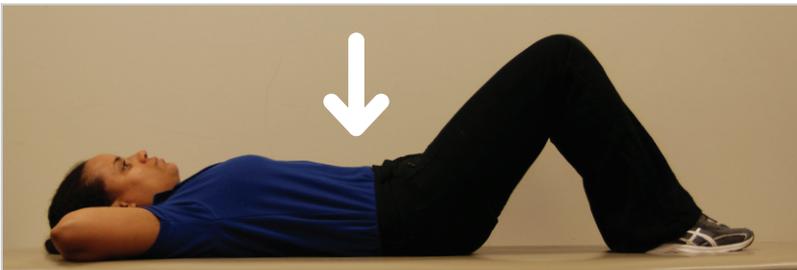
Start walking every day as soon as you can. Add other activities to your routine, such as swimming and biking. They may also provide good motion to the painful areas. Exercise consistently. Remember that it's ok to work hard at this in spite of some discomfort.

If you have become deconditioned (lost strength in your back), you may need personalized, intensive back exercises to regain strength and function. A physical therapist or chiropractor can help you with this. They can also help you get started right with the back exercises shown here. These can make you more comfortable and able to move more easily as you start to recover.

Start the exercises as soon as you can do them in reasonable comfort. Remember, hurt is not the same as harm. Do tell your doctor or therapist if any exercise makes the pain much worse.

Pelvic Tilt

Lie flat on your back, knees bent, feet flat on the floor, body relaxed. Tighten the abdominal muscles. Tilt the pelvis so the curve of the small of the back is flat on the floor. Hold 10 seconds, then relax. Continue to breathe.



Repeat 10 times, 3-4 times each day.

Knee Raise

Lie flat on your back, knees bent. Bring one leg slowly to your chest as shown. Hug your knee gently, then return to the start position. Repeat the exercise with other leg.



Repeat 5 times, 3-4 times each day.

Partial Press-up

Lie face down on a firm surface. Rest for a few minutes, relaxing completely. Now raise your upper body and rest on your elbows. Let your lower back relax toward the floor. Relax your legs as much as you can. Hold this position for 5-10 seconds. Return to the starting position.



Repeat 5 to 10 times, 3-4 times each day.



What to Expect for Care of Your Back Pain

You may meet different kinds of doctors and therapists for your back pain. Your needs will determine who you see. The goal is to relieve your pain, help you get back to your usual activities, and prevent future pain.

1. Primary care doctor, nurse practitioner or physician assistant

Your primary provider will evaluate your spine and tell you what you can do to ease your pain.

Be confident! Nine out of ten people's back pain gets better in 4 to 6 weeks with or without treatment.

2. Self-care

Activity is the key to getting better. Being active, such as by walking, helps you recover sooner.

Stay active! Daily walking will help your back and keep the supporting bones and muscles strong. It also helps reduce stress and anxiety...which helps your back.

3. Physical therapist

A physical therapist may be the first person you see for back pain. They can help assure you that you have the type of injury that typically gets better with exercise and time. They will also talk to you about posture, activity and exercise. If you see a doctor first, the doctor may ask you to see a physical therapist for their help as well.



A team approach. The physical therapist will guide you with exercises to maintain your strength and flexibility.

4. Primary provider

If your back does not improve, you may return to your primary provider for a referral to a spine specialist. This specialist will help decide the next step in your care.

Everyone is unique. The kind of care you need may be different than what someone else needs. We'll see that you get the tests and see the professionals that are right for you. We want to help you get back to your usual activities.

5. Spine specialist

Spine specialists will evaluate your specific back problem if your pain doesn't improve after initial treatment. They'll work with your primary provider and other spine experts to determine what tests and treatments are best for you.

Surgery is rarely needed. Treatment that focuses on exercise, not surgery, is most effective at relieving pain. It also helps prevent relapses. It's also best to avoid unneeded x-rays and scans.

