

Bed rest — 1–2 days at most. A 1996 Finnish study found that persons who continued their activities without bed rest following onset of low back pain appeared to have better back flexibility than those who rested in bed for a week. Other studies suggest that bed rest alone may make back pain worse and can lead to secondary complications such as depression, decreased muscle tone, and blood clots in the legs. Patients should resume activities as soon as possible. At night or during rest, patients should lie on one side, with a pillow between the knees (some doctors suggest resting on the back and putting a pillow beneath the knees). Exercise may be the most effective way to speed recovery from low back pain and help strengthen back and abdominal muscles. Maintaining and building muscle strength is particularly important for persons with skeletal irregularities. Doctors and physical therapists can provide a list of gentle exercises that help keep muscles moving and speed the recovery process. A routine of back-healthy activities may include stretching exercises, swimming, walking, and movement therapy to improve coordination and develop proper posture and muscle balance.

Medications are often used to treat acute and chronic low back pain. Effective pain relief may involve a combination of prescription drugs and over-the-counter remedies. Patients should always check with a doctor before taking drugs for pain relief.

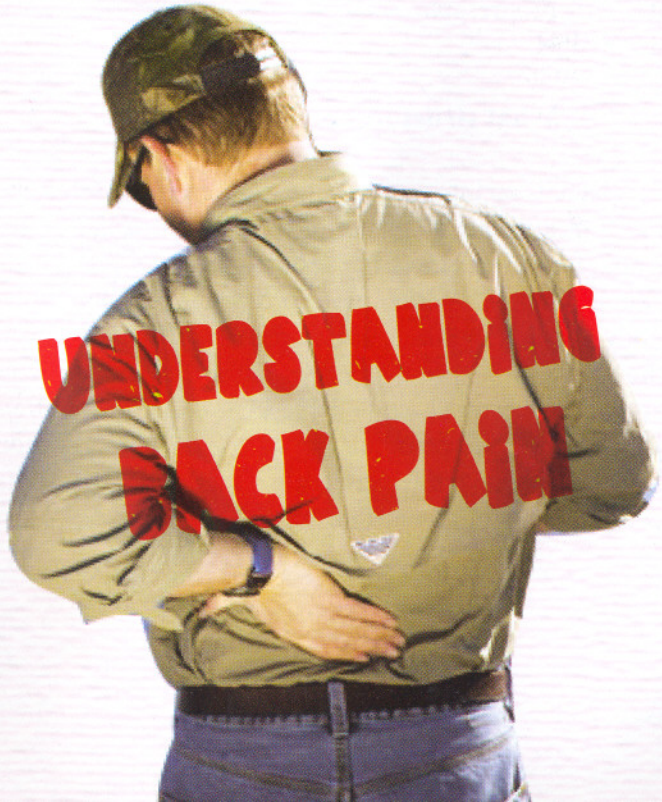
Quick tips to a healthier back

Following any period of prolonged inactivity begin a program of regular low-impact exercises. Speed walking, swimming, or stationary bike riding 30 minutes a day can increase muscle strength and flexibility. Yoga can also help stretch and strengthen muscles and improve posture. Ask your physician or orthopedist for a list of low-impact exercises appropriate for your age and designed to strengthen lower back and abdominal muscles.

- Always stretch before exercise or other strenuous physical activity.
- Don't slouch when standing or sitting. When standing, keep your weight balanced on your feet. Your back supports weight most easily when curvature is reduced.
- At home or work, make sure your work surface is at a comfortable height for you.
- Sit in a chair with good lumbar support and proper position and height for the task. Keep your shoulders back. Switch sitting positions often and periodically walk around the office or gently stretch muscles to relieve tension. A pillow or rolled-up towel placed behind the small of your back can provide some lumbar support. If you must sit for a long period of time, rest your feet on a low stool or a stack of books.
- Wear comfortable, low-heeled shoes.
- Sleep on your side to reduce any curve in your spine. Always sleep on a firm surface.
- Ask for help when transferring an ill or injured family member from a reclining to a sitting position or when moving the patient from a chair to a bed.
- Don't try to lift objects too heavy for you. Lift with your knees, pull in your stomach muscles, and keep your head down and in line with your straight back. Keep the object close to your body. Do not twist when lifting.
- Maintain proper nutrition and diet to reduce and prevent excessive weight, especially weight around the waistline that taxes lower back muscles. A diet with sufficient daily intake of calcium, phosphorus, and vitamin D helps to promote new bone growth.
- If you smoke, quit. Smoking reduces blood flow to the lower spine and causes the spinal discs to degenerate.



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Understanding Back Pain

If you have lower back pain, you are not alone. Nearly everyone at some point has back pain that interferes with work, routine daily activities, or recreation. Americans spend at least \$50 billion each year on low back pain, the most common cause of job-related disability and a leading contributor to missed work. Back pain is the second most common neurological ailment in the United States

Acute or short-term low back pain generally lasts from a few days to a few weeks. Most acute back pain is mechanical in nature - the result of trauma to the lower back or a disorder such as arthritis.

Chronic back pain is measured by duration — pain that persists for more than 3 months is considered chronic. It is often progressive and the cause can be difficult to determine.

What structures make up the back?

The back is an intricate structure of bones, muscles, and other tissues that form the posterior part of the body's trunk, from the neck to the pelvis. The centerpiece is the spinal column, which not only supports the upper body's weight but houses and protects the spinal cord - the delicate nervous system structure that carries signals that control the body's movements and conveys its sensations. Stacked on top of one another are more than 30 bones - the vertebrae - that form the spinal column, also known as the spine.

Starting at the top, the spine has four regions:

- The seven cervical or neck vertebrae (labeled C1–C7),
- The 12 thoracic or upper back vertebrae (labeled T1–T12),
- The five lumbar vertebrae (labeled L1–L5), which we know as the lower back, and
- The sacrum and coccyx, a group of bones fused together at the base of the spine.

The lumbar region of the back, where most back pain is felt, supports the weight of the upper body.

What causes lower back pain?

As people age, bone strength and muscle elasticity and tone tend to decrease. The discs begin to lose fluid and flexibility, which decreases their ability to cushion the vertebrae.

Pain can occur when, for example, someone lifts something too heavy or overstretches, causing a sprain, strain, or spasm in one of the muscles or ligaments in the back.

Obesity, smoking, weight gain during pregnancy, stress, poor physical condition, posture inappropriate for the activity being performed, and poor sleeping position also may contribute to low back pain.

Who is most likely to develop low back pain?

Nearly everyone has low back pain sometime. Men and women are equally affected. It occurs most often between ages 30 and 50, due in part to the aging process but also as a result of sedentary life styles with too little (sometimes punctuated by too much) exercise. The risk of experiencing low back pain from disc disease or spinal degeneration increases with age.

How is back pain treated?

Most low back pain can be treated without surgery. Treatment involves using analgesics, reducing inflammation, restoring proper function and strength to the back, and preventing recurrence of the injury. Most patients with back pain recover without residual functional loss. Patients should contact a doctor if there is not a noticeable reduction in pain and inflammation after 72 hours of self-care.

Although ice and heat (the use of cold and hot compresses) have never been scientifically proven to quickly resolve low back injury, compresses may help reduce pain and inflammation and allow greater mobility for some individuals. As soon as possible following trauma, patients should apply a cold pack or a cold compress (such as a bag of ice or bag of frozen vegetables wrapped in a towel) to the tender spot several times a day for up to 20 minutes. After 2 to 3 days of cold treatment, they should then apply heat (such as a heating lamp or hot pad) for brief periods to relax muscles and increase blood flow. Warm baths may also help relax muscles. Patients should avoid sleeping on a heating pad, which can cause burns and lead to additional tissue damage.