



thewhitehouse

physiotherapy and sports injury clinics

BACK PAIN

About back pain

Back pain is a very common complaint – an estimated 60-80% of people are affected at some point in their lifetime. Anyone can get back pain at any age, but it's most common in people between the ages of 35 and 55, or over. It is one of the main reasons for sickness absence from work.

Your back contains a number of different structures, including bones, joints, muscles, ligaments and tendons. Its main support structure is the spine, which is made up of 24 separate bones called vertebrae, plus the bones of the sacrum and coccyx. Between the vertebrae are discs that act as shock absorbers and allow your spine to bend. Your spinal cord threads down through the central canal of each vertebra, carrying nerves from your brain to the rest of your body.



It's often very difficult to know exactly what causes back pain, but it's usually thought to be related to a strain in one of the interconnecting structures in your back, rather than a nerve problem. Back pain caused by a more serious, underlying condition is rare and you're unlikely to be affected unless you are very old or very young.

Symptoms of back pain

If you have low back pain, you may have tension, soreness or stiffness in your lower back area. This pain is often referred to as 'non-specific' back pain and usually improves on its own within a few days.

Back pain may be called either 'acute' or 'chronic' depending on how long your symptoms last. You may have:

- acute back pain - lasting less than six weeks
- sub-acute back pain - lasting six weeks to three months
- chronic back pain - lasting longer than three months

You should see your GP as soon as possible if, as well as back pain, you have:

- a fever (high temperature)
- redness or swelling on your back
- pain down your legs and below your knees
- numbness or weakness in one or both legs or around your buttocks
- loss of bladder or bowel control (incontinence)
- constant pain, particularly at night
- pain that is getting much worse and is spreading up your spine

These symptoms are known as red flags. It's important to seek medical help for these symptoms to ensure you don't have a more serious, underlying cause for your back pain.

Causes of back pain

For most people with back pain, there isn't any specific, underlying problem or condition that can be identified as the cause of the pain. However, there are a number of factors that can increase your risk of developing back pain, or aggravate it once you have it. These include:

- standing, sitting or bending down for long periods
- lifting, carrying, pushing or pulling loads that are too heavy, or going about these tasks in the wrong way
- having a trip or a fall
- being stressed or anxious
- being overweight
- having poor posture

There may be other, more serious underlying causes of your low back pain, but these are rare. They include:

- fracture - a crack or break in one of the bones in your back
- osteoporosis - a condition where bones lose density causing them to become weak, brittle and more likely to break
- a slipped disc - this is when a disc bulges so far out that it puts pressure on your spinal nerves
- spinal stenosis - a condition in which the spaces in your spine narrow
- spondylolisthesis - when one of your back bones slips forward and out of position
- degenerative disc disease - when the discs in your spinal cord gradually become worn down
- osteoarthritis - a wear-and-tear disease that can particularly affect the joints of your spine
- rheumatoid arthritis - an inflammatory condition in which your immune system causes inflammation of the lining of your joints and surrounding structures

Low back pain may also be caused by an infection or cancer, but these two causes are very rare.

Diagnosis of back pain

Your GP or Physiotherapist will usually be able to diagnose low back pain from your symptoms and there is usually no need for further tests. If, however, your symptoms don't improve after a few weeks, or you have some red flag symptoms, he or she may advise further investigations. These could be an x-ray, CT scan or MRI scan. They will help to find out whether you have a more specific, underlying cause for your back pain.

Treatment of back pain

If your back pain is non-specific, your GP & Physiotherapist will usually recommend conservative rehabilitation as the first form of treatment. This consists of self-help and physiotherapy techniques. Your GP may also prescribe or advise pain relieving medications. If your symptoms are more severe, or do not settle down you may be referred to a specialist, to assess whether you are suitable to have spinal injections or surgery. These measures are not usually required with most forms of back pain, and aren't suitable for everyone.

Self-help

There are a number of things you can do to help relieve low back pain.

- Stay active and continue your daily activities as normally as you can. Bed rest may actually make low back pain worse, so try to limit the time you spend resting to a minimum.
- Apply hot or cold packs to the affected area. You can buy specially designed hot and cold packs from the White House clinic. If you prefer, you can apply a cold compress, such as ice or a bag of frozen peas, wrapped in a towel. Don't apply ice directly to your skin as it can damage your skin.
- Use a TENS machine to help control your pain. Speak to your physiotherapist to see if this option would be suitable for you.
- Do some gentle mobilising and strengthening exercises: see our Exercises for Low Back Pain sheet for more information

Physiotherapy

A Physiotherapist is a health professional who specialises in maintaining and improving movement and mobility. After a thorough assessment they may recommend a course of manual therapy involving spinal mobilisation or manipulation, and techniques such as acupuncture, massage, electrotherapy & supportive taping. Other treatment can include exercises, stretches & postural advice.

All of the physiotherapists at the White House have extensive training & experience of treating patients with low back pain. They employ up to date & medically researched treatment techniques. They can help advise you on the best treatment options if you are suffering from low back pain, and guide you through the recovery process.

Medicines

Taking an over-the-counter painkiller (such as aspirin or paracetamol) or anti-inflammatory medicine (such as ibuprofen) is often enough to relieve acute low back pain. You can also use creams, lotions and gels that contain painkillers or anti-inflammatory ingredients. Ask your GP or Physiotherapist if you need further advice on this.

If your pain is severe or chronic, your GP may prescribe stronger medicines such as diazepam, morphine or tramadol. However, these aren't suitable for everyone because they can be addictive and cause side-effects. Always ask your doctor or pharmacist for advice and read the patient information leaflet that comes with your medicine.

Surgery

Back pain, even if it's chronic, can usually be treated or managed successfully, but about one in 10 people have ongoing problem. Back surgery is really only considered as a last resort if the pain is related to a specific cause.

Prevention of back pain

Good back care can greatly reduce your risk of getting low back pain. To look after your back, make sure you:

- take regular exercise - walking and swimming are particularly beneficial
- try to keep your stress levels to a minimum
- bend from your knees and hips, not your back
- maintain good posture - keep your shoulders back and don't slouch

Some general tips

- Speak to your GP or Physiotherapist for advice
- Use something to help control the pain
- Stay active and at work if you can do
- Use a lumbar roll to improve your posture
- Avoid activities that can aggravate your symptoms
- Remember that back pain is rarely due to something serious

Further information

www.whitehouse-clinic.co.uk

www.backcare.org.uk

www.csp.org.uk