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Low back pain - acute

Definition

Low back pain refers to pain felt in your lower back. You may also have back stiffness, decreased movement of the lower back, and difficulty standing straight.

Acute back pain lasts for a few days to a few weeks.

See also:

- Low back pain - chronic
- Sciatica

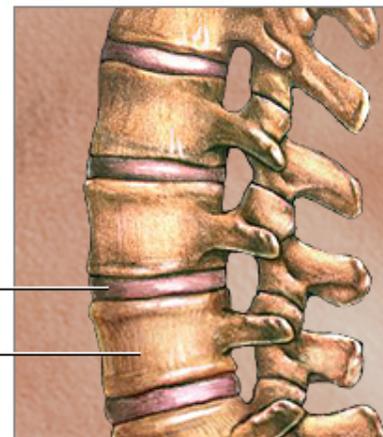
Alternative Names

Backache; Low back pain; Lumbar pain; Pain - back; Acute back pain; Back pain - new; Back pain - short-term; Back strain - new



Intervertebral disk

Lumbar vertebra



Causes



Most people will have at least one backache in your life. While such pain or discomfort can happen anywhere in your back, the most common area affected is your low back. This is because the low back supports most of your body's weight.

Low back pain is the number two reason that Americans see their health care provider -- second only to colds and flu. Many back-related injuries happen at work. But you can change that. There are many things you can do to lower your chances of getting back pain.

You'll usually first feel back pain just after you lift a heavy object, move suddenly, sit in one position for a long time, or have an injury or accident. But before that injury or accident, the structures in your back were losing strength or changing.

Acute low back pain is most often caused by a sudden injury to the muscles and ligaments supporting the back. The pain may be caused by muscle spasms or a strain or tear in the muscles and ligaments.

Causes of sudden low back pain include:

- Compression fractures to the spine from osteoporosis
- Cancer involving the spinal cord
- Fracture of the spinal cord
- Muscle spasm (very tense muscles that remain contracted)
- Ruptured or herniated disk
- Sciatica
- Spinal stenosis (narrowing of the spinal canal)
- Spine curvatures (like scoliosis or kyphosis), which may be inherited and seen in children or teens
- Strain or tears to the muscles or ligaments supporting the back

Low back pain may also be due to:

- An abnormal aortic aneurysm that is leaking
- Arthritis conditions, such as osteoarthritis, psoriatic arthritis, and rheumatoid arthritis
- Infection of the spine (osteomyelitis, diskitis, abscess)
- Kidney infection or kidney stones
- Problems related to pregnancy
- Medical conditions that affect the female reproductive organs, including endometriosis, ovarian cysts, ovarian cancer, or uterine fibroids

Symptoms

You may feel a variety of symptoms if you've hurt your back. You may have a tingling or burning sensation, a dull achy feeling, or sharp pain. Depending on the cause, you also may have weakness in your legs or feet.

Low back pain can vary widely. The pain may be mild, or it can be so severe that you are unable to move.

Depending on the cause of your back pain, you may also have pain in your leg, hip, or bottom of your foot. See: [Sciatica](#)

Exams and Tests

When you first see your health care provider, you will be asked questions about your back pain, including how often it occurs and how severe it is. Your health care provider will try to determine the cause of your back pain and whether it is likely to quickly get better with simple measures such as ice, mild painkillers, physical therapy, and proper exercises. Most of the time, back pain will get better using these approaches.

During the physical exam, your health care provider will try to pinpoint the location of the pain and figure out how it affects your movement.

See: [Back pain - When you see the doctor](#)

Most people with back pain improve or recover within 4 - 6 weeks. Therefore, your health care provider will probably not order any tests during the first visit unless certain symptoms or findings are present.

Tests that might be ordered include an x-ray, CT scan of the lower spine, or MRI of the lower spine.

Treatment

To get better quickly, take the right steps when you first get pain.

Here are some tips for how to handle pain early on:

- Stop normal physical activity for the first few days. This helps calm your symptoms and reduce any swelling in the area of the pain.
- Apply heat or ice to the painful area. One good method is to use ice for the first 48-72 hours, then use heat.
- Take over-the-counter pain relievers such as ibuprofen (Advil, Motrin IB) or acetaminophen (Tylenol).

While sleeping, try lying in a curled-up, fetal position with a pillow between your legs. If you usually sleep on your back, place a pillow or rolled towel under your knees to relieve pressure.

A common misbelief about back pain is that you need to rest and avoid activity for a long time. In fact, bed rest is NOT recommended.

If you have no sign of a serious cause for your back pain (such as loss of bowel or bladder control, weakness, weight loss, or fever), then you should stay as active as possible.

You may want to reduce your activity only for the first couple of days. Then, slowly start your usual activities after that. Do not perform activities that involve heavy lifting or twisting of your back for the first 6 weeks after the pain begins. After 2 - 3 weeks, you should gradually resume exercise. See: [Taking care of your back at home](#)

Begin with light cardiovascular training. Walking, riding a stationary bicycle, and swimming are great examples. Such aerobic activities can help blood flow to your back and promote healing. They also strengthen muscles in your stomach and back.

Stretching and strengthening exercises are important in the long run. However, starting these exercises too soon after an injury can make your pain worse. A physical therapist can help you determine when to begin stretching and strengthening exercises and how to do so.

Many people benefit from physical therapy. Your health care provider will determine whether you need to see a physical therapist and can refer you to one in your area. The physical therapist will begin by using methods to reduce your pain. Then, the therapist will teach you ways to prevent getting back pain again.

If your pain lasts longer than one month, your primary care health care provider may send you to see either an orthopedist (bone specialist) or neurologist (nerve specialist).

If your pain has not improved after use of medicines, physical therapy, and other treatments, your doctor may recommend an epidural injection.

You may also see a massage therapist, someone who performs acupuncture, or someone who does spinal manipulation (a chiropractor, osteopathic doctor, or physical therapist). Sometimes a few visits to these specialists will help back pain.

Outlook (Prognosis)

Many people will feel better within 1 week after the start of back pain. After another 4 - 6 weeks, the back pain will likely be completely gone.

When to Contact a Medical Professional

Call your health care provider right away if you have:

- Back pain after a severe blow or fall
- Burning with urination or blood in your urine
- History of cancer
- Loss of control over urine or stool (incontinence)
- Pain traveling down your legs below the knee
- Pain that is worse when you lie down or that wakes you up at night
- Redness or swelling on the back or spine
- Severe pain that does not allow you to get comfortable
- Unexplained fever with back pain
- Weakness or numbness in your buttocks, thigh, leg, or pelvis

Also call if:

- You have been losing weight unintentionally
- You use steroids or intravenous drugs.
- You have had back pain before, but this episode is different and feels worse.
- This episode of back pain has lasted longer than 4 weeks.

Prevention

See: Taking care of your back at home

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