

# Back Pain

## Information and exercises for patients

The following guide is designed to help you understand  
and manage your back pain

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## Therapy Services

# Patient Information

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### Introduction

Back pain is a common problem and often feels like a stiffness, ache or tension in your lower back. Sometimes the pain can travel down your legs or cause pins and needles or numbness. How you cope or manage your back pain is usually more important than an exact diagnosis. All back pain can be alarming and very painful but the following is often the case:

- Serious or permanent damage is rare
- There are lots of things you can do to help yourself
- Acute back pain improves in days or a few weeks
- Aches and pains can last but will settle eventually
- You may get further episodes of back pain but you should be able to return to normal activities in between
- Movement and normal activity is good for your back
- People who stay active and try to return to normal living cope the best and recover quicker

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### Causes of back pain

Back pain is usually the result of a pulled muscle or sprained ligament. This can occur suddenly due to an awkward lift or twisting movement. It can develop over time due to repetitive movements or poor posture. Sprains and strains will normally resolve within 4-6 weeks.

### Prolapsed Disc

You may hear terms such as bulging, slipped, or herniated disc. The vertebral discs are made up of a tough fibrous tissue with a softer jelly-like middle. Sometimes the softer jelly-like part of the disc can bulge through the outer part of the disc; this is called a prolapsed disc. This prolapsed disc may press on other structures in the spine, such as nerves, leading to pain. In most cases the bulge will eventually shrink, usually within 4-6 weeks and pain will settle.



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### Sciatica

Back pain is sometimes associated with pain or altered sensation in the legs. Nerves travel from our lower back all the way down to our feet. When these nerves are irritated it can cause leg pain. This can also be accompanied by numbness and/or pins and needles in the legs and feet. Sciatica is commonly caused by a disc problem or age related changes. Usually an episode will improve in 6-8 weeks.

### Epidural

An epidural is an injection of a local anaesthetic and steroid into the space around the discs in the lower back. This may be used for patients who have symptoms of sciatica (pain going down the leg). Further information will be provided if you are referred for this procedure.

### Warning signs to look for

- Loss of bladder and/or bowel dysfunction
  - being unable to pass urine
  - becoming incontinent of urine/faeces
- Altered sensation around your saddle area/bottom
- Sexual dysfunction, e.g. unable to get an erection
- Worsening pain/weakness in both legs

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If you experience any of these warning signs you may have cauda equina and should seek urgent medical attention. The cauda equina is a bundle of nerves that comes from the end of the spinal cord and supplies the bladder and bowels. If the cauda equina is compressed it can cause back pain, sciatica and/or disturbance of bladder and bowel. Although relatively rare, cauda equina is a medical emergency

### Medication

While you are in hospital you will be prescribed pain relief to reduce your pain and allow you to increase your physical activity. A combination of different types of painkillers may be prescribed. You should not hesitate to use the prescribed medication. The medications should not cause harm and will enable you to get back to normal activities.

**Paracetamol** - This can effectively reduce low back pain if taken on a regular basis.

**Non-steroidal anti-inflammatory drugs** - Ibuprofen or Diclofenac. These can be taken with paracetamol if they are suitable for you. They can be given as tablets or as a gel to rub into the skin and help to reduce pain and inflammation.

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**Opioids** – Oral Morphine, Oxycodone or Tramadol. These are strong painkillers that may be prescribed in hospital. It is possible to use them at home for a short period with your GP or pharmacist to help you plan their use and to advise you when to reduce the dose.

**Muscle relaxants** - Amitriptyline or Diazepam. These may be used for a short time only. They help to reduce muscle spasm and improve sleep.

**Gabapentin or Pregabalin:** These may help sciatica pain by reducing the irritation of the nerves.

It can take some time for you to feel the full benefit of the painkillers. It is therefore important that you continue with the regime that you have been prescribed and seek advice from your GP if your symptoms persist. As your condition improves, it is important to gradually stop taking painkillers and you may like to discuss this with your GP or pharmacist.

## Ice

Ice can be an effective and simple way of relieving pain and reducing inflammation, especially in the first 48 hours. Wrap an ice pack or pack of frozen peas in a damp tea towel and place on your back for 15-20 minutes. This can be repeated every hour as required. People who are sensitive to cold or have circulatory problems need to be wary when using ice treatment.

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### Heat

Heat can also help to reduce pain and muscle spasm and is particularly useful after the first 48 hours. Use a heat pack or hot water bottle for 15-20 minutes.

### Anxiety and Stress

Alongside back pain, anxiety and stress are common and can exacerbate symptoms. With prolonged tension muscles can spasm which can worsen your back pain. Avoiding stress may not be possible; however some of the following strategies may help:

- Controlled breathing
- Muscle relaxation
- Calming techniques

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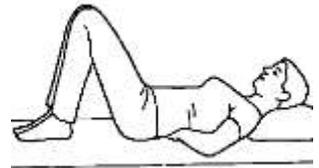
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### Exercises

Bed rest is not advised, as this can make your back stiff and weak. Exercise can help relieve pain and stiffness, build up muscle strength and flexibility as well as improve your general fitness.

#### **Pelvic Tilt**

Whilst lying on your back, lift your tail bone up to flatten your back into the bed /floor and then slowly lower back down again gently arching the back.



Repeat x.....

#### **Knee to chest**

Bring one knee and hug it towards your chest, as far as you can comfortably. Hold for 5 seconds and then slowly lower. Repeat with the other knee.



Repeat x.....

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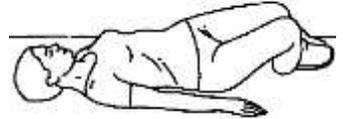
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### **Knee Roll**

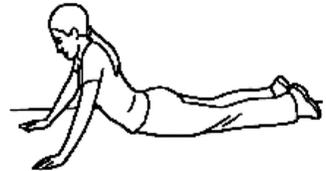
Bend your knees and rest your feet on the bed/floor. Keeping your knees together, roll them gently from side to side as far as comfortable.



Repeat x .....

### **Back Extension**

Lying face down with your hands shoulder width apart. Keeping your bottom and back relaxed, push through your hands to gently arch your back and slowly lower back down. Progress to straightening elbows for an increased stretch when able.



Repeat x .....

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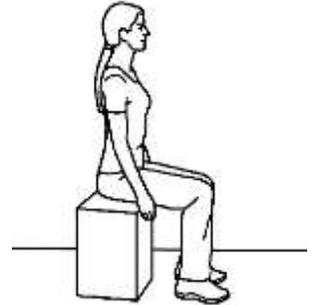
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### Posture

Posture plays an important role in back pain. Choose a chair that gives you the correct amount of support. Use a small cushion or a rolled up towel to support your lower back. Avoid sitting for long periods for long periods of time.



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### Physiotherapy

If appropriate you will be referred for a one-to-one physiotherapy appointment as an outpatient. You may also join an Active Back exercise group designed for people with back pain. It involves gentle exercise under the guidance of a physiotherapist as well as education sessions on the management of back pain.

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### Key Messages

- Stay active and try to return to normal activities as soon as possible
- Modify activities if needed
- Manage pain control with medication and other remedies
- Most back pain will improve and is not due to a serious cause
- Most scans do not usually help or change the management of back pain
- Correct posture helps
- Exercises will strengthen your back and help minimize the recurrence of back pain
- You will have good and bad days
- Only you can get your back going

Other sources of information:

Burton, K., et al. 2002. *The Back Book – UK Edition*, 2<sup>nd</sup> Ed. TSO (The Stationery Office)

Arthritis Research UK. Back Pain:

<http://www.arthritisresearchuk.org/arthritis-information/conditions/back-pain.aspx>

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### Contact details

**If you require further advice please feel free to contact us:**

Therapy Team: 01202 448179

For further general health-related information, please ask the relevant department for an Information Prescription or contact:

**The Health Information Centre**  
Poole Hospital NHS Foundation Trust  
Longfleet Road  
Poole  
Dorset  
BH15 2JB  
Telephone: 01202 448003

[www.poole.nhs.uk](http://www.poole.nhs.uk)

**We can supply this information in other formats, in larger print, on audiotape, or have it translated for you. Please call the Patient Advice and Liaison Service (PALS) on 01202 448499, text 07758 272495 or email [pals@poole.nhs.uk](mailto:pals@poole.nhs.uk) for further advice.**