ACUTE BACK PAIN

How to Cope with It and Promote Recovery

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The purpose of this article is to offer you some practical and usable information for coping with acute back pain and to help accelerate your recovery. The author does not attempt to present ultimate solutions for treating acute back pain, but rather to share ideas and practices gathered from his 17 years of working with patients suffering from back pain.

Perhaps right now you are experiencing some of the common symptoms of acute back pain:
• a sharp, severe pain in your back
• pain radiating down your leg
• numbness or tingling
• difficulty moving
• bent or crooked posture and inability to straighten up
• pain when you get up from a chair
• difficulty putting on socks
• inability to find a comfortable position or get out of bed
• muscle spasms when you take a breath

Here are some tools you may find beneficial to release tension and spasms, reduce pain, restore the joy of mobility and ease of breathing, and recover full function.

1. DON’T PANIC

It is normal to be afraid that something very serious is happening. Most of us in this situation think “What if the pain doesn’t go away?” or “What if this will change the rest of my life?” Sometimes the fear of serious and permanent consequences prompts patients to decide to rush into unnecessary treatments, at times even surgery. In a study described in a New York Times article (“Study Questions Need to Operate on Disc Injuries,” 11/22/06) data showed that no one who delayed having surgery got any worse or developed permanent nerve damage. Before that study was published, patients were frequently advised to undergo surgery to “prevent permanent nerve injury.”

Actually, in most cases back pain, even when severe, is transient. Stop thinking too much! Your main job now is to get better. Everything that interferes with that must be put aside.

Did you know that negative thinking can slow down your recovery? There is a “nocebo effect” (negative placebo reaction) where a person’s fear, pessimistic belief, doubtfulness and poor expectation can have harmful, injurious and undesirable consequences. Studies show that people experience the negative side effects of medications even when they received only a sugar pill. (In one study 50% became drowsy, 25% had headaches and 18% reported heaviness and fatigue.)

Surround yourself with positive energy. Create your own placebo reaction or, if you are inclined to be skeptical, at least be aware of the consequences of your negative thinking. Imagine a mother lovingly caring for her crying baby. She does not assume immediately that her child’s discomfort is caused by a life threatening disease. She checks the diaper, makes sure the baby is not too warm or too cold, and then checks if the little one is hungry or thirsty. She tries to create a safe environment, and soon enough the baby stops crying. You, too, in a few hours or several days, can create an environment that will relieve your pain and suffering.

2. YOU ARE NOT ALONE

At this very moment there are thousands of other people in a similar situation. Back pain is very common. Statistics show that 80% of Americans will experience back pain at some point in their lives. In fact, it would be unusual for anyone to go through life without experiencing back pain at some point.
3. Consult Your Doctor

Your doctor will examine you to rule out any serious illness or symptoms such as

- Loss of bowel or bladder control (incontinence)
- Foot drop (extreme weakness or paralysis of the muscles of the leg)
- Systemic symptoms: fever, sudden weight loss, changes in general health

The doctor may recommend some tests (X-ray or MRI) and an appropriate course of treatment including medication (for pain, inflammation or muscle relaxation).

4. Look for Comfortable Positions

At the beginning you may think no comfortable position exists. Here is where the need for patience comes in. When we are in pain we tend to look for a quick fix, so we try to find a comfortable position, but if we don’t succeed or only do so partially we get discouraged and abandon the search. Some positions actually are better than others, and “getting a little better” is the first and crucial step.

I remember a patient I will call Peter who came to my office in such excruciating pain that he could not tolerate any position for more than two or three minutes. We spent the entire 45-minute session searching for postures in which his pain would be at least tolerable. Gradually, over a period of a few sessions, Peter was able to tolerate longer periods in one position. Eventually, after a few months, Peter became pain free, even though his MRI showed a ruptured disc compressing the nerve roots.

Here are a number of positions that many back-pain sufferers have found helpful.

- Side lying with pillows between your thighs, knees and lower legs (Sometimes this only works on one side.) You may find more comfort when your legs lie parallel to each other. The size of the pillow under the head and between the legs varies from person to person and even sometimes from side to side.

You may find, for example, that when you lie on the right side your pain decreases with two pillows but on the left side just one pillow or none will bring comfort. Again, please be patient. Every little detail matters!

- Hook lying—on your back with lower legs resting on a chair
- This is especially helpful when you find that lying on your back with your legs straight increases the intensity of the pain, but bending your knees reduces the pain. A version of this position can be achieved by using rollers (rolled beach towels or pillows) under the knees.
- Kneeling and resting your torso (Including abdomen) on a bed or sofa
- Lying on your stomach
- Some people find this position very helpful, although for many it might be impossible. Here again there are many variations. Try it, for example, with a pillow under your belly, your head turned toward one side, the knee on that side pulled toward your chest. The elbow on the side of the bent knee is bent, with the hand near your face, and the opposite arm straight.

Those for whom arching of the back brings comfort may prefer to lie on the stomach with elbows bent, sometimes even leaning on the elbows. Some people like to read books in this position.

The important thing is to find on your own which of these positions gives you the most comfort. This brings us to the next point.

5. Change Positions Frequently

Staying in one position for a long time (even a comfortable one) contributes to stiffness, weakness and more pain. During waking hours try to change position every 15 to 20 minutes. Sit a little, lie down a little, and walk around a little, even if it is just a short stroll to the bathroom or the kitchen for a glass of water. Proper movement within your range of comfort will limber you up, reduce muscle spasm and release muscle tension. Frequent changes of the body position promote flow of fluid (nutrition) to the discs and therefore accelerate the healing.

Avoid bed rest! Bed rest should only be used for severe pain and then only for one or two days.
Did you know

- For every two days of bed rest, heart rate increases one beat
- In healthy men, the rate of bone loss increases 50 times with bed rest (Although bone minerals are gradually restored after bed rest, the rate of restoration is four times slower than the rate of loss.)
- For every week of complete bed rest, muscle strength declines 10 to 15 percent
- Muscles lose their elasticity and joints lose their full range of motion when they are immobilized for extended periods of time. (That's why it's hard to get your legs moving again after hours sitting in a movie theater.)

6. **DO A LOT OF DIAPHRAGMATIC (BELLY) BREATHING THROUGHOUT THE DAY**

Belly breathing successfully reduces tension, pain and emotional stress. Many systems such as yoga, meditation, relaxation training and biofeedback use this type of breathing. Here is how it works:

- Assume a position that is most comfortable for you. (This can be done in any position.) Place your hands, or at least one hand, on your lower abdomen so you can monitor the movements; your hands are below your belly button and above the pubic bone.
- As you inhale, your abdomen expands in all directions, like a balloon. When you exhale, simply allow your belly to sink down without any effort. If possible, inhale through your nose (it filters and warms up the air) and exhale either through your mouth or nose. As you exhale, release, let go.
- Make it simple, even if at the beginning you find your breathing is short and shallow or that you tend to hold your breath. Do not try to improve by forcing your breath. Do not try to correct anything. Just simply breathe in and out, be fully present and bring your awareness to every breath. You will find that within just two or three minutes your breathing will improve spontaneously.

Recently I worked with a patient I’ll call Jane, who experienced a very sharp pain, especially as she changed position. During the first session she was in so much pain she could not stand upright. She was bent over, and her chest was shifted to the right. Here is how we applied belly breathing to lessen her pain: Jane would take five slow diaphragmatic breaths before getting up from the bed. As she got up, her pain became severe, so she took another five breaths in the sitting position. Then she stood up—and took another five breaths. Jane would walk 10 or 15 feet, then get back into bed and take another 10 breaths. She practiced this diligently many times. In just two days her pain was significantly lessened, and she was able to stand and walk upright.

7. **“ROLL” TO GET OUT OF BED**

Often getting in and out of bed is accompanied by severe pain. One way to reduce the pain is to limit spinal movement. I do not recommend “fixing or holding the spine motionless” in the long run, but during the acute stage it can be very helpful. Imagine you are wearing a brace or corset that keeps your pelvis and your ribs in a fixed relationship (that is, your torso is just like a cylinder). It may take some practice before you master this technique.

Now, from a lying down position on your back, with your knees bent and your feet a shoulder-width apart, roll onto your side. Your knees, pelvis, chest, shoulders and head should roll like one unit to
prevent twisting. Then, from this side-lying position (close to the edge of the bed), let your lower legs swing off the side of the bed while you push with the upper hand. Your body, again, is held like one unit. The weight of your legs will help lift your head and upper body into the sitting position.

8. Get Up from a Chair with a Long Spine
You don’t need to bend, arch or twist your spine to get out of a chair. The following technique, which is similar to the one described for getting out of bed, can keep your spine beautifully long and minimize strain on your lumbar region:

Sit on the front edge of the chair. Lean your trunk forward by moving in your hips. Your pelvis will tilt forward but the lumbar spine should remain unchanged. Imagine that you have scotch tape attached along the sides of your spine – do not rip the tape off as you lean forward. Practice this simple movement until you can perform it without any increase of pain. Gradually increase the size of the movement until you are able to lift your buttocks off the seat of the chair. Think of leaning forward instead of getting up from the chair. You may surprise yourself by getting up without any effort. Search for the path that is easiest and most pain free for you.
9. USE STRATEGIES FOR GETTING DRESSED

Usually, when one has back pain, the most challenging part of getting dressed is putting on underwear, pants, socks and shoes. You may want to try the following: Lie on your back with knees bent. Bring one foot up toward your chest; cross one ankle over the other (bent) knee, thus allowing your hands access to your foot. You can use a similar movement sitting on the edge of a chair or bed. If it is too difficult to cross your legs, you can try to sit farther back on the seat and place your foot on the bed with your knee bent to the side or you can place another chair in front of you on which to place your foot.

10. PRACTICE RELAXATION AND LIMBERING EXERCISES

Dr. Hans Kraus, with whom I had the privilege of working, designed the following exercises. His idea was to create a universal program that would be safe and helpful for most back pain sufferers. I recommend you review these exercises with a medical professional (preferably a physician or physical therapist) to make sure they are suitable for you. A study involving 11,809 subjects showed that 80% of participants using these exercises reported pain reduction in six weeks.

Please use these exercises responsibly. Stop if you feel any increase in your symptoms. You should feel better after performing the relaxation and limbering exercises. It is possible that you need to start with only the first three or four and not the entire seven movements (Level 1). The emphasis should be on letting go; relaxation at this point is much more important than stretching. All the movements should feel simple, easy and pleasant. Three or four repetitions of each exercise are sufficient. The idea is to move a muscle and joint and then let them relax as you work on another group. I usually recommend two exercise sessions a day. Do not rush through them. It should take about 12 to 15 minutes to do the first seven exercises.

See the attached illustrated exercises

11. USE HEAT AND COLD

There is no rigid rule about applying either heat or cold. Try to find out for yourself which works better. Sometimes alternating heat and cold packs may be more beneficial than using just one. Be aware that people with diminished skin sensitivity (especially diabetics) should be very careful in the use of topical heat or cold packs.

- Cold packs are usually most effective right after the onset of the pain/injury. Ice packs help to relieve muscle spasm, reduce swelling and inflammation. Wrap the cold pack in a towel and check your skin frequently to prevent frostbite. Eight minutes, two or three times a day, is usually sufficient, but you may repeat cold pack applications as often as once an hour.
12. Accept that Healing Takes Time

For some people relief from pain may come in just a day or two; others may need a week or longer. With back pain, as with other ailments (like the flu, for example), you cannot rush things. A sense of urgency creates additional stress, which can actually make things worse. You become tense and irritated, thus making your muscles more prone to spasm and slowing your progress. Getting upset brings no benefit. Just as with a common cold, you need a few days to get better. The proper conditions for healing can markedly speed up the process of recovery. When you have the flu, you stay in bed, drink lots of fluids and take medication to create the proper conditions for recovery and to prevent complications like pneumonia. The same applies to back pain.

Your office will survive few days without you. The “urgent” projects can wait or be done by someone else. You may be tense, under emotional stress, overworked. You may have no time for exercise or proper rest, so your posture is poor. In a nutshell, right now your system needs to be taken care of. The good news is that you can change, and your condition can improve. But don’t set any deadlines. Accept the fact that healing takes some time.

13. Use Your Imagination

The use of imagination can produce immediate, positive results. When my own back “went out,” I remember sitting on my bed getting ready to stand up, expecting to experience the pain I had felt every time I tried to get up. On my first attempt to stand I experienced a sharp back pain. Instead of fighting it, I sat back and tried to imagine what I would have to do if I wanted to jump forward and perform a forward roll.

Of course, this was an outrageous idea. I could barely move! Still, I allowed myself to imagine the process. I asked myself how my feet would have to be placed to allow such a movement—and adjusted them to fit the image. Then I considered how I would have to sit on the bed. Would my pelvis be forward or back? Each time I found something in my body’s organization that I could simply adjust or change. The whole process of imagining these positions took about two minutes. Then I swiftly got up without any pain. It was a revelation!

One of the functions of our brain is to solve problems. We must give it a chance to work. Recent brain research shows that the mind itself, merely by thinking, can change the brain. In one experiment, two groups of volunteers played a five-finger piano exercise. One group practiced on a piano; the other group merely thought about practicing it. While actual physical practice produced changes in each volunteer’s motor cortex, so did mere mental rehearsal. Like actual movement, imagined movements change the cortex. (Schwartz and Begley, The Mind and the Brain: Neuroplasticity and the Power of Mental Force, Regan books, 2002)

If you want to improve an action using your imagination, chose an action that is familiar to you, and make it much more challenging. You need a clear picture of the action in your mind. If you have never done a summersault, don’t use that as an image because it would only be a concept for you. You need to select a concrete sensory experience. For example, if you want to improve your ability to push open a heavy door, try to imagine how you would organize your body to push a car. If lifting a teapot is a problem for you, imagine how you would use your body to lift a heavy box.

Try it. You may have an “Ahah” experience.

In conclusion, I hope the practical information outlined in this article has helped you cope with your acute back pain, and that you will keep it as a handy reference for any future problems.