

## Goals

- To alleviate pain
- To improve functionality
- To optimize quality of life

## Patient Education Resources

Lumbar or low back pain is a widespread health issue and is one of the most commonly treated in primary healthcare settings. It is usually described as pain, muscle tension, or stiffness localized below the lower edge of the ribcage and above the inferior gluteal folds (the crease separating the buttocks from the thigh), with or without leg pain (sciatica).

Pain control and prevention of physical impairment are the main goals of treatment for low back pain. As with all chronic conditions, self-management is a key feature to help improve your condition and manage symptoms.

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## Lifestyle, Diet & Nutrition Guide

### DIET AND NUTRITION

Nutritionally, whatever we take in orally must be properly digested, absorbed and utilized. It is important that the digestive mechanisms function properly and that suitable foodstuffs be eaten to maintain healing and strengthen the entire body, which includes the weakened and overstressed low back mechanisms.

When a low back trauma occurs, the damaged cells rupture, causing swelling. This triggers your body to send protein, carbohydrates, vitamins, minerals, fluids and lymph to the area which are required for healing. If your body is sufficiently nourished, the healing nutrients and fluids will be readily available and the injury will be kept to a minimum.

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## Recommended Vitamins & Minerals / Supplements

Name	Daily Dosage	Frequency	Special Instructions
Vitamin B6	50-150 mg	Oral, once daily	
Vitamin D	800 IU	Oral, once daily	
			[+ more]

### Physical Activities / Exercise

We have developed an Exercise Guide for Low Back Pain. Please download it from the Patient's CarePlan Library.

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### Symptom Management

Symptom management is geared toward pain relief and improving quality of life - to get you back to work as soon as possible, and resuming your activities of daily living and physical activities.

Most episodes of back pain are not serious and may be treated by:

**STAYING ACTIVE.** Prolonged bed rest is not advisable. Research has indicated that people who continue to be active recover faster from low back pain.

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### Other Recommendations

You can help prevent some forms of back pain by strengthening your back with exercises and by avoiding activities that lead to back injury. This means:

- Practice **GOOD POSTURE**
- **DO NOT OVER BEND** your back. Always lift objects from a squatting position, using your hips, buttocks and legs to do the heavy work

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### Recommendations for the Primary Care Physician

Many conditions can cause low back pain. The symptom approach usually helps. Ask the patient the location of his or her symptoms - either **back dominant** or **leg dominant**. Location is very important in diagnosing and addressing the symptoms for proper treatment. A good history and physical examination can rule out visceral and non-mechanical causes.

**Back dominant**, or axial, pain is often **mechanical**. When the pain is the trunk rather than the lower limbs, the source of the symptoms is a physical structure or structures within the spine. The pain's central location virtually eliminates the

direct irritation of the neural elements, particularly an involvement of a nerve root, as a major contributor. Mechanical back-dominant pain is **consistently modified by particular spinal movements or positions**. It exhibits a predictable, often rapid response to the correct active therapy.

**Systemic symptoms** such as fever, widespread joint pain or unexplained weight loss, shortness of breath or focal abdominal tenderness **indicate other pathologies**.

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## References

Chou, R. (2017). **Patient Education: Low Back Pain in Adults (Beyond the Basics)**. Retrieved from: <https://www.uptodate.com/contents/low-back-pain-in-adults-beyond-the-basics>.

Grauer, J., et. al. (2017). **Lumbar and Thoracic Disk Herniations**. Orthopaedic Knowledge Update 12, American Academy of Orthopaedic Surgeons. Ch. 45, pp. 594-595. Retrieved from <http://bookshelf.aaos.org/OKU-12/>.

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