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EASING THE PAIN IN YOUR BACK

HARVARD MEDICAL SCHOOL ADVISER
By the faculty of Harvard Medical School

Q: My back goes out once or twice a year. What's the best way for me to take care of my ailing back?

A: Fortunately, most people who have garden-variety low-back pain can handle the problem themselves. It's best to start when your back is behaving itself. Doing exercises (see illustration) to strengthen your back may help you avoid this common problem in the future. The same exercises can help you recover from a bout of pain, but don't try them while you're in the throes of pain. Don't stay in bed any longer than you have to, either. The best plan is to return to normal activities as soon as you can, then gradually kick in your back exercises.

Use common sense. Be as active as your pain will allow, but don't push too hard. When you rest, lie on a firm surface such as a good mattress, a mattress with a bedboard under it or the floor. When you sit, select a chair with good low-back support. As you improve, spend less time resting and more time standing and walking.

Many people with acute back pain find ice packs helpful, at least during the first two or three days. Use a gel pack that you chill in your freezer, or simply put some ice cubes in a plastic bag surrounded by a thin towel. Apply cold to the spots that hurt most for 10 to 20 minutes three to four times a day. After a few days, switch to a hot pack or heating pad on a similar schedule. There's no firm scientific evidence favoring heat or cold, so do what feels best to you.

Medications can't speed your recovery, but they can reduce pain and hasten your return to normal activity. Government guidelines suggest starting with a simple pain reliever like acetaminophen (Tylenol and other brands). Use high doses, but don't take more than 1,000 milligrams four times a day.

Most doctors recommend a nonsteroidal anti-inflammatory medication (NSAID) as the basic treatment. You can try a nonprescription product such as aspirin, ibuprofen (Motrin, Advil, and other brands), or naproxen (Aleve and other brands). You can also ask your doctor for one of the many prescription NSAIDs. Older people and those with stomach or bleeding problems might be better off with the selective COX-2 inhibitor celecoxib (Celebrex). But people at risk for heart disease should use it with great caution, if at all.

If you have intense muscle spasms, your doctor may prescribe a muscle relaxant such as diazepam (Valium), cyclobenzaprine (Flexeril), carisoprodol (Soma) or methocarbamol (Robaxin). It's not clear how much these drugs really help, however. And they should be used for only a short time.

Doctors can't do much to speed your recovery. In most cases, they will simply make sure that you are not one of the few back patients with a serious problem. They can also provide the medications you need for short-term pain relief and encourage a common-sense return to normal activities instead of bed rest. But can other practitioners do any better?

In a few cases, perhaps. Small studies suggest that patients who receive spinal manipulation from chiropractors or osteopaths require less medication and are more satisfied with their care than people who receive standard treatment. It's not clear if this benefit is due to the adjustment therapy itself or is the result of the extra time, hands-on care, and encouragement that patients receive.

Massage therapy appears to help some people feel better, but its advantages are slight. Although acupuncture can help with various types of pain, acupuncture and acupressure have had mixed success with back pain. Some studies show modest benefit, others none.

Richard W. Jackson, M.D.
Kevin E. Julian, M.D.
Kurt R. Martin, M.D.

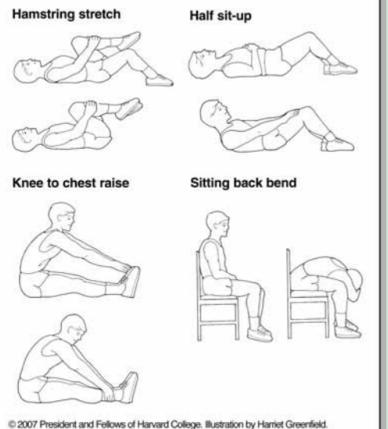
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Exercises to prevent back pain

Use these exercises to help prevent back pain. If you've had pain, wait until you are pain-free to begin. Lie on a firm mat or carpeted floor. Begin slowly, build up gradually, and back off if you experience pain. Hold each position for a count of 10, then exhale and relax. Repeat each exercise 3 times at first, then build to 8-10 repetitions. Do your exercises 3-4 times per week. Consult a physical therapist or physician if you have chronic or recurrent back pain.



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- Back-strengthening exercises may help. But the best way to prevent back pain is to keep the rest of your body healthy. Active, fit people have less back pain than sedentary, out-of-shape folks. Swimming, walking, and biking are especially good. Here are some more hints for a healthy back:
- Stand with your head up, your chin in, your back flattened, and your pelvis straight.
 - Sleep on a firm mattress. If you lie on your back, place a thin pillow under your knees.
 - Bend from your hips and knees, not your back.
 - Hold heavy objects close to your body when you lift or carry.
 - Sit as close to the pedals as you can without compromising air-bag safety or good driving. Consider a firm backrest if your seat is soft.
 - Select a firm chair with a straight back, and use a footrest for prolonged sitting.
 - Sit up straight; when you lean forward, bend from your hips instead of slouching.
- Back pain is nearly as common as backs. But with common-sense prevention and sensible treatment, you should be.

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