

Back pain is a common problem. Nearly 80 percent of adults will experience back pain at some time in their lives. For most, back pain comes and goes. Even though back problems can be painful and frustrating, they are rarely caused by serious diseases. While there is no “quick fix” for back pain, the good news is that we now know much more about why pain is often felt in the lower back. We also know more about managing back pain than ever before.

Where does back pain come from?

The back is one of the strongest parts of your body. It is made up of a number of different parts, including bones, joints, ligaments, discs, muscles, and nerves. Back pain can begin in any of these areas.

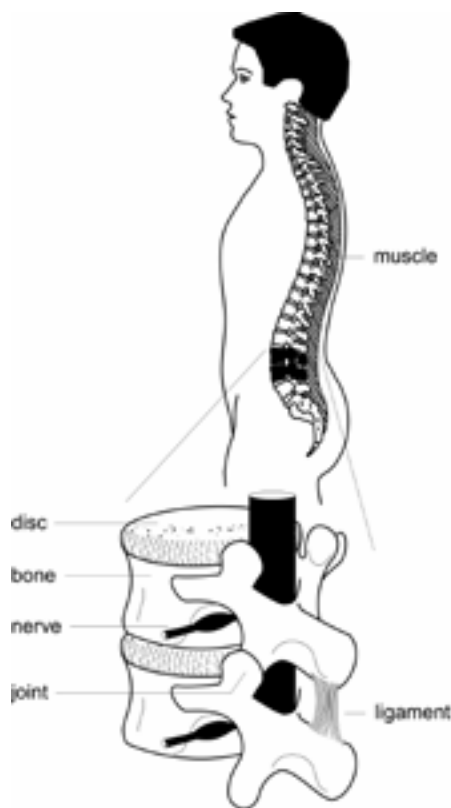
Bones: The bones in the back are called vertebrae.

Joints: A joint is formed where the vertebrae meet. These joints allow the spine to bend and move. Joints lose some of their ability to move as you age.

Ligaments: Ligaments are strong bands that help hold the bones together. When ligaments are pulled or stretched, it is called a sprain.

Discs: Discs are made up of many layers of ligament-like tissue which surrounds a gel-like center called a nucleus. Discs are designed to withstand pressure and act like a shock absorber. However, as they age, they

can lose some of their ability to absorb shock and to provide stability. Although this can be very painful, it is rarely dangerous.



Muscles: The muscles surrounding your back give it support and allow you to move. When muscles are pulled, it is called a strain.

Nerves: Nerves carry messages to the brain and control the muscles. The nerves of your spine branch out from behind the discs and spread to other parts of your body.

What makes it hurt?

Most back pain results from injury or irritation to one or more of the parts described above. Most commonly this is due to:

- Pulling, bending, twisting, or lifting injuries.
- Repetitive activities like frequent bending or stooping or unhealthy postures like sitting too long or slouching.
- Age-related wear and tear changes that make the structures less resistant to strain and pressure.

Injuries, repetitive activities, and aging can overload your back and trigger a reflex causing the muscles to tighten. Pain, muscle spasm, and stiffness develop—first in a small area, then across the entire back. The pain may also be felt in the buttocks, hips, and legs. When this reflex happens over and over again, back pain is generally more likely to occur.

Call Kaiser Permanente if you have . . .

- Loss of bladder or bowel control or difficulty starting or stopping urination.
- Weakness in the legs and/or numbness in the genital or rectal area.
- New or increased back pain, with unexplained fever or recent infection.
- Had cancer, immune system problems, or been taking the drug prednisone.
- Pain that is not relieved by rest, or if you experience a loss of sensation or strength.
- Problems with your mood.

What will help my back get better?

While back pain can return, there are actions that you can take to decrease the chance of a flare-up. Treatment for back pain includes one or more of the following: decreasing pain, calming inflammation, strengthening back muscles, and improving posture. The steps below will help you do your part to promote recovery and prevent back pain from returning.

Help for back pain during a flare-up


A flare-up of back pain after a strain or sprain requires some time for healing.

- ❑ *Control pain* with rest for 1 to 3 days, but too much bed rest can actually make your back pain worse and delay your recovery.
- ❑ *Use gentle stretching* to prevent stiffness and lessen spasm and pain. You may want to talk with your doctor about which exercises are right for you.
- ❑ *Apply ice or heat.* Ice helps decrease swelling, and heat helps tight muscles relax. Apply ice packs for 20 minutes—on and off—throughout the day for the first 24 to 48 hours (or longer if your symptoms are severe).
- ❑ *Take medications as directed.* Common medications are acetaminophen (such as Tylenol) and non-steroidal anti-inflammatory drugs (such as Aleve). In some cases, prescription pain medications may help.

Keep back pain from returning and speed recovery

- ❑ *Stay active.* People who are physically active usually recover more quickly and have fewer back problems. Walking is helpful for most back pain, although more specific exercises may also be recommended. It is helpful to continue light

and easy activity, as long as your symptoms don't become worse. If symptoms do become worse, reduce the level of your activity and ask your medical team for further advice, if needed. It is normal to experience some pain, especially at first. Keep your back strong and flexible.

- ❑ *Use good body mechanics and healthy postures.* Learn how to move using good body mechanics, so you don't hurt yourself when bending, twisting, lifting, and reaching. Use healthy postures when sitting, standing, and sleeping. 
- ❑ *Manage stress.* Don't let your back "take over." Stress and worry cause muscle tension and can make the pain worse. Many people worry that back pain is caused by something serious, but it usually isn't. Remember, "hurt" doesn't always equal "harm."
- ❑ *Maintain a healthy lifestyle.* Maintaining a healthy weight and stopping smoking (or even decreasing smoking) have been proven to lessen back pain and to keep it from coming back. There are resources at Kaiser Permanente to help. Ask your medical team or visit your Health Education Center for more information.

What if my back pain comes back?

While most back pain improves within 4 to 6 weeks, it is common for back pain to return from time to time. Staying active and modifying activities is the best way to treat back pain that returns. This will help prevent flare-ups from occurring as frequently, from being as severe, and from lasting as long. A flexible and strong back is the best way to avoid back pain.

Should I have an X-ray or an MRI?

The information that your physician and medical team receive from talking with you about your pain and from doing a physical exam is usually the most helpful in treating your condition. In most cases an X-ray or MRI (magnetic resonance imaging) is not necessary. An X-ray or MRI can be ordered by your physician or other medical professional when it is needed to direct your care.

Your doctor will discuss the procedure with you and detail any possible side effects or risks.

Other resources

- Connect to our Web site at kp.org.
- Contact your Kaiser Permanente Health Education Center or Department for health information, programs, and other resources.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor. If you have questions or need more information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse the medications or products mentioned. Any trade names listed are for easy identification only.