

Back pain advice

Introduction – spinal anatomy

The spine is a flexible column of bone made up of 24 individual vertebrae, followed by the sacrum and coccyx.

The spine has three natural curves which divide it into 3 areas, cervical (7 vertebrae), thoracic (12 vertebrae) and lumbar (5 vertebrae).

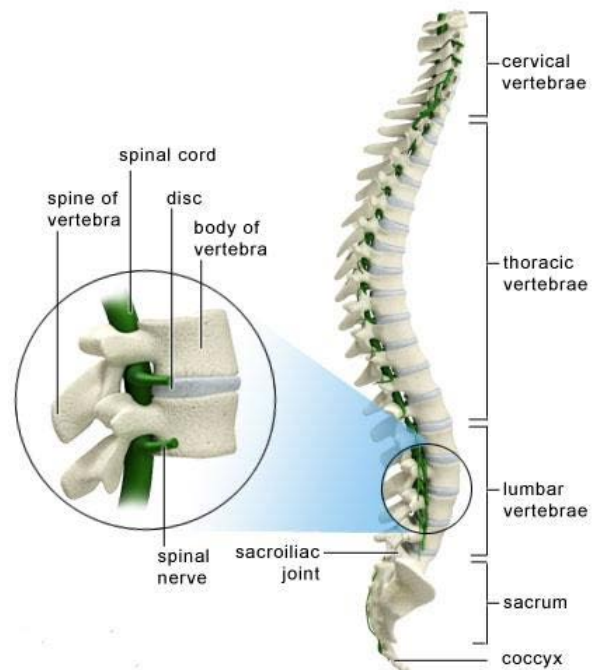
Intervertebral discs cushion the space between vertebrae and act as shock absorbers.

The vertebrae are linked by facet joints which connect each vertebra to the one above and below.

The spine serves to protect the spinal cord, which runs inside the spinal canal.

The spinal cord is made up of nerve tissue and carries messages from the brain to other parts of the body. The spinal cord is also responsible for carrying out many of the body's reflex actions completely independently of the brain. In the lower back the spinal cord becomes the cauda equina.

Throughout the spine nerve roots branch out from the spinal cord to form a network of nerves which run through the body.



Back pain

Back pain can exist in one or many areas at the same time. It can be specific to one area or cover a large area. Low back pain can also be felt in your bottom and legs. Most back pain will settle quickly (at least enough to get on with normal life).

The anatomy of the spine is complicated and there are many reasons for someone to experience back pain; often the reason cannot be identified. A lot of back pain stems from prolonged poor posture; it is rarely due to a serious disease. It can be frustrating not to know exactly what is wrong but in another way it is good news as it means there is no serious disease or damage in your back.

Most back pain comes from the muscles, ligaments and joints in your back not moving and working as they should. Most people with back pain have no damage in their spine; very few have a slipped disc or trapped nerve (even these most often get better without intervention).

Investigations

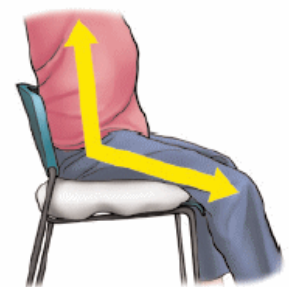
To try and determine the cause of your pain, the doctors will examine you physically to see what triggers the pain, following on from this they may order further investigations. These could include blood tests, x-rays and MRI scans.

Analgesia (pain relief)

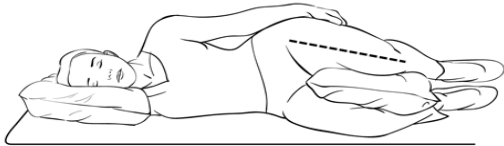
The doctors should prescribe you regular analgesia and this should be enough to allow you to mobilise. Some drugs are written on the drug chart to be given only if the patient is in pain and will not be given routinely; therefore, it is important to be honest about your pain levels. There are various types of painkillers that can be prescribed. If you feel that your current regime is not controlling the pain adequately, then please speak to your doctors or nurse about it.

Advice

- Prolonged bed rest is not recommended; it is important to stay as active as your pain allows.
- Try to walk with an upright posture.
- Sit for short spells only, it is best to perch on the edge of the bed or on a firm high chair, try to ensure your knees are lower than your hips.
- Try a folded towel in the small of your back.

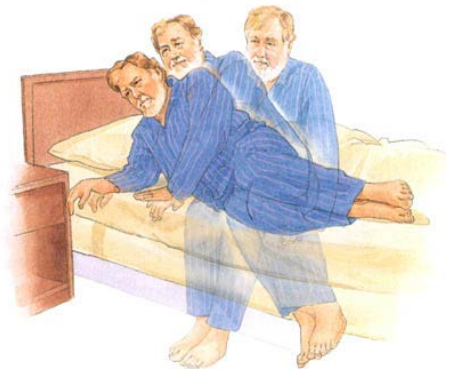


- Get up and stretch/change position every 20-30 minutes.
- If you feel tired or sore rest lying down rather than sitting.
- Some people prefer a firm mattress or try boards beneath your mattress.
- Recommended lying positions



- On your side with a pillow between your knees.
- On your back with the hips and knees bent and lower legs supported on a pillow.
- On your front with or without a pillow under your tummy.

- To get up from lying on the bed roll on to your side, drop your legs over the edge of the bed and sit up.
- To lie on the bed first sit on the edge, lie down on to your side and lift your legs on to the bed so you are in side-lying, then reposition as comfortable.
- Stress can affect the amount of pain you feel. Tension can cause muscle spasm and lead to increased pain.
- Physically fit people generally get less back pain and recover faster if they get it.



Exercises

Your physiotherapist should advise you if the following exercises are appropriate for you condition; do not do them otherwise. They should not aggravate your back pain.

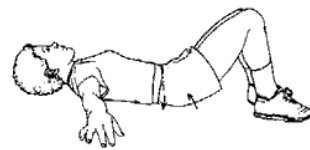
- Knee rolling

Lying on your back with your knees bent, let both your knees drop to one side then the other slowly and gently, you should feel a slight stretch in your lower back.



- Pelvic tilt

Lying on your back with your knees bent, place your hand in the small of your back. Press back on to your hand, hold a few seconds then release.



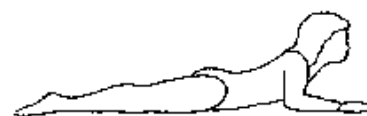
- Alternate leg hugs

Lying on your back with your knees bent, bend one knee up and hold it with your hands. Gently draw it up towards your chest, hold for a couple of seconds then gently lower, repeat with the other leg.



- Back extensions

Lying on your front, push up on to your elbows, hold approx 10 seconds, then lie back down flat.



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This document can be made available in other languages and formats upon request.

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