



Back in Action

Taking control of your
back problem





Table of Contents

Common myths about back pain and the new facts	1
What makes my back hurt? —————	3
What parts make up the back?	3
Why does it hurt?	4
How can I avoid this downward spiral?	5
When to call your medical professional	5
What makes my back better? —————	6
What self-care treatments can I try to control the pain?	6
Exercises to help your back	14
Complementary and alternative methods —————	18
Massage	18
Mobilization	19
Spinal manipulation	19
Acupuncture	19
Practice relaxation	20
Yoga, T'ai Chi, Chi Gong	21
Talking with your medical team —————	21
Other conditions associated with back pain	21
Other treatments	23
Diagnostic tests	23
Will I need surgery?	23
How can I manage the health of my back and body? —————	24
Staying physically active	24
Modifying your work life	25
Strengthening your relationships	27
Improving intimacy and sex	27
Resolving sleep problems	28
Preventing problems in the future —————	29
Kaiser Permanente resources	back cover



Common myths about back pain and the new facts

Although back pain is very common (4 out of 5 people will have back pain at some point in their lives), most people will get better quickly. In fact, 7 out of 10 will get better in three weeks, and 9 out of 10 will get better in six weeks. Most people are able to manage back pain successfully themselves. The key to managing your back problems involves understanding what back pain is, what it isn't, and what you can do to control the symptoms. Although there are lots of old myths about back pain, recent scientific evidence has shown us new facts.

Myth: Back pain is often serious.

Fact: Back pain is rarely caused by a serious disease. This is true for recurrent back pain as well. The pain is simply a symptom that your back is out of condition. Increasing movement can help your back become stronger and speed your recovery.

Myth: You need to stay in bed with back pain.

Fact: While a brief period of rest may help for severe pain, people who are up and active get better more quickly, have less pain overall, and are less likely to have back pain return. Bed rest for more than a day or two may do more harm than good. Prolonged bed rest will weaken your bones and your muscles and ligaments will become stiff. People with back pain may also become depressed, making it harder to get back to being active.

Myth: You need to get an X-ray or MRI to know the cause of the pain.

Fact: X-rays or MRIs rarely show the cause of pain. What you tell your medical professional during a physical exam about

your pain is the most helpful information in treating your condition.

Myth: Back pain never goes away.

Fact: Most pain improves within three to six weeks. Most people return to normal activities within one month. Those who stay active have fewer back problems in the future.

Myth: You should wait for the pain to end before you move around again.

Fact: The people who know that their pain will get better if they stay active, tend to get better quicker and have less trouble in the future.

Even though it's hard to believe when you're hurting, the back is one of the strongest parts of the body. Keeping active decreases your pain now and in the future. This booklet is designed to help you learn what causes back pain, how to manage your back pain when it flares up, and how to prevent recurrences and manage them when they occur. You'll also learn when to call Kaiser Permanente and how to design your own prevention program. First, let's answer what everyone is asking.



What makes my back hurt?

You may be concerned that back pain means that your back is seriously or permanently injured. Back pain, however, usually does not mean that your back is damaged.

When you hurt, it is natural to think that you should stop moving. The truth is that it is best to keep moving as much as you can tolerate. Keeping your back moving can prevent reflexes that can trigger more tension and pain. Staying active also helps your muscles and joints stay flexible and strong. To understand this better, let's discuss how the back works.

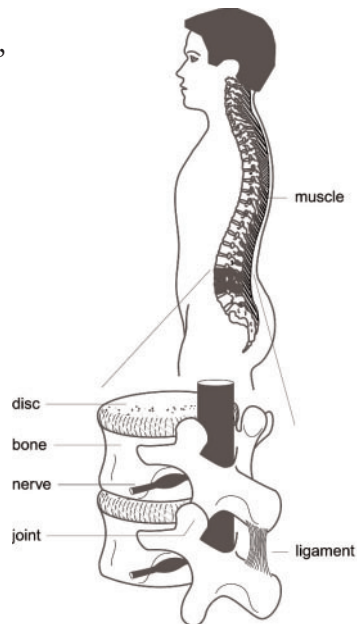
What parts make up the back?

The back is one of the strongest parts of your body. Your back is made up of bones, joints, ligaments, discs, muscles, and nerves. Back pain can start from any of these.

Bones: The bones in the back, called vertebrae, are stacked on top of each other. There is a space in each vertebrae that allows the nerves that make up the spinal cord to pass through. This space is commonly called the spinal canal.

Joints: Joints are where the vertebrae meet. These joints allow the spine to bend and move.

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 between each vertebrae. Discs are designed to carry lots of pressure and act like shock absorbers. Discs are made up of many layers of ligament-like tissue with a soft gel-like center called a nucleus.

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

Nerves: A bundle of nerves, commonly called the spinal cord, pass through the bones of your back. The nerves branch out from behind the discs and spread to other parts of your body. Nerves control the muscles and carry messages to and from your brain.

Why does it hurt?

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

- pulling or twisting when lifting, which causes strains or sprains of muscles or ligaments
- weak or tense muscles, which can cause spasm
- repetitive activities that create tension and strain—like frequent bending or stooping, or sitting too long with unhealthy postures, like slouching
- aging, which can cause discs to stretch or sprain under pressure.

These can overload your back and trigger a protective reflex causing the muscle 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 more likely to occur, leading to a downward spiral of inactivity, disability, and suffering.

How can I avoid this downward spiral?

To avoid more back problems, you should strive to stay active. Resting more than one to three days during a flare-up of back pain can cause muscles and joints to lose flexibility and strength. This can cause pain when you do move. Poorly managed back pain can cause you to change the way you hold your body when walking or sitting. This can make your back muscles tired and cause even more pain. Additionally, people with back pain may have problems with feeling down, angry, or guilty when they cannot move as before. These moods are common, but can make the problem worse. This booklet will discuss ways to help with all these concerns.

When to call your medical professional

Be sure to call Kaiser Permanente if you have any of the following warning signs:

- leg weakness or numbness that is not due to pain
- loss of bowel or bladder control, or difficulty controlling the flow of your urine
- numbness in your genital or rectal area
- unexplained fever and/or painful urination
- if you have had cancer or a recent urinary infection, or if you have AIDS or HIV infection
- if you cannot stand or walk, or if you are not improving after a few days

If you do not have the warning signs listed here, it is very unlikely that your back pain is a sign of a serious condition. However, it is time to look at techniques for decreasing the pain so that you feel more comfortable staying active and doing what you want to do.



What makes my back better?

During the first few days after a back problem starts, you will have pain or discomfort. Although there are ups and downs during this time, you may notice that you are steadily improving as the days go by.

In the first one to three days, we recommend that you:

- use the self-care treatments described below to reduce your pain
- stay as active as you can
- know when to call Kaiser Permanente

What self-care treatments can I try to control the pain?

Use the advice in this section to find the combination of treatments that work best for you. Your goal is to lessen your pain so that you can get back to your daily activities as soon as possible. Remember, most causes of back pain are not serious. Unless you are experiencing the warning signs listed on page 5, the treatments described below can help.

Relieve your pain with medication

Medications are used to relieve pain so that you can move around more easily. When you are able to move more easily, the body can recover more quickly. When your body begins to heal, you will have less pain. After a few days, you should no longer need medications.

Pain medications are called analgesics and act on the nervous system to reduce pain. They provide only temporary relief because they do not cure the cause of the pain. There are many types of medications that are used in managing pain. Some are available over-the-counter, while others require a prescription from a physician.

Non-prescription, over-the-counter medications generally help and are recommended before taking stronger prescription medications.

Taking the medications on a regular basis during the first one to three days will help you return to the activities that you want to do more quickly.

When taking pain medication, stay ahead of the pain

- If the directions on your medications say to take them “as needed,” be sure to use them at the first sign of increasing pain. The longer you wait, the harder it is to get rid of the pain.
- If you’re prescribed a regularly scheduled medication (such as one you take every six hours), take it even if you feel you don’t need it right at that moment. Pain is often best treated by using around-the-clock medication dosing. It’s easier to keep pain in check than trying to treat it once it comes back.

Over-the-counter medications

The product's package label will tell you:

- how many milligrams (mg) of medicine are in each pill
- how many pills you should take per dose
- how often you should take each dose each day

Do not exceed the dosage limits, and follow the instructions on the package if you have health problems that may make it unsafe for you to take the usual dosage of a product.

Prescription medications

Take them as directed by your physician or pharmacist. If you have questions about what is prescribed for you, ask your physician or pharmacist. Pharmacists are available online to answer questions at members.kp.org.

Types of medications for back pain

Common medications used to treat back pain are nonsteroidal anti-inflammatory drugs, acetaminophen, narcotics/opioids, and muscle relaxants. Each are described below.

- **Nonsteroidal anti-inflammatory drugs**

Sometimes called NSAIDs, these drugs have both analgesic and anti-inflammatory properties. They treat mild to moderate pain. NSAIDs are available over-the-counter and include aspirin and ibuprofen (such as Advil or Motrin). They are also available as a prescription, such as indomethacin (Indocin) and nabumetone (Relafen).

- **Acetaminophen (APAP)**

Acetaminophen (such as Tylenol) is used to treat mild to moderate pain. These are available over-the-counter or with a prescription. Acetaminophen does not have anti-inflammatory properties and is already present in some products (such as Vicodin and Excedrin). Overdose or excessive use can possibly cause liver problems.

- **Narcotics/Opiates**

These drugs are primarily used to treat acute pain. These medications should be used with caution because they can cause constipation and can be habit-forming. Narcotics and opiates are only available with a prescription. Medications, such as hydrocodone with APAP (Vicodin), oxycodone with APAP (Percocet), morphine (Oramorph), and methadone are narcotics/opiates. In some cases, opiates are used as one component of chronic pain management.

- **Muscle relaxants**

Muscle relaxants are used to ease muscle tension, but these medications may not be helpful for long-term use. These medications should be used with caution and are only available with a prescription. Common muscle relaxants are methocarbamol (Robaxin), cyclobenzaprine (Flexeril), and baclofen. Some muscle relaxants, namely carisoprodol (Soma), disrupt sleep and are addictive; therefore they are not commonly used.

Relying on medicine alone can be ineffective and frustrating. Therefore, it is best to use a combination of strategies, such as appropriate physical exercise, pacing yourself, and relaxation exercises.

For more information on these and other medications for back pain, go to members.kp.org, click on the pull-down menu “Get health advice,” select “Featured health topics,” and then click on “Pain management” on the left.

Apply ice and heat

Use ice packs right away. Ice reduces pain and inflammation. Be careful not to use an ice pack for more than 20 minutes, every two hours. Place the ice pack on the painful area or in a fanny pack while you are up and about. Apply ice consistently as long as you have pain. Use a commercial cold pack or consult the “Strains, Sprains and Fractures” section of your *Kaiser Permanente Healthwise Handbook* for more information.

Although heat feels good, it may cause more swelling during the first three days. To soothe tension lasting longer than the first three or four days, try using moist heat. A warm shower or a warm, damp towel often works well. Apply heat for no more than 20 to 30 minutes at a time. Wait at least two hours between uses.

Be especially careful if you use electric heating pads. Never use a heating pad while sleeping. People sometimes burn themselves by falling asleep on them.

If you have diabetes or circulatory problems, limit applying ice and heat to 10 minutes every two hours.

Correct your posture and body position

While you may be able to do most daily activities, think about the way you move your body while doing them. The way you hold and move your body is more important than how much and what you do.

During a flare-up of back pain, people will often change their posture and move more gingerly in an attempt to reduce the pain they are feeling. Unfortunately, when you change the way you stand or brace your body because of the pain, muscles become even more tense. This sort of reaction to the pain may slow your recovery.

Good posture means holding your back in a position that maintains its natural curves. You may find that good posture and movement patterns may be uncomfortable or awkward at first. In the long run, you will adjust quickly and prevent additional pain.

To find the right position, stand up straight. (It may help to stand in front of a mirror.) Arch your back and then flatten it; then let it settle into a position midway between the two extremes. Your ear, shoulder, hip, knee, and ankle should be in a line, and your knees should be relaxed. It helps to remember that you will get better faster if you can maintain this position as often as possible.

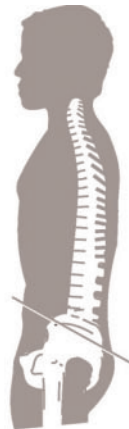
Try to improve your posture and the position of your body with movement. Here are some guidelines to help you get moving without overdoing it:

- Avoid sitting for more than 20 to 30 minutes. Sit with natural curves in your back in an upright chair. Place a folded towel in the small of your back. If sitting makes your back worse, try standing or lying down instead.
- Avoid bending over to pick up or lift anything. When lifting something, bend at your knees instead of your back.
- When you lie down, find a comfortable position on your side or back. Too many pillows behind the head can curve your spine in the wrong direction.
- Driving a car is hard on most people's backs. When you drive, pull the seat forward so that your knees are bent and your lower back has its natural curve. Avoid twisting your back as you get in and out of a car.
- Try not to twist your body when you get out of bed, pick up things, or when you climb into a car.

too arched

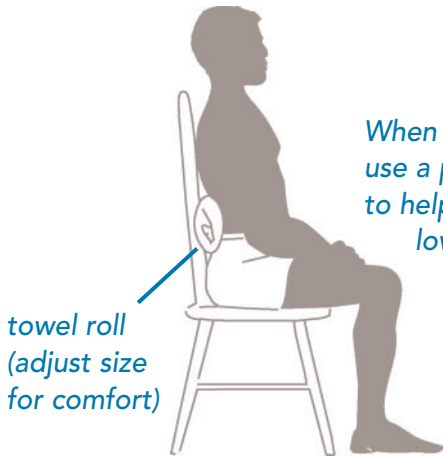


too flattened



*natural curves
(good posture)*

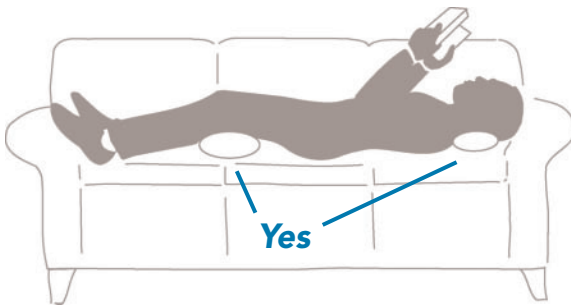




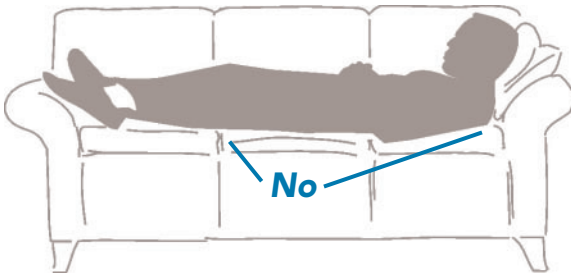
towel roll
(adjust size
for comfort)

When sitting, you may need to use a pillow or rolled-up towel to help keep the curve in your lower back. Try different sizes to see what is most comfortable.

Too many pillows behind your head can curve your spine in the wrong direction.



Yes



No

Try not to twist your body when you get out of bed, pick up a baby, or climb into a car.



Keep your back and legs facing the same direction when you get into a car.

-
- ✓ See the “Back and Neck Problems” chapter of the *Kaiser Permanente Healthwise Handbook* for ways to hold the curves in your back while standing, sitting, or sleeping.

Exercises to help your back

From time to time, almost everyone suffers from lower back problems. By staying active—and by strengthening and stretching the muscles in your body—you can avoid common back problems and back pain. If you are already suffering from lower back problems, doing the exercises presented here may help you feel better and may help prevent most back pain from recurring.

The basic types of exercises that can help your back include:

1. General physical activity
2. Strengthening exercises
3. Stretching exercises

The following exercises only take a few minutes each day and can help you prevent back pain; they can also help you recover from back problems.

Use caution

- These exercises are not recommended for use during a spasm or during the first one to three days of an injury or flare-up of back pain. Instead, see “First Aid: Back Problems” in your *Kaiser Permanente Healthwise Handbook*.
- If any exercise causes increased or continuing back pain, stop the exercise and try something else. Stop any exercise that causes the pain to radiate away from you spine into your buttocks or legs, either during or after the exercise.
- You do not need to do every exercise. Stick with the ones that help you the most, or do only the exercises your medical team recommends.
- If you have just had a heart attack or if you have any other heart problem, make sure that you receive guidance before beginning or re-starting your physical activity program. If you have new or changing patterns of chest pain or discomfort, stop your physical activity and contact your doctor or other medical professional.

General physical activity

General physical activity—where the entire body is moving—can strengthen your body, improve your overall health, and can prevent most back pain. For example, activities such as swimming or walking can be very beneficial. Even small amounts of physical activity can make a difference. The goal for most people is to get 30 to 60 minutes of physical activity on most days of the week. This means that it doesn't have to happen all at once. Even 10 minutes of exercise can help—as long as the sessions add up to 30 to 60 minutes for each day.

Here's a good way to measure if you are exercising at the right pace: First, you should be able to talk comfortably while you are exercising. If you are gasping for breath, you'll want to slow down. Here's another way to assess your exertion level: On a scale from 1 to 10 (where 1 means “no work” and 10 means “unable to continue”), try to exercise between a 4 and a 6. Gradually increase how long, how often, and how hard you exercise.

Remember: The idea is to gradually improve over time, so start slowly, but try to improve as you grow stronger.

Strengthening exercise

Wall slides

This exercise strengthens the muscles that support the back. Strong back muscles help you lift better with your legs.

- Stand with your back against the wall and your feet about one foot away from the wall and shoulder width apart.
- Do a pelvic tilt to find your neutral spine position.
- Slowly bend your knees sliding your back down the wall several inches and hold this position.



Stretching exercises

Pelvic tilt

This exercise gently moves the spine and stretches the lower back muscles.

- Lie on your back, tucking in your abdomen so that your pelvis rocks and your lower back moves towards the floor.
- Move your pelvis in the other direction so that your back moves away from the floor.
- Count: 1 as you bring your back toward the floor, 2 to neutral, 3 back away from the floor, and 4 to neutral.



Hamstring exercise

This exercise stretches the muscles in the back of your thigh. These muscles allow you to bend your legs.

- Lie on your back, keeping a natural curve in your back.
- Wrap a towel around one thigh just above the knee.
- Hold the ends of the towel in both hands.
- Using the towel, pull your thigh toward your chest.
- Keeping your thigh in this position, slowly straighten out your leg.
- Feel the stretch in the back of your thigh and leg.



Single knee to chest

This exercise stretches the muscles in the back and will help keep your back flexible.

- Lie on your back and bring one knee toward your chest.
- Hold onto the knee with both hands.



- Slowly bring the knee closer to your chest.
- Feel the stretch in your buttock or your back.

Hip flexor stretch

This exercise stretches the muscles in the front of your hip. The exercise can help you avoid “sway-back,” caused by tight hip muscles.



- Position yourself with one foot in front and the other foot in back about 1 to 2 feet.
- Perform a pelvic tilt by tucking your abdomen in and squeezing your buttocks together.
- Holding the pelvic tilt, bring your trunk upright and move your trunk toward the wall.
- Feel the stretch in the front of the thigh that is positioned behind you.

Hip rotator stretch

This exercise stretches the muscles around your hip. Strong hip muscles allow you to squat down and lift better with your legs.



- Lie on your back with your knees bent. Lift one leg and place your ankle on the opposite knee.
- With both hands, grasp the thigh of the leg that is not crossed behind the knee. Gently pull your leg toward your chest. Feel the stretch in you buttock.
- Hold without bouncing for 20 to 40 seconds; then switch sides.
- If it is difficult for you to hold your thigh, place a rolled towel behind your knee and grasp both ends of the towel.



Complementary and alternative methods

Common complementary and alternative treatments for back pain include:

- treatments that others perform for you—such as massage, acupuncture, and chiropractic (or other forms of “body work”).
- treatments that you do for yourself—such as relaxation, deep breathing, yoga, t'ai chi, chi gong, and other movement programs.

Many people say that their back pain is improved by using these techniques. Generally these methods help temporarily, allowing you to more quickly begin other self-care activities. We are just learning about which of these treatments is best for back pain. Talk with your physician or other medical professional to determine which treatments are the best for you. If the treatments do not help with pain or do not help you return to your normal activities, they probably should be discontinued.

Manual Therapy

Manual therapies are those treatments that use the hands to move or manipulate the body. They include massage, mobilization, spinal manipulation, and other forms of pressure or motion applied to the body. These therapies are usually provided by chiropractors, osteopathic physicians, physical therapists, or massage practitioners, although a variety of other training programs exist.

Massage

Massage involves applying pressure and stroking to the skin, affecting the muscles and tissues beneath the skin. It can be gentle or firm. It may increase blood flow, relax tense muscles, and provide a healthy stretch to ligaments and tendons. Massage may help decrease the tension, spasm, and pain from your back pain. During your massage, breathe deeply, trying to relax your mind and the

tension in your muscles. Try to find a massage therapist who has experience in working with people with back pain. Tell the therapist how much pressure is comfortable for you.

Mobilization

Mobilization involves moving the joints by another person to increase range of motion when it is limited due to tension. Mobilization is generally a gentle motion applied to an area of your body while you are relaxed. If you are unable to create motion in an area yourself, you may want to see a medical professional who can assist you with mobilization.

Spinal manipulation

Spinal manipulation is a type of mobilization that includes a quick short thrust to move a joint. Studies have shown that spinal manipulation may help some people decrease back pain. Spinal manipulation may be helpful for people if their pain has not improved after 10 to 14 days. However, spinal manipulation has not been proven to improve chronic back pain. There are many forms of spinal manipulation, and there are no studies to show which type of spinal manipulation is helpful for which person or which type of pain. Spinal manipulation should not be used if you have a disc injury. Talk to your doctor or other medical professional about whether spinal manipulation is appropriate for you.

Acupuncture

Acupuncture is the stimulation of specific points on the body by inserting very fine needles through the skin. Several studies have shown that there is a temporary decrease in pain after acupuncture. For patients with chronic pain, however, this is not conclusive.

There are many studies demonstrating how acupuncture affects the body processes, but we don't know the entire story. It has been shown to stimulate the nervous system, releasing chemicals that

affect pain. You might want to discuss this option with your doctor or other medical professional to determine whether or not acupuncture could help you. Acupuncture can be used to decrease pain while you increase your self-care activities.

Practice relaxation

The mind can be powerful in triggering your body to tense muscles, particularly when you are upset or worried. However, with practice, you can relax the mind and reduce your pain and discomfort in your body. In fact, focusing your mind and attention on painful parts during relaxation practice can decrease spasms and discomfort. The more you practice, the more it works. You can learn more about the classes and relaxation programs that Kaiser Permanente offers by visiting or contacting the Health Education Center or Department nearest you.

Breathe deeply

Deep breathing is a relaxation method that can help you relax your muscles and reduce anxiety and tension. With your shoulders and arms resting comfortably, head tall, take a deep breath very slowly through your nose. Then blow the breath out slowly, through your mouth. Imagine that you are gently blowing out a candle. Repeat several times, focusing on your breathing, and feel yourself relax. If your thoughts wander, simply return your attention to your breathing.

For more relaxation tips, please see the “Mind-Body Wellness” chapter of the *Kaiser Permanente Healthwise Handbook*. If you are interested in classes that can help with relaxation or stress, call your Kaiser Permanente Health Education Department. Also, check with your Health Education Center or Department for the *Stress Management for Medical Conditions* relaxation CD.

Distract your mind from pain

Relaxation practice gives you some control over your pain by focusing your attention on something else. Another way to distract yourself

from pain is to focus on activities that are pleasant and interesting to you. You will probably feel less pain if you continue the activities that grab and hold your attention. Activities include hobbies, volunteer activities, reading, movies, social life, family time out, games, physical activity (such as walking or stretching), sports, music, and political events. Make sure that you do at least one pleasant activity a week.

Yoga, T'ai Chi, Chi Gong

Most ancient cultures had a system of movement, such as yoga in India, or t'ai chi and chi gong in China. When done properly, any movement program can increase strength, flexibility, and endurance—and can additionally help decrease pain. When done with good body mechanics, good body position habits are created. Most Kaiser Permanente Health Education Departments have such classes. Talk with your doctor or other medical professional to determine if these classes might be appropriate for you.



Talking with your medical team

Back pain can be confusing and frustrating. You may have a number of questions regarding what is the best treatment for you. For example, many people wonder if they need an MRI (magnetic resonance imaging) or surgery. Fortunately, only a few people do. This booklet will help you decide what is the best treatment for your back pain. If after reading it you still have questions, talk with a member of your medical team.

Diagnostic tests

It is very important that you understand your back pain and what to expect. The information that your physician and other members of your medical team receive from talking with you about your

pain and doing a physical exam is the most helpful information they'll use to treat your condition. In most cases an X-ray or MRI is not necessary. An X-ray or MRI can be ordered when it is needed to direct your care. A member of your medical team will discuss the procedure with you and any possible side effects or risks.

Other conditions associated with back pain

- **Herniated disc.** Sometimes discs may tear or rupture. If the tear is large enough, the gel-like center inside the disc may leak out (herniate) and press against a nerve and cause pain. However, most cases of herniated discs can be managed without surgery.
- **Sciatica** refers to pain that stems from the sciatic nerve being irritated. The sciatic nerve extends out of the spinal cord into the lower back, through the buttocks and down the back of each leg to the ankle and foot. Irritation and inflammation of this nerve may cause pain, numbness, weakness, and tingling in the affected leg. Although a herniated disc is the most common cause of sciatica, sciatica can also be a symptom of other problems, such as narrowing of the spinal canal (spinal stenosis), a squeezed nerve resulting from injury, and certain rare tumors.
- **Spinal stenosis.** Spinal stenosis is the narrowing of the spinal canal. This narrowing can squeeze (compress) and irritate the nerves as they leave the spinal cord. This can cause pain, numbness, or weakness—most often in the legs and feet. The classic symptom of spinal stenosis is leg pain when walking and standing that is relieved by sitting. Narrowing of the spinal canal occurs when growth of bone or growth of other tissues reduce the size of the openings in the bones of the back (vertebrae). The condition most often occurs in people over age 60.

- **Spondylolisthesis** (spon-dee-lo-lis-thee-sis). Spondylolisthesis occurs when one vertebra slips forward over another one. This causes misalignment of the bones of the back (vertebrae). In some instances, this may lead to spinal cord or nerves being squeezed, back pain, and numbness or weakness in the legs.

Additional information about these and other conditions is available in the health encyclopedia through your physician's home page using www.permanente.net or members.kp.org. When using members.kp.org, click on the "Get health advice" pull-down menu and select "Health encyclopedia." Type "back problems" in the search field.

Other treatments

Epidural steroid injections are designed to relieve pain from sciatica, but not cure the source of the pain. Epidural steroid injections work by reducing the swelling and irritation (inflammation) of the nerve roots that may be causing the pain. One major advantage of an epidural steroid injection is that it might make it easier for you to exercise and to participate in other forms of pain management. For more information, discuss this with your physician or other medical professional.

Will I need surgery?

When back pain persists despite non-surgical care, surgery may be an option. Usually, surgery is only recommended when there is a risk of permanent injury to a nerve. At times, severe pain can be a reason to consider surgery. Review the warnings on page 5 and discuss this option with your medical team.



How can I manage the health of my back and body?

Returning to your activities and preventing serious pain from returning is your main goal. Even if you have some pain and restrictions, you'll feel better if you stay active and at work. Talk with your employer. You may need help from co-workers or a change in your work environment. (See page 25 of this booklet, "Modifying your work life.") Simple changes can make staying active and working go more smoothly. The sections that follow suggest techniques to create helpful long-term habits to prevent future back pain flare-ups.

Staying physically active

Keeping a routine of regular physical activity is proven to be one of the best actions that you can take to help keep your back in good shape. Physical activity also releases natural pain relievers in the brain that block or "tune out" the pain from your back. In addition, physical activity works to keep you safe from future injury. Most physicians and physical therapists believe that endurance activity is the best tool for preventing recurrent back pain. Start slowly and build up to 20 to 30 minutes of one of the following activities each day.

Types of endurance activity:

- walking
- low-impact aerobic dance
- bicycling
- swimming

A few days after a flare-up, it is important to slowly return to a more active life. Here are some frequently asked questions and their answers:

- *How much physical activity is okay?*

Try to do at least some activity every day for most days of the week. It is important to keep moving.

- *What activity is the right kind?*

Identify which activity you can tolerate. It may be stretches or other gentle movement. The important thing is to keep moving.

- *How much is too much?*

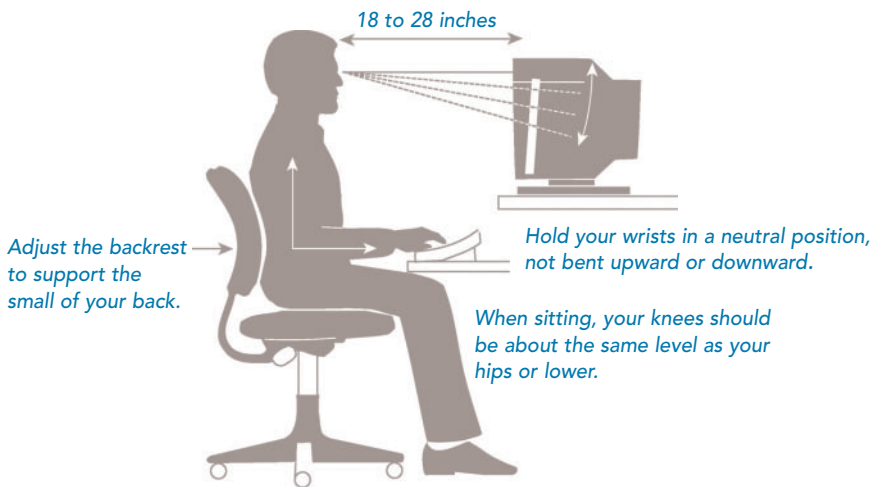
If you are unable to return to your regular activities after having been active, you may have done too much that day. Continue to stay active, but cut the amount (time or distance) of activity in half and slowly begin to increase again.

Modifying your work life

The sooner you get back to work the better you will feel. People can and do manage back pain at work. Simple changes can often make your work easier.

Try these measures to help you at work:

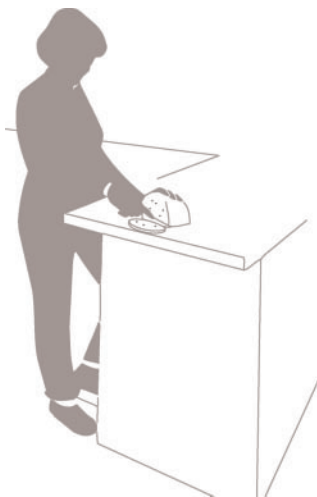
- Discuss the possibility of a transitional work program with your employer. Such a program allows you to return to work while you are recovering. You might do a set of tasks that may or may not be tasks from your regular job. Those tasks can change from week to week as your condition improves. You and your employer can decide which tasks work best for you. Transitional work helps you to recover more quickly and completely to help you go back to your usual job.
- Use good body mechanics to reduce the chance of a flare-up. (See page 10 “Correct your posture and body position.”)
- Check your workstation. If you work at a computer, make sure it is set up so that you can hold your arms next to your body with your elbows at a right angle.



Position the monitor directly in front of you so you don't have to look up or down. Making adjustments so your eyes are level with the top of the screen. If you wear glasses, adjust the monitor so the screen is visible in the reading part of your glasses. These changes will prevent strain on the eyes and body position.

If you need or want to work standing up, keep one knee bent by putting your foot up on something. Shift your weight from one foot to the other whenever you think of it. Remember to take breaks.

- Recognize your limitations. Take breaks.
- Pace yourself. It is important to move as much as possible. Change positions often and get up every hour or two to walk, move, and stretch.
- Manage stress and worry. Do a five minute stress reducer on your coffee or lunch break. See “Belly Breathing” under “Relaxation Skills” in your *Kaiser Permanente Healthwise Handbook*.



Strengthening your relationships

While you know that this is not an easy time for you, keep in mind that this is not an easy time for your family, friends, and co-workers, as well. Sometimes when one person in a relationship is in pain, both people can worry, become irritable, quiet, or impatient. Your friends and family may worry or try to do too many things for you. Back pain does not mean that you need help with everything. Let the people in your life know that they can stop worrying by letting them know that you are taking steps to do more and more on your own. Take some time to talk with them about the changes in your lives.

Improving intimacy and sex

Back problems can get in the way of a satisfying relationship with your partner. However, most people with back pain can and do have full sex lives. Sex and romance add to the closeness and joy in your relationship. Having a good sex life also helps lower your stress, which can help your back feel better.

These tips can help control the pain:

- Begin to talk about what you like and do not like.
- Stretch before sex. Although it may not be spontaneous, it can help you have a more active and enjoyable sex life.
- Spend more time in sensual foreplay.
- Experiment with different positions that keep your back in the neutral position.
- Change positions to stay comfortable. This can be playful and can help keep pain in control.
- Reassure yourself about the fears you have about hurting yourself. This will help you be relaxed and focused on pleasurable sensations.

Remember: Opening yourself to new ways of being intimate with your partner starts you down the path to a satisfying sexual relationship.

Resolving sleep problems

Getting a good night's sleep helps you feel refreshed and gives you energy for daily activities. You may have problems getting a good night's sleep if your back is hurting. Choose a bed with good support to prevent sleep problems. Keep your body in a neutral position to prevent more pain with sleep. Support your back, neck, and head with a pillow. (See page 10 “How you move matters” in this booklet for sleep positions.) You will probably be most comfortable on your side or on your back instead of on your stomach. When rolling over or rising from bed, try to keep your body—from your neck to your hips—facing the same direction.

Keeping a normal sleeping pattern:

- Try to keep a regular sleeping and waking schedule from day to day. Avoid napping during the day.
- Stay physically active. Exercising 20 to 30 minutes each day can help improve your sleep. However, evening activity near bedtime can prevent you from falling asleep.
- Schedule a time early in the day to plan or to “worry.” This can help you work on issues while you are refreshed. It also allows you to set aside your worries so that you can get to sleep at bedtime. Writing down the problems along with their possible solutions can often put them out of your mind at bedtime, allowing you to fall asleep more easily.
- Avoid sleeping pills. Sleeping pills can actually put you in a bad mood, reduce your energy level, and decrease memory and concentration.



Preventing problems in the future

It is common for back pain to return from time to time. Staying active and modifying activities is an important way to manage recurrent back pain. A strong, flexible back will help flare-ups happen less often, be less severe, and not last so long.

This booklet offers many tips and techniques to help you modify your activities and to stay active. Keep experimenting until you find what works best for you. It is normal to get sidetracked or feel frustrated at times.

- Remember, the pain will improve and that pain doesn't necessarily mean that you are injuring yourself.
- Focus on what you want to do, not what you feel you cannot do.
- Stay active and live life as normally as possible.
- Prioritize your activities.
- While you may have pain at times when moving around, movement will help keep the pain in control.
- Moving more will also help your confidence and help you develop a positive outlook on your life.
- You don't have to handle this alone. You can ask your medical team at Kaiser Permanente for help. Also, ask around to see if any of your co-workers or friends has had back pain and what they have tried that worked. Many people have had back pain at some time in their lives.

Final thoughts

While back pain can be a frustrating experience, people who use the tips in this book find that they feel much better. They are also less likely to develop chronic back pain. As time passes and you feel better, you might forget to keep up some of the tips that keep your back in shape. If you get sidetracked, return to your plan and the suggestions in this book.



Kaiser Permanente resources

- Health Education Departments and Centers
- *Kaiser Permanente Healthwise Handbook*, a customized self-care guide
- Online health information and self-care tools, your physician's Home Page, and members.kp.org (see the "Featured health topic" on "Pain management")
- Behavioral Medicine Specialists who work with you to better cope with health problems
- Clinical health educators who work with you to support self-management skills
- Health Education and movement classes that teach skills and provide support for improving or preventing back pain
- Group appointments that encourage group involvement, promote learning, and provide medical care
- Physical therapy classes that teach back strength and flexibility methods

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 medical professional. If you have persistent health problems, or if you have additional questions, please consult your doctor. If you have questions or need more information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse any brand names; any similar products may be used.