

# **SPINAL COLUMN “ Newsletter “ Issue 5, June. 2004**

**Brought to you by:**

**Dr. Issam Ayache “Chiropractor”**

## **BACK PAIN TREATMENT (I)**

In the last few issues we discussed the causes of back pain. In the next two issues we'll discuss the available treatments for this problem.....

There has been a revolution in thinking about back care, in which most people can and do deal with the pain themselves most of the time...

### **Back facts.**

- Back pain or ache is usually **NOT** due to any serious disease.
- 80% of the people will have back pain at least once in their life time.
- Pain can be very annoying and you need to reduce some activities for a time.
- Your back is designed for movement. The sooner you get back to normal activity the sooner your back will feel better.
- The people who cope best are those who stay active and get on with their life despite the pain.
- Most back pain comes from the muscles, ligaments and joints in your back.
- Stress can increase the amount of pain you feel. Tension can cause muscle spasm and the muscles themselves can become painful.
- People who are physically fit generally get less back pain, and recover faster if they get it.

Below are the findings of the study done by the **Agency for Health Care Policy and Research** of the **U.S. Department of Health and Human Services.**

### **Heat or Cold.**

In the first 24 – 48 hours it is better to try a cold pack on the painful back for 5 – 10 minutes at a time, every two hours. After that you can alternate cold and heat ...When the pain lessens you may use heat. A hot water bottle, a bath or a shower.

### **Patient Education**

If the initial assessment detects **NO** serious condition, assure the patient that there is “no hint of a dangerous problem” and that “a rapid recovery can be expected”. Patients who do not recover in a few weeks may need more extensive education about back problems and the reassurance that special studies may be considered if recovery is slow.

### **Patient Comfort**

Comfort is often a patient's first concern. Sometimes nonprescription analgesics may provide sufficient pain relief, however the use of such **analgesics or nonsteroidal anti-inflammatory drugs or muscle relaxants can cause stomach irritation/ulceration , renal or allergic problems, drowsiness, decreased reaction time, clouded judgment and potential misuse...**

**Traction** applied to the spine **has not been** found effective for treating acute low back pain.

**Physical modalities** such as massage, diathermy ultrasound, cutaneous laser treatment and electrical nerve stimulation also **have no proven** efficacy in the treatment of acute low back symptoms.



**Invasive techniques** such as injection in different points in the skin **have no proven** benefit in the treatment of low back symptoms.

**Bed Rest.** Most patients **will not require** bed rest. Prolonged bed rest (more than 4 days) has potential debilitating effects, and the efficacy in the treatment of acute low back problems is **unproven**. Two to four days of bed rest are reserved for the patients with the most severe limitations (Due primarily to leg pain)

In the next issue will continue with other forms of treatments of

low back pain.

In over 24 years of practicing chiropractic, **Dr. Issam Ayache** has maintained that early detection and conservative treatment of back problems coupled with daily exercise and a healthy life style will greatly reduce the chances of back pain.

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