

How worried should I be about low back pain? — Do not assume the worst. Almost everyone gets back pain at some point. Low back pain can be scary. But it is almost never serious. It usually goes away on its own. The cases that require urgent care or surgery are rare.

See your doctor or nurse if you have back pain and you:

- Recently had a fall or an injury to your back
- Have numbness or weakness in your legs
- Have problems with bladder or bowel control
- Have unexplained weight loss
- Have a fever or feel sick in other ways
- Take steroid medicine, such as prednisone, on a regular basis
- Have diabetes or a medical problem that weakens your immune system
- Have a history of cancer or osteoporosis

You should also see a doctor if:

- Your back pain is so severe that you cannot perform simple tasks
- Your back pain does not start to improve within 3 to 4 weeks

What are the parts of the back? — The back is made up of (figure 1):

- Vertebrae — A stack of bones that sit on top of one another like a stack of coins. Each of these bones has a hole in the center. When stacked, the bones form a hollow tube that protects the spinal cord.
- Discs — Rubbery discs sit in between each of the vertebrae to add cushion and allow movement.
- Spinal cord and nerves — The spinal cord is the highway of nerves that connects the brain to the rest of the body. It runs through the vertebrae within the spinal canal. Nerves branch from the spinal cord and pass in between the vertebrae. From there they connect to the arms, the legs, and the organs. (This is why problems in the back can cause leg pain or bladder or bowel problems.)
- Muscles, tendons, and ligaments — Together the muscles, tendons, and ligaments are called the "soft tissues" of the back. These soft tissues support the back and help hold it together.

What causes low back pain? — In most cases, doctors and nurses do not know what causes low back pain. Pain can happen if you strain a muscle or hurt a tendon or ligament. But if that is the cause of your pain, doctors and nurses have no way of knowing it for sure. Pain can also happen if you have:

- Damaged, bulging, or torn discs
- Arthritis affecting the joints of the spine
- Bony growths on the vertebrae that crowd nearby nerves
- A vertebra out of place
- Narrowing in the spinal canal
- A tumor or infection (but this is very rare)

Should I get an imaging test, like an MRI? — Most people do not need an imaging test. Most cases of back pain go away within 4 to 6 weeks – or in even less time. Doctors and nurses usually do not order imaging tests before then unless there are signs of something unusual.

If your doctor or nurse does not order an imaging test, do not worry. He or she can still learn a lot about your pain just from looking you over and talking with you. Plus, treatment can start right away, even without an imaging test.

How can the doctor or nurse tell what is wrong just by talking to me? — Your symptoms tell your doctor or nurse a lot about the cause of your pain. If your pain spreads down the back of one thigh, for instance, that could be a sign that one of the nerves that go to your leg is being pinched by a bulging or torn disc. If, on the other hand, your pain goes all the way down both legs, that could be a sign that you have bony growths on your spine.

What can I do to feel better? — The best thing you can do is to stay as active as possible — even if you are in pain. People with low back pain recover faster if they stay active. Walk as much as you can. If you stopped working because of your pain, try to get back to your normal routine soon. But do not overdo it.

When you start to feel better, ask your doctor or nurse about exercises that can help strengthen your back. These exercises can help you get better faster and might make it less likely that you will have pain again.

How is back pain treated? — A small number of people end up needing surgery to treat back pain. But most people do well with simpler treatments, such as:

- Medicines — First, you can try pain medicines that you can get without a prescription. In many cases, doctors suggest trying an NSAID, such as ibuprofen (sample brand names: Advil, Motrin) or naproxen (sample brand name: Aleve) first. These work better than acetaminophen (Tylenol) for back pain.

If non-prescription medicines do not help, doctors and nurses can prescribe stronger pain medicines. Sometimes, doctors suggest a medicine to relax the muscles (called a "muscle relaxant"). But keep in mind that muscle relaxants are not generally used in people older than 65. In older people, these medicines can cause side effects such as trouble urinating or confusion.

- Physical therapy to teach you special exercises and stretches
- Spinal manipulation, which is when someone like a physical therapist or a chiropractor moves or "adjusts" the joints of your back
- Acupuncture, which is when someone who knows traditional Chinese medicine inserts tiny needles into your body to block pain signals
- Massage
- Injections of medicines that numb the back or reduce swelling

What can I do to keep from getting back pain again? — Stay active and learn exercises that help strengthen and stretch your back. Learn to lift using your legs instead of your back. And avoid sitting or standing in the same position for too long.