

Pain in the lower back is very common. Fortunately, 70 percent of people who have low back pain get better within two weeks. And more than 90 percent get better within four to six weeks.

Inflammation (swelling) of joints, muscles or discs in the back often cause low back pain. Physical activities, especially repetitive lifting, bending and twisting can make low back pain worse. Poor posture also can worsen low back pain. Rarely do serious problems, such as infection or other medical conditions, cause low back pain.

This brochure provides an overview of low back pain and a roadmap of what to expect in your recovery. Included are what causes low back pain, simple care to relieve it and warning symptoms for more specialized treatments. Recommendations for preventing back pain from returning, such as low back exercises, also are provided.

Types of low back pain

Acute low back pain

Low back pain that lasts for six weeks or less and does not extend below the knees is called acute low back pain, lumbar muscle strain or backache. Although quite painful, it usually improves after a few days of simple care.

Acute sciatica

Acute sciatica is low back pain that lasts for six weeks or less and extends below the knees. It also is called radiculopathy or radiating leg pain. Feeling better usually takes longer than with acute low back pain. Nerve irritation in the lower back often causes sciatica pain.

Chronic low back pain and sciatica

Back pain and sciatica that lasts longer than six weeks with no significant improvement is considered chronic. Specialized treatment may be needed. Your doctor may refer you to an expert in medical problems that can cause chronic back pain. Usually, these are doctors in rehabilitation or occupational medicine, neurology or neurosurgery, orthopedics and rheumatology.

Warning symptoms

In some situations, your doctor may want to do tests to rule out any uncommon causes for your back pain. Keep your doctor up-to-date on how you are doing. Schedule a follow-up visit one to three weeks after your initial exam, if recommended. Immediately report any of the following symptoms or conditions:

- unexplained weight loss
- constant night pain
- fever
- urinary difficulties
- leg weakness

Diagnosing low back pain

X-rays usually are not necessary early in treatment. X-rays may be needed for trauma (for example, a fall or car accident), patients older than 50 years or those with other medical problems. X-rays may be ordered for low back pain lasting more than six weeks. CT or MRI may be used for chronic sciatica pain.

Treatment

The following simple recommendations may help control your pain. Talk with your doctor if you are not getting enough pain relief.

Bed rest

Prolonged bed rest is not necessary for most back problems. In fact, staying in bed for more than two days may increase the pain and stiffness. Moderate activity that does not significantly worsen the pain is more helpful.

Ice and heat

Ice or cold packs can reduce the pain and swelling of a muscle strain or spasm (tightening of the muscle). Use ice or cold packs for 20 minutes three to four times a day during the first few days. To further reduce pain and stiffness, take a hot bath or place a heating pad on your lower back. Continue to use ice if it helps improve the pain more.

Medication

Anti-inflammatory medicines, such as ibuprofen (Motrin®, Advil®) or aspirin, can help ease the pain and swelling in the lower back. If these medicines upset your stomach, use acetaminophen (Tylenol®) instead. Your doctor also may prescribe muscle relaxants during the first few days to ease muscle spasms. Muscle relaxants, however, often cause drowsiness.

Sometimes your physician may order steroid injections that can ease sciatica pain. Steroids are injected into the epidural space of the spine, which surrounds the nerves within the spinal canal. For localized (limited to a small area) back pain, steroid injections into the joints of the spine may be an option as well. Your doctor also may prescribe oral steroids.

Posture, sleeping and weight

Good posture keeps the body's weight aligned (straight) and reduces stress on the back muscles. To help reduce stress on your low back from sitting, use a chair with enough lower back support or place a pillow behind your back. Change positions frequently.

When sleeping, lie on your back with a pillow under your knees. Lying on your side with a pillow between your lower legs also is helpful. These positions often are the most comfortable for sleeping.

Being overweight increases stress on the lower back. Weight loss is important to prevent future problems. Do not smoke.

Stress Management

Family, work or financial pressures can affect back pain. Learning to effectively manage everyday stress can help your recovery. Talk with your doctor about any concerns.

Returning to usual activities

Returning to work or usual daily activity in a few days or less is important to your recovery. Modifying your responsibilities or limiting your hours may be necessary. While you can expect some discomfort, getting back to regular activities helps prevent your back from becoming weak and stiff. Avoid lifting heavy objects and repetitive bending and twisting.

Spinal therapy

If you experience severe pain or no improvement after two weeks of minimal treatment, or if you are unable to return to work or your daily activities, your doctor may recommend spinal therapy. Spinal therapists include physical therapists or chiropractors. They work to help restore your normal strength and ability to move and do activities. They provide special exercises, gentle manual techniques, pain-relieving tools (ultrasound, heat, cold) and health education.

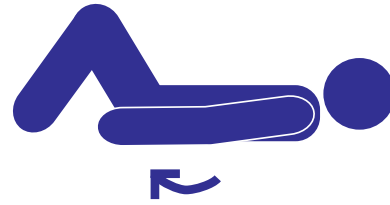
Surgery

Surgery rarely is needed for back pain or sciatica. Only five to 10 percent of patients with sciatica need surgery. Conservative (nonsurgical) treatments and exercise often are as effective in relieving and preventing pain from returning. Surgery usually is only considered after months of conservative treatment have failed to ease your pain.

Exercise

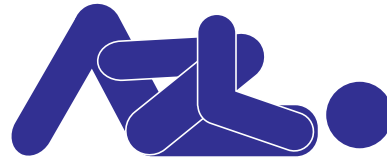
To help in your recovery and to prevent further back problems, keep yourself in good physical condition and your back, abdominal muscles and legs strong. Walk daily as soon as you can. Gradually add other activities, such as swimming and biking, which also can help improve lower back strength.

Start the back exercises shown here at home or with help from a physical therapist or chiropractor. Begin as soon as you can do them comfortably. Do not do any exercises that make your pain a lot worse.



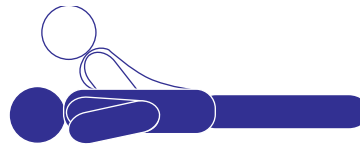
Pelvic tilt

Lie flat on your back (or stand with your back to a wall), knees bent, feet flat on the floor, body relaxed. Tighten your abdominal muscles and tilt your pelvis so the curve of the small of your back is flat on the floor (or wall). Hold 10 seconds and then relax. Repeat _____ times, _____ times/day.



Knee raise

Lie flat on your back, knees bent. Bring one knee slowly to your chest. Hug your knee gently. Then lower your leg toward the floor, keeping your knee bent. Do not straighten your legs. Repeat exercise with other leg. Repeat _____ times, _____ times/day.

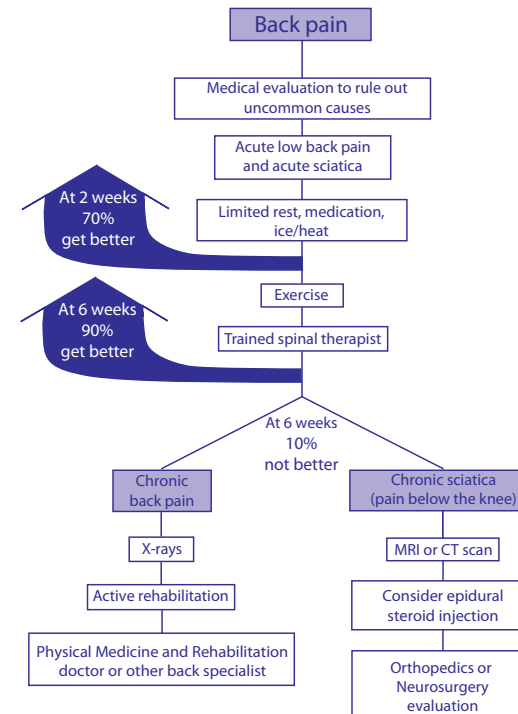


Partial press-up

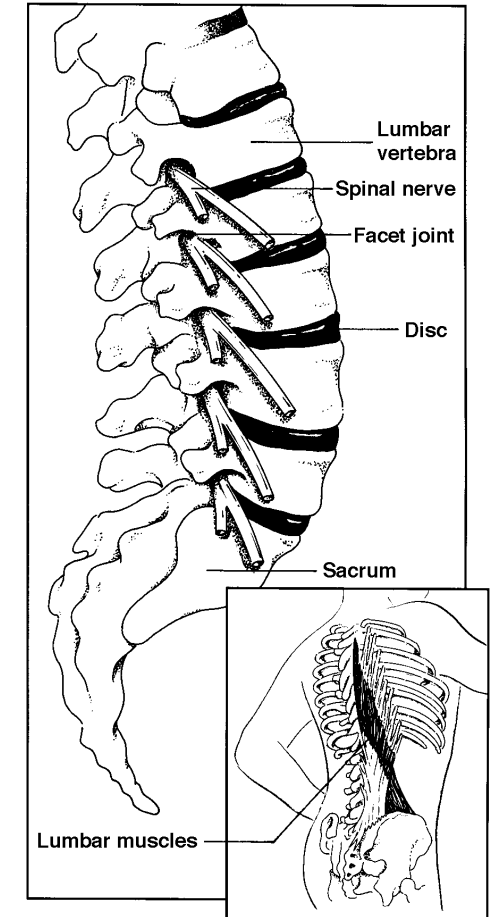
Lie face down on a soft, firm surface (do not turn your head to either side). Rest your arms bent at the elbows alongside your body. Relax for a few minutes. Then raise your upper body enough to lean on your elbows. Relax your lower back and legs as much as possible. Hold this position for 30 seconds at first, gradually working up to five minutes. Or, try slow press-ups, holding for five seconds and repeating five to six times. Repeat _____ times, _____ times/day.

Roadmap to recovery

Understanding how back problems are cared for and what to expect if they do not improve is important. The care you receive for your lower back pain is specific to your needs. The flow chart below shows the usual process for treating back pain problems. Your care may follow this path or your doctor may recommend a different treatment plan.



Low Back Pain



This brochure is based on guidelines developed by a team of health care experts at the Institute for Clinical Systems Improvement (ICSI), of which Park Nicollet Health Services is an active member. It is reviewed and updated regularly as scientific evidence changes. This material is for informational purposes only and is not intended to be a substitute for professional medical advice, diagnosis or treatment.