



# So your back hurts...

Learn what works,  
what doesn't and how to  
help yourself.

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The Institute for Work & Health (IWH) conducts and shares research that protects and improves the health of working people and is valued by policy-makers, workers and workplaces, clinicians, and health & safety professionals.

IWH would like to thank the workers who reviewed this book. The original draft of this text was prepared with Ontario's Guidelines Advisory Committee, which is now at the Centre for Effective Practice (CEP) [www.effectivepractice.org](http://www.effectivepractice.org)

So your back hurts...

Learn what works, what doesn't and how to help yourself.

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# **THIS BOOKLET GIVES YOU THE BEST ADVICE ON LOWBACK PAIN.**

Based on the most recent research, it explains what to expect when you experience an episode of back pain, corrects common myths, and offers advice on how you can manage your back pain.

This guide goes with the care provided by your health-care provider. If you have questions about anything you read here, please speak to your health-care provider.

The advice in this booklet is provided by experts at the Institute for Work & Health in Toronto, Ontario. Our work aims to provide workers, employers and health-care providers with the best and most current scientific research.

## **MY BACK HURTS: SOME REASSURING WORDS**

When your lower back causes you such pain that you can barely move or get through your usual day, it can be very worrying.

This booklet should reassure you that you will get better. Whether your pain started suddenly or developed over time, an episode of acute low-back pain is usually not serious. In fact, most back pain improves somewhat in two weeks and feels much better in a month or so.

There are many choices that you can make to help yourself get better. If you stay as active as possible, it will help you recover more quickly. You'll find more information on what to do in this booklet.

A man wearing a light-colored baseball cap with a logo and the word "POWER" on it, a dark long-sleeved shirt, and dark jeans is leaning forward over a metal railing. He is looking down and to the left. The background is blurred, suggesting an outdoor setting like a stadium or construction site. The overall image has a blue tint.

“Back pain is common. The treatments are simple, even when it is acute. Be active. Or as they say in Australia: ‘Back pain? Don’t take it lying down!’”

Dr. Angela Mailis-Gagnon, MD, MSc  
Director, Comprehensive Pain Program  
Toronto Western Hospital Research Institute

## SOME COMMON MYTHS ABOUT BACK PAIN

What you think about low-back pain can affect how quickly you recover. Have any of these thoughts run through your head? Have your family or friends said them to you? Read on to find out what the real facts are.

**“I CAN HARDLY MOVE. SOMETHING MUST BE SERIOUSLY WRONG WITH ME.”**

In most cases, there is probably nothing seriously wrong with you—though it might feel like it! It’s natural to be concerned, especially if the pain is severe and you can’t function normally at home and at work. But in most cases, even though your back hurts a lot, your health-care provider will be able to rule out any serious causes and reassure you that your condition is not medically serious.

**“IF I JUST TAKE IT EASY FOR A WEEK AND REST ON THE SOFA, THE PAIN WILL GO AWAY.”**

When it comes to low-back pain, it’s important to understand that “hurt doesn’t equal harm.” Resting in bed is not helpful and can actually make your back pain worse over time. Stay as active as possible, even if moving around is painful. This will help you feel better sooner.

**“GOING BACK TO WORK TOO SOON AFTER HURTING MY BACK WILL MAKE THE PAIN WORSE, AND IT WILL TAKE ME EVEN LONGER TO RECOVER.”**

Most people who experience low-back pain do better if they return to work before they feel completely well. This may mean returning to your job before your back feels completely better. It may also mean that your usual job needs to be modified until you feel well enough to take on your full duties. But you don't need to worry that you will get worse. Speak to your health-care provider and employer about planning your return to work in a sensible way (see “Getting back to your usual routines” on page 15).

**“I MUST HAVE HURT MY SPINE IN SOME WAY—I PROBABLY NEED AN X-RAY.”**

Back x-rays only show bones. Because most acute low-back pain is related to muscles, joints and ligaments and not to the bones in the spine, back x-rays are not useful. It's important not to expose yourself to unnecessary radiation.

If you understand the facts about back pain, it can help ease your fears or worries. You can feel more optimistic about your recovery. And you can make choices to help you recover more quickly, like trying to stay active and getting back to work.

## WHAT SHOULD I DO FOR MY BACK PAIN?

If this is your first episode of low-back pain, it is a good idea to see a health-care provider, such as a family doctor, chiropractor or physiotherapist.

You'll be asked questions about your pain, and your back and legs will be examined. You will also get some advice on how to manage the pain.


Your health-care provider will also determine if there are any "red flags." These are warning signs that might signal that a more serious problem is causing your back pain.

If your health-care provider feels there is a red flag, he or she will explain the findings and discuss whether you need further testing and treatment.

Keep in mind that, in most people, acute low-back pain improves within days or weeks, whether they receive treatment or not.

The key to feeling better as soon as possible is to follow your health-care provider's advice about keeping active.



A woman with blonde hair tied back, wearing a white tank top, is looking down at a plate of food. The image is overlaid with a blue tint. The text is positioned on the left side of the image, overlapping the woman's torso and the food plate.

“You don’t need to feel completely well before you go back to your usual activities. If you don’t move, your muscles will become weaker, and you’ll have less endurance to perform your daily activities. There is trusted research to back up this advice.”

Dr. Andrea Furlan, MD, PhD  
Associate Scientist, Institute for Work & Health  
Staff Physician, Toronto Rehabilitation Institute

## CHOOSING THE RIGHT TREATMENT

It's important to understand that treatment for acute low-back pain is not meant to cure the problem. The goal is to control your pain and help you return to normal activity as soon as possible.

Because low-back pain is so common, many treatments have been suggested and tried. But while one treatment seems to work in some people, others may find it doesn't help.

The treatments listed here have been carefully studied in large groups of people with acute low-back pain. We don't know everything yet. In some cases, we can be quite sure treatments do or don't work. In other cases, we are less sure. And in some cases, there isn't enough good research about a particular treatment to say anything definite.



## WHAT WORKS

### **STAYING ACTIVE**

Some people with low-back pain are confused by advice telling them to stay active but also to avoid back exercises for the first few days! In fact, this advice is correct. Staying “active” means moving around as much as possible within the limits of your pain and trying to do a little more each day. Your health-care provider will advise you when you are ready to do special back exercises. It’s also important that you learn to do each exercise properly.

### **PAIN-RELIEVING MEDICATION**

In most cases, using non-prescription pain relievers for a few weeks is a safe and effective way to help control acute low-back pain.

You can find these medications at drugstores or supermarkets. They are:

acetaminophen (sold as Tylenol®)

ibuprofen (sold as Motrin® or Advil®)

If you take a non-prescription pain reliever, speak with a pharmacist and always read and follow the directions on the package.

If the non-prescription pain relievers don’t help, your doctor may give you a prescription for something stronger.

Sometimes muscle relaxant medications are helpful, but these can have troublesome side effects such as an upset stomach, dizziness or sleepiness. Common pain relievers with muscle relaxants are:

Robaxacet®

Robaxisal®

Talk to your doctor first before trying this type of medication.

### **SPINAL MANIPULATION**

This kind of therapy is delivered by trained practitioners, including chiropractors, physiotherapists and some medical doctors. During the treatments, the practitioner will use his or her hands to move certain joints in your spine in a very specialized way. Spinal manipulation offers short-term relief for acute low-back pain and may improve your ability to move with less discomfort.

## **HEAT**

You may get some short-term relief from applying low-level heat to your lower back. Commercially available “heat wraps” — worn over your lower back and under your clothes—deliver a low level of heat for a period of at least eight hours. Other sources of superficial heat may also provide relief.

## **MASSAGE**

Massage is delivered by regulated massage therapists. It may help reduce the pain and improve your ability to function. Massage may also help to relax you if you are worried about your back pain.

## WHAT DOESN'T WORK


### **BED REST**

Our bodies are meant to move. We know that staying in bed actually delays recovery because:

- your bones and muscles get weaker
- your body gets stiff
- your level of fitness goes down
- you may feel depressed
- the pain may seem worse when you do get up.

### **TRACTION**

This involves applying a mechanical force or weights to stretch your spine. Research results have shown that, on average, it does not reduce pain.

A man is lying in a hospital bed, looking upwards with a slight smile. He is wearing a white hospital gown. Above him, medical equipment is visible, including a large circular light fixture and various tubes and wires. The scene is dimly lit, with a blueish tint, suggesting a clinical or hospital environment.

“Motion is lotion’...so if your back hurts, keep moving and avoid bed rest and prolonged sitting. Research shows that getting back to normal activity, even with a little pain, speeds up recovery.”

Carlo Ammendolia, DC, PhD  
Associate Scientist, Institute for Work & Health  
Chiropractor/Clinical Researcher, Mount Sinai Hospital, Toronto

## **WE STILL AREN'T SURE ABOUT THESE TREATMENTS**

There hasn't been enough research to tell us whether or not these treatments are, on average, helpful for people experiencing acute low-back pain:

- acupuncture
- cold applications
- therapeutic ultrasound
- EMG biofeedback
- TENS (transcutaneous electrical nerve stimulation)
- lumbar supports
- low-level laser therapy
- insoles.



## GETTING BACK TO YOUR USUAL ROUTINES

### **YOUR JOB**

When is it time to return to your job after an episode of acute low-back pain? The timing depends on what kind of job you have and whether or not your employer is able to offer you work accommodation or modified work. In other words, you may need to change your job tasks or reduce the number of hours worked so you are able to work while your back continues to get better.

If you aren't sure whether work accommodation is possible, talk to your employer. For work-related injuries, most mid- to large-size employers in Ontario have policies to offer work accommodation to assist return to work.

As a worker who is experiencing back pain, you are an important link between your workplace and your family doctor. For example, you can ask your doctor to provide information about possible work restrictions. Or you can give your doctor the name and telephone number of your employer, in case your physician would like to discuss your return-to-work needs.

### **KEEPING PHYSICALLY FIT**

As soon as your back is feeling better, it's important to do regular fitness activities as well as some specific back and abdominal exercises. For general fitness, choose an activity that you like or you think you can stick with. These include:

- walking
- cycling
- swimming
- any physical activity that keeps you moving.

The important thing is that you keep doing it regularly. Research shows that stretching and muscle-strengthening exercises for your back and abdominal muscles work best to improve pain and help to keep you functioning normally.

You may need help from a health-care provider like a physiotherapist or chiropractor to learn the back and abdominal exercises appropriate for you.

Remember: you don't have to feel completely recovered before you return to work. Getting back to your normal routines can be an important part of recovering from an episode of acute low-back pain.

Try not to worry if you feel pain, because keeping up with your daily activities is going to help you get better.



## CAN BACK PAIN BE PREVENTED?

For many people, back pain is a condition that comes and goes. Researchers are looking for ways to prevent back pain from returning, but so far, there is no quick and easy solution.

We do know that staying active and strengthening the back and abdomen muscles through exercise can help.

You may be wondering about products that claim to prevent back pain. Research has shown that some products—back braces or belts, lumbar supports and shoe insoles—don't help prevent back pain.

We don't have enough research information on other products such as specially designed chairs or mattresses to say one way or the other.

- Non-prescription medications, heat and/or spinal manipulation can help you deal with the pain when it is severe.
- Regular exercise may help you prevent further episodes of back pain.
- The causes of acute low-back pain are not well understood. But you can take steps to help yourself get over it more quickly. This will also help you take control and deal with flare-ups of low-back pain if they happen.

## THE BOTTOM LINE ON BACK PAIN

- You aren't alone. Low-back pain is among the top five reasons that people consult their doctors.
- Even though your back hurts a lot, chances are there is nothing seriously wrong with you. By managing your activity properly, you can expect your low-back pain to go away within a few weeks.
- Most low-back pain and stiffness is related to a problem with muscles and ligaments that surround and support the spine and not to the spine itself.
- Your doctor will rule out any serious causes for your low-back pain. Unless certain warning signs or "red flags" are present, you will not need a back x-ray or specific treatments.
- Normal activity will not harm your back. In fact, staying active is the key to getting better sooner.

- Non-prescription medications, heat and/or spinal manipulation can help you deal with the pain when it is severe.
- Regular exercise may help you prevent further episodes of back pain.
- Be aware of your posture. Don't stay in one position for too long.
- The causes of acute low-back pain are not well understood. But you can take steps to help yourself get over it more quickly. This will also help you take control and deal with flare-ups of low-back pain if they happen.





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