



orthopedic ONE

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ACUTE NECK OR LOW BACK PAIN

THE HIGHLIGHTS

- Patients with new low back pain typically **get better** on their own.
- Best treatment is **time, physical therapy, activity modifications, and medications** to ease symptoms while they subside.
- Just because the pain is very focused, intense, or severe **doesn't mean there's something wrong structurally** that needs "fixed".

FREQUENTLY ASKED QUESTIONS

WHY DOES MY BACK/NECK HURT?

The truth is this is a difficult question to answer. Often, a single cause of pain in someone's back isn't identified (even with an MRI). Pain often comes from muscle strains, herniated discs (degenerative disc disease), injury to the joints in the back of the spine, or injury to the soft tissues in your low back.

DO I NEED AN MRI?

Most patients with acute low back/neck pain will get better on their own and a MRI isn't necessary.

HOW LONG WILL IT TAKE TO GET BETTER?

Most patients typically get better in 6-8 weeks. Our goals are to:

- Accelerate your recovery.
- Keep you as comfortable and functional as possible until you're better.
- Give you exercises or treatments to minimize the chance of symptoms returning.

WHAT CAN I DO TO FEEL BETTER?

Time: Give it time. In many cases, patients often feel better with rest and conservative treatment after 6-8 weeks.

Physical Therapy: The first option for treatment should be physical therapy (PT). The goal for physical therapy is to eliminate the pain you feel. The therapist will also give you simple techniques and exercises to use at home to help you recover.

Things to Avoid: Minimize lifting, bending, twisting or other movements that cause pain.

No Bed Rest: Bed rest doesn't help (and can even cause damage). Throughout your recovery you should continue normal motions like standing, sitting in a chair, and walking.

Medications: These are a short-term solution to help with inflammation and spasms. These aren't good long term solutions. Options can include: NSAIDS (Advil®, Ibuprofen, Meloxicam®, Mobic®), Tylenol®/acetaminophen, muscle relaxants (cyclobenzaprine, Flexeril®).

WHAT HAPPENS DURING A PHYSICAL THERAPY APPOINTMENT?

- During your first appointment, you'll receive an evaluation to identify a treatment plan that's designed for you.
- Many appointments will include exercises to help improve your movement and reduce your pain.
- Appointments may also involve your therapist doing "hands-on" treatments to reduce muscle spasms or improve joint movement. These also help reduce pain.
- You'll be given exercises to do on your own at home. Doing these regularly is an important part of your treatment.
- In some cases, PT can also use heat, ice, electrical stimulation or others to provide some immediate relief.

WHAT SHOULD I BE WORRIED ABOUT AND WATCH FOR?

If you have any of the following symptoms **notify Dr. Paraskos' office** as soon as possible.

- Weakness in your legs
- Worsening numbness in your legs
- Difficulty walking or issues with balance and falls
- Hand clumsiness and worsening numbness
- Loss of control of bowel or bladder function
- Feeling sick throughout your body and/or having fevers and chills
- Pain that is mostly occurring or most severe at night
- Your symptoms started associated with a traumatic injury (i.e. car accident or fall)