



Low back pain (LBP) is one of the most prevalent medical complaints, affecting nearly every American at some point in his or her lifetime. At any given time, it is estimated that up to one third of the population is experiencing some form of back discomfort that impacts quality of life by interfering with recreational activities, daily living routines, and a person's ability to work productively. Moreover, it is one of the most common reasons that people seek care from medical providers.

Despite this high prevalence for years, the treatment of back pain still remains nebulous at best. Many providers consider themselves inadequately trained to care for back pain, and subsequently, treatment paradigms are often based on anecdotal rather than evidence-based medicine — sometimes with injurious effects. In fact, one of the most common recommendations for the treatment of back pain is an example of previous dogma versus current evidence: that back pain should be treated with rest.

### BED REST AND ACTIVITY MODIFICATION

Recent research indicates that excessive activity restrictions are in fact the opposite of what a painful back needs most. When outcomes from patients treated with bed rest are compared with those of patients who continued with work/activity despite pain, faster recoveries occurred for the activity group. In addition, cost analysis studies of back pain indicate that early return to work and physical activity often results in lower health care costs.

Acute or short-term LBP typically lasts from a few days to a few weeks and is usually mechanical in nature and not caused by serious conditions such as herniated disks, spinal stenosis, or fractures. Typical causes are trauma (e.g., sports injury, lifting, bending, or reaching), disorders such as arthritis, and aging. Periodically, LBP occurs for no specific identifiable reason. Symptoms vary, ranging from muscle ache and tightness to shooting or stabbing pain that can radiate to other parts of the body, such as

the legs. Although symptoms can be severe for a few days, they will often significantly improve within 2 to 6 weeks.

### STAYING ACTIVE IS IMPORTANT

Exercise is an important cornerstone in both the prevention and treatment of LBP. Unfortunately, people experiencing the pain and stiffness associated with LBP have a strong tendency to avoid physical activity often caused by fear of exacerbating symptoms and causing permanent damage. However, in most cases, avoidance of movement prolongs the recovery process and, in some people, increases the likelihood of developing depression, perceived disability, and ultimately, chronic LBP.

Strained muscles need their normal motion and stretching to heal. Moreover, overrestriction of activities can result in spasm and constriction in connective tissues, resulting in worsened pain and function. Although there is no single exercise program that fits all people with LBP, cardiovascular training, resistance training, and basic core back exercise are the primary components and should be performed on a regular basis with careful attention to proper movement technique.

Although some forms of back pain, such as pain after trauma or back pain with bowel/bladder symptoms, may require more than moderate activity restriction, such scenarios are rare compared with the more common LBP experienced as part of life. Not all LBP requires medical attention; however, when symptoms persist for more than 14 days, it may be time to be evaluated by a medical provider who can provide appropriate guidance regarding physical activity recommendations and other potential treatment options.

For most people, the prognosis for LBP is excellent, and recovery can be enhanced by resisting the temptation to avoid physical activity. So, the next time back pain strikes, consider striking back with continued activity; early return to activity/work can lead to a faster return to function and resolution of pain.

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