



Back Pain

What is back pain?

Back pain is extremely common - about eight in ten people in the UK are affected at some time in their lives. Each year, close to five million working days are lost due to back pain.

Acute and chronic back pain

Back pain can affect anyone at any age, although people are most likely to get it between the ages of 35 and 55.

If the pain lasts for less than three months, it is called acute back pain, referring to how long it has lasted rather than how severe it is. If the problem goes on for longer, it is referred to as chronic back pain.

How the back works

The spine is made up of many small bones called vertebrae. These are separated by discs, which allow the spine to bend. This structure of vertebrae and discs is supported along its length by muscles and ligaments. The spinal cord threads through the centre of each vertebra, carrying nerves from the brain to the rest of the body.

Simple back pain

Back pain in 19 out of 20 people is linked to the way the bones, ligaments and muscles of the back work together. This is called simple back pain. The pain can begin suddenly but can also come on gradually due to prolonged stress or strain. Usually nothing abnormal shows up in tests such as X-rays and nothing is permanently damaged.

Simple back pain is most common in adults aged 35 to 55 who are otherwise healthy. However, with age comes a degree of “wear and tear” on the discs, rather like the wear on your car tyres with mileage and this can increase your risk of simple back ache. The pain is often in the lower back (lumbar region), and may also spread to the buttocks and thighs. It can come and go at different times, often dependent on your level of activity.

Triggers for simple back pain include:

- poor posture
- standing or bending for long periods
- sitting in a chair that doesn't provide enough back support
- lifting, carrying, pushing or pulling loads that are heavy, or by a failure to exercise good lifting technique
- a trip or a fall

Unless your pain is severe, it is important that you stay physically active. This is good for your back because keeping active will help speed up your recovery from simple back pain. Nine out of ten people with back pain recover completely within six weeks.

Nerve root pain

Nerve root pain is rare - it's the cause in less than 1 in 20 cases of back pain. It is usually caused by one of the discs in the spine bulging. This is called a slipped disc. The discs are similar to soft centred sweets, with a firm outer shell made of fibrocartilage and a jelly like centre. It is the inner core of the disc that can cause the outer wall to bulge and hence press on the nerves which are located nearby.

Nerve root pain is normally felt in the lower part of the back and may also prompt pain to spread into one or both legs. This pain is often referred to as sciatica as the main nerve in the leg is called the sciatic nerve.

Other causes

In rare cases, there may be a more serious underlying cause of back pain, such as a bony abnormality of the spine, an infection, collapse of the vertebrae, tuberculosis or cancer.

When to see a doctor

Most simple back pain only lasts a few days and gets better on its own. You should see a doctor as soon as possible if, as well as back pain, you have:

- fever
- 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 anus
- loss of bladder or bowel control

You should also see your doctor about back pain if:

- pain is the result of an injury
- pain lasts for more than a few days in someone aged under 20 or over 55
- you have had cancer in any part of your body
- you have HIV/AIDS
- you have been prescribed steroid medicines for more than a few months

Diagnosis

In most cases, your doctor will only need to discuss your symptoms and examine you. If the pain lasts longer than six weeks, or if your doctor suspects there is some significant cause for the pain, then he or she may recommend more tests.

These tests might include:

- X-rays
- CT (computerised tomography) scans
- MRI (magnetic resonance imaging)
- blood tests

However, more commonly they will suggest that you seek the assistance of an experienced physiotherapist to assess the need for treatment.

Additionally, in certain cases your mental wellbeing can be affected by your back pain. This is particularly true if your pain has been unremitting for a long period and is preventing you from sleeping at night and concentrating through the day. In such circumstances, your doctor may recommend that you have an assessment at the local Pain Clinic to review the options for more effective pain control.

Treatment

Self-help treatments

There are a number of steps you can take to help yourself.

- Stay active - It's important to return to your normal level of physical activity as soon as possible. Staying active will help your back to get better, and reduces your risk of getting simple back pain again.
- Stay positive - remember that back pain usually goes away quickly.
- Set yourself goals - this will help you get back to your normal levels of physical activity.

Physiotherapy

Modern physiotherapy will aim to reduce your pain, increase mobility, improve your level of function and offer education to help you prevent a recurrence of the problem, thereby putting you in control of the problem. The treatment itself may consist of a combination of joint and muscle manipulation / mobilisation, exercises for you to perform at home or work to maintain progress and electrotherapy such as laser and ultrasound to help promote better soft tissue healing.

Medication

Taking a painkiller that you would normally take for a headache (eg paracetamol or ibuprofen) is usually enough to relieve simple back pain and can help you keep active. It is best to get into a routine and take this at the same time every day. Always follow the instructions on the patient information leaflet that comes with the medicine and speak to your pharmacist. Prescription-only muscle relaxants such as diazepam may help with muscle spasms. Doctors rarely prescribe these as they can be addictive. Using a hot water bottle or an ice pack on the painful area can help reduce the pain. Don't put ice directly on your skin, as this can cause an ice burn.

Epidural

If your pain does not resolve with physiotherapy, and is thought to relate to nerve compression through, for example, a disc bulge, you may be referred to a spinal surgeon to see whether an epidural is appropriate. This usually involves an injection of a steroid directly into the base of your spine to decrease the inflammation, which may be causing the pain.

Complementary therapies

These can include:

- The Alexander technique
- acupuncture
- counselling - if there are other issues to consider

Surgery

If chronic back pain isn't helped by exercises, painkillers or manipulation, then surgery may be considered as a last resort. There are different types of back surgery. Your doctor will discuss the different options with you in more detail.

Preventing back pain

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

- take regular exercise
- keep your weight under control
- use a chair with a back rest, and sit with your feet flat on the floor or on a foot rest
- sleep on a firm mattress
- use relaxation techniques

Further information

BackCare

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www.backcare.org.uk