Managing low back pain
If you have low back pain, you are not alone. Up to 84 percent of people will experience back pain at some point in their lives. It can interfere with work, daily activities, or simply enjoying life. Fortunately, most low back pain goes away within a few days and can be managed at home with self-treatment. If you experience low back pain that does not resolve on its own, contact your health care provider. He or she may diagnose your back pain as “acute” (pain lasting up to four weeks), “subacute” (pain lasting four to 12 weeks), or “chronic” (pain lasting more than 12 weeks).

Chronic low back pain
Chronic back pain does not mean there is damage to your spine. The back is designed for a lot of movement, so the sooner you are active, the better. If possible, continue to work and make simple changes in how you do your job. It’s common for people with low back pain to also have stress, anxiety, or depression, so it’s important to get treatment for these symptoms as well. If your pain does not go away, your health care provider can check for more serious problems and suggest other treatment options. The good news is most people with chronic low back pain will not need surgery.
Your back at a glance

Comprised of bones, muscles, nerves, ligaments, and tendons, your back is an amazing part of your body. Your spine begins at your neck and runs down to your tailbone. Blocks of bone, called vertebrae, are stacked together to support your weight and protect your spinal cord. Between the vertebrae are the intervertebral discs. These discs are tough, flexible shock absorbers that cushion the vertebrae. Strong bands of tissue known as ligaments and tendons help to hold the bones of your spine in place and attach the large muscles of your back to the bones. When these various parts work together in harmony, they keep your back strong and allow you to bend and move easily. Most back pain occurs in the lower back, which is also known as the lumbar spine. The lumbar spine supports the weight of your body and allows you to move.

What causes low back pain?

The exact cause of low back pain can be hard to determine. Maybe you helped your neighbor move and used your back more than usual, or possibly you lifted something the wrong way. Perhaps you stood or sat too long in one position, making your back muscles stiff and sore. If you work out for the first time in a while and do several push-ups, you might expect your upper-arm muscles to be sore the next day. The same goes for your back muscles. Back pain may develop gradually during the day or you may notice it during the night or when you wake up. The quality of back pain may vary from sharp and stabbing to dull and aching – and everything in between.
Is back pain serious?

Most of the time, low back pain is not serious and is not the result of an actual injury to the back/spine. The pain is often attributed to overuse of muscles, ligaments, tendons or an exacerbation of degenerative (wear and tear) changes in the spine. Degenerative changes of the spine are common as we age and do not mean that something is wrong. Very serious low back problems are rare. Your spine and the body parts that work with it are strong, so it’s difficult to have a serious back injury without an obvious cause (e.g., a car accident or a fall from a height).

What can I do if I have low back pain?

Remaining active is key to managing low back pain. Although it may be hard to remain active when you are in pain, research shows that prolonged periods of inactivity, like staying in bed, may weaken your bones and muscles, making your back pain worse. Educate yourself about self-treatment options during periods of acute pain or flare ups of chronic pain. Remember, there is relief in sight: Most people who have low back pain will experience rapid improvement within the first month.
What are my Options?

There are treatment options both with and without medication.

**Treatment with medication:**
Most acute episodes of low back pain can be resolved with over-the-counter (OTC) medicines, such as nonsteroidal anti-inflammatories.

**Over-the-counter medicines:**
OTC medicines are available without a prescription. They are very effective for reducing inflammation, swelling, and pain. Effective OTC pain relievers include nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen, and naproxen sodium (see Table).

**Caution:** You should not take two similar drugs such as aspirin, ibuprofen, or naproxen sodium together.

OTC medications should be taken with caution. Do not exceed the recommended dosage of any medication without consulting your health care provider. If you are taking prescription medicines, nutritional supplements, or herbal remedies, talk with your health care provider or pharmacist to be sure an OTC medicine will not negatively interact with any of the drugs or supplements you are taking. The Food and Drug Administration advises that consumers follow directions when taking any medication. The active ingredients of NSAIDs are safe and effective when you follow the labeling directions or the advice from a health care professional. Using more medication than recommended can cause serious injury.

<table>
<thead>
<tr>
<th>Generic Name</th>
<th>Brand Names</th>
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<tbody>
<tr>
<td>Aspirin</td>
<td>Bayer®, Bufferin®, Ecotrin®</td>
</tr>
<tr>
<td>Ibuprofen</td>
<td>Advil®, Motrin®, Nuprin®</td>
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<tr>
<td>Naproxen</td>
<td>Aleve®</td>
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There are many safe and effective ways to relieve your low back pain without using medication. Sometimes these methods are used in combination with drug treatments. Many of these pain-relieving methods can be used at home; others require the help of a health care provider. Remember to talk with your health care provider about any pain-relieving methods you are planning to use.

**Cold Applications:**
1. For a day or two, apply a cold pack for about 20 minutes at a time, three or four times a day.
2. Always wrap cold packs in a thin protective layer such as a towel or face cloth. This will protect your skin. A bag of frozen peas makes a great cold pack.

**Heat Applications:**
1. If applying a cold pack has not relieved the pain after two or three days, apply moist heat.
2. Wrap a hot water bottle in a towel or take a warm shower.
3. Apply moist heat about 15 to 20 minutes, two or three times a day.

*Do not use heat if you injured your back in a fall, or if the heat increases your symptoms.*
Minimize bed rest

Staying in bed can make you stiff and cause supporting back muscles to become weaker; some movement is necessary to heal properly. Bed rest is a consequence of having pain, not a form of treatment for low back pain. Get active as soon as you can.

Treat your own back with stretches and exercises

Recovery from an acute injury takes time. It is important to increase your activity gradually, so you do not increase your discomfort. If you suffer from an acute back injury, begin your exercise regimen by performing stretches:

1. Perform stretches in a smooth motion and hold the position for a few seconds; do not bounce or jerk while stretching.
2. Do these stretches and exercises after a day or two of rest, if rest is necessary.

You may experience some discomfort when doing these stretches. If the discomfort increases and remains the following day, consult your health care provider. Keep moving.
Pelvic tilt
1. Lie on your back.
2. Bend your knees at a 90-degree angle.
3. Tighten your stomach muscles and buttocks.
4. Slowly push your lower back downward.
5. Hold your back in this position for five seconds.
6. Slowly return to normal and relax.
7. Repeat five times.
Backward Stretch

1. Stand upright.
2. Place your feet a shoulder width apart.
3. Place your hands on your lower back.
4. Lean backward while keeping your neck straight.
5. Lean further back until you feel a slight stretch in your back.
6. Hold for a count of five.
7. Return to the upright position.
8. Repeat three or four times.
Lower back and hip stretch

1. Lie on your back with knees bent and feet flat on the floor.

2. Press your lower back onto the floor.

3. Grasp one knee with both hands and pull toward your chest keeping your head on the floor.

4. Keep the other knee bent with your foot on the floor.


6. Return to starting position.

7. Repeat with the other leg.

8. Repeat 10 times on each leg for three sets.
Begin exercise as soon as you can

Exercise regularly, including stretching, to keep your joints flexible and your back and abdominal muscles strong.

Choose activities and sports, such as walking, swimming and biking, that are less likely to place your lower back at risk of injury.

Always consult with your health care provider before beginning any exercise program. Your health care provider may recommend working with a physical therapist to learn more about exercises that are right for you.

In general, perform your exercise program continuously for 10–20 minutes every other day.

If you do not have increased pain after one week, increase this activity by 5 minutes every other day.

Your goal should be at least 30 minutes of continuous exercise at least three times per week.
Adjust your daily activities

You may need to change the way you do some of your daily activities when you have back pain.

Sleeping

Find a sleeping position that is comfortable for you. You might try sleeping on your back with a pillow under your knees or on your side with a pillow between your bent knees.

Sleep on a contoured pillow (with a shallow curve for the head) to help keep your neck and spine aligned during sleep.
Getting out of bed
Roll on your side and push your body up with your arms.
Bend your knees and lower your feet to the floor. Use your legs to lift your entire body.
Getting into a vehicle

1. Use the door to help you sit.
2. Grasp the steering wheel for support when seated, and slowly swing both legs into the car.
3. If you use a seat pad or back support, secure it to the seat to prevent slippage.
Getting out of a vehicle

1. Use the steering wheel as leverage to help pivot your lower body out of the car.
2. If possible, slowly swing legs out of the car at the same time to prevent twisting your back.
3. Use the door for support as you raise your body with your legs.
Sitting

1. While sitting at work or at home, try to maintain good posture.
2. Keep your knees at a 90-degree angle.
3. Keep your feet flat on the floor or on a footrest.
4. Use a back support or a rolled up towel to support the normal curvature of your lower back.
5. Keep your ears, shoulders, and hips in a straight line perpendicular to the floor.
6. Bend your elbows at about 90 degrees, with your wrists parallel to the floor.
7. Allow your arms to rest on the soft armrests of a chair. This will also relieve some compression on your lower back.
When should I see my health care provider?

See your health care provider if you experience any of the following problems within a few days of a back injury or the onset of back pain:

1. Pain that keeps you from moving
2. Pain that runs down a leg
3. Night pain that keeps you from sleeping
4. Pain that increases after a few days rest
5. Pain that does not lessen after rest and a period of self-treatment

Seek immediate attention from your health care provider if you have any of the following with back pain:

1. Difficulty controlling your bladder or bowels
2. Loss of sensation in the groin area or between your legs
3. Pain following a fall or impact to the back
4. Severe leg pain down both legs, weakness, tingling, numbness, or inability to move
5. Pain that is steadily increasing over several hours
6. Chills, fever, or night sweats
7. Difficulty with balance or coordination
Additional treatment information

X-rays
Your health care provider may order x-rays if you have persistent or recurrent low back pain. However, x-rays are usually not necessary in the beginning of low back pain treatment because they typically do not provide information that will alter your care or treatment.

MRIs
Magnetic Resonance Imaging (MRI) is an advanced imaging technology that uses a powerful magnetic field and radio frequency pulses to create cross sectional images of the body.

MRIs can show soft tissue and bone injuries that may not be visible on a traditional x-ray. Most low back pain can be diagnosed by a focused history and physical examination.

An MRI is needed only when a serious underlying condition is suspected, or there are worsening or persistent neurological symptoms.

Your provider will determine if an MRI will be beneficial to the management of your back pain.

Surgery
Surgery is most often not needed for low back pain. Nonsurgical treatments, exercise, and good body mechanics are usually effective at relieving low back pain.

For complicated disc injury, surgical treatment may be necessary, depending on the type of back injury. Consult your health care provider about surgical options.
Specialist referral

Your primary care manager will only refer you to a specialist if you have specific symptoms, test results, or findings on your physical exam. Most back pain will resolve if you follow a well-researched treatment plan from your primary care provider.

Rules to live by

• Keep moving, stay active.
• Learn to lift things the right way.
• Lose weight. Extra pounds, especially around the middle, increase stress on the lower back.
• Don’t smoke. Smoking can interfere with blood circulation to the lower back, while a constant cough can bring on a back spasm.
• Reduce stress. Economic worries, family pressures, and fatigue can cause back spasms or tense muscles.
• Exercise daily. Daily exercise is an excellent way to relieve stress.
• Walk short distances instead of driving.
• Climb a few flights of stairs instead of taking the elevator.
• Choose a sport that is easy on your back such as walking, swimming, or bicycling in an upright position.
• Be aware there are times when immediate medical attention is required.
• Remember, most back pain from minor strains can be resolved with OTC medicines and simple home treatment.
About this publication

The Managing Low Back Pain patient education booklet was prepared by a team of VA and DoD experts in support of the VA/DoD Clinical Practice Guideline for Diagnosis and Treatment of Low Back Pain (2017).

The Clinical Practice Guideline for Diagnosis and Treatment of Low Back Pain includes objective, evidence-based information on the diagnosis and management of acute and chronic low back pain. The goal of this guideline is to improve the patient’s health and well-being by providing evidence-based guidance to health care providers who diagnose and treat patients with low back pain, and providing patients with self-treatment options to manage their own back pain, when appropriate. The guideline recommendations were developed with input from DoD and VA patients, veterans, and subject matter experts.

For additional information, visit:

- https://www.healthquality.va.gov/guidelines/Pain/lbp
- https://QMO.amedd.army.mil
- Using a QR Code reader on your smartphone or mobile device, scan this code to read the Patient Summary of the VA/DoD Clinical Practice Guideline for Diagnosis and Treatment of Low Back Pain.