

You've Had a Back Attack. Now What?

YOU LIFTED a toddler, reached high for a jar in the kitchen, or twisted for that dastardly overhead on the tennis court. And now the pain in your back is excruciating. So what to do? First, some reassurance. Though a back injury can knock you out of commission, a vast majority of people feel much better within several weeks, research shows. Overreacting can lead to more harm than healing. Opioid pain drugs and unnecessary tests and treatments can delay recovery and cause new problems.

When Pain Strikes

CALL YOUR DOCTOR if it's accompanied by symptoms that can indicate a serious problem, including: > Unrelenting pain, especially after a hard fall or an accident > Weak or numb legs > Loss of bladder or bowel control > Fever, chills, or infection > Unexplained weight loss > A history of cancer If none of those apply to you, these steps can provide quick relief:

1. **APPLY HEAT.** Try a warm shower, a hot-water bottle, or a heating pad or wrap. These can speed healing by causing blood vessels to dilate, increasing blood flow, oxygen, and nutrients to the tissues. There's less evidence for icing, though some people say it feels good. Put a towel between your skin and the cold, and keep sessions to less than 20 minutes.
2. **GET COMFORTABLE.** Try lying on your back with your legs up on a chair or on your side with a pillow between your bent knees, sitting with a pillow behind your back, or standing with one foot on a stool.
3. **STRETCH.** Do slow, gentle moves, such as pulling your knees to your chest while lying down or bending slightly backward while standing.
4. **DON'T STAY DOWN.** Walk every few hours.
5. **CONSIDER AN OTC PAIN RELIEVER.** While new advice emphasizes nondrug measures, anti-inflammatories such as ibuprofen (Advil or generic) or naproxen (Aleve and generic) are okay for a week or so and work better for back pain than acetaminophen (Tylenol and generic).

After a Week or So IF YOU'RE STILL in pain, see a doctor. At the appointment:

1. **MAKE A PLAN.** Discuss how you can help yourself get better, including exercises to strengthen your back. If you've been inactive for a while or need instruction, ask for a referral to a physical therapist.
2. **ASK ABOUT HANDS-ON THERAPY.** Acupuncture, massage, and spinal manipulation can help, research shows.
3. **DISCUSS PRESCRIPTION MEDS.** If ibuprofen or naproxen isn't enough, consider asking your doctor about a prescription muscle relaxant such as cyclobenzaprine (Flexeril and generic) or tizanidine (Zanaflex and generic). They're safer than opioids but still pose their own risks and can make you drowsy, so consider taking them at bedtime.

At Two to Four Weeks You can usually return to more or less normal life at this point and go off meds, but it's important to keep moving. If you're still hurting, consider changing your approach, maybe trying physical therapy instead of a chiropractor or acupuncture, because not all treatments work for everyone.

One to Three Months At this point you should be able to stop or curtail your visits to nondrug practitioners, but keep exercising. If pain or symptoms such as leg weakness continue or worsen, you may need an MRI or other imaging test to check for an underlying problem, such as a pinched nerve or broken vertebrae. A steroid injection may ease pain from an irritated nerve for up to a month, but it won't speed healing and in rare cases can cause infections and other serious side effects.

Three Months or Longer Nearly one-third of people we surveyed reported having back pain for most of the past three years. It can take weeks or months for a bulging disk to heal, and people with severe arthritis in the spine may never be completely pain-free. In those cases, other measures may be needed, though it's still wise to progress slowly.

AVOID DANGEROUS MEDS. If nondrug treatments don't help enough, guidelines from the American College of Physicians say to consider one of two choices: tramadol (Ryzolt, Ultram, and generic), a pain drug that is chemically similar to opioids but appears to be less addictive; or duloxetine (Cymbalta and generic), an antidepressant that also works as a pain reliever. Opioids should be considered a last resort and used with great caution. That means they should be prescribed at the lowest effective dose and taken for the shortest time possible to address your pain.

DON'T RUSH TO SURGERY.

An operation should be considered only if an imaging test confirms an abnormality, such as a bulging disk or narrowed spinal column, that could be the source of your symptoms and could be corrected through surgery. But even then, surgery isn't always the way to go. Research shows that many people with those problems get better over time whether or not they've had surgery.

Please review our business at: [Google](#) [Yelp](#) [Facebook](#)

If you'd like to learn more, please visit our [Member's Area](#) to access our subscribed content.

Did you know you can work out and exercise with a trainer at your home, office, hotel room, or pretty much anywhere in the world with online personal training?

**[Like us on Facebook/Connect with us on LinkedIn/Follow us on Twitter](#)
[Pinterest/Instagram/YouTube](#)**

Make sure to forward to friends and followers!