

EXERCISE

For Men Only

IN PURSUIT OF TOTAL FITNESS

SEPTEMBER 2009

BY JACK STERN, M.D.

THE CONSULTING PHYSICIAN

PRESCRIPTION FOR FITNESS

WHEN EXERCISE IS A PAIN IN THE BACK

It is ironic how we use exercise as a means of strengthening and toning our back muscles to avoid injuries, yet so many of our injuries result from exercise! The good news is that most exercise-related back injuries are innocuous and self-limiting. Instant memory replay reminds us that when we omit our warm-ups or fail to adequately hydrate our bodies, we tend to rush through our exercise programs or do more than we should have. We end up sore and aching. For the majority of us, this is not a first-time experience and we know the treatment regimen by heart. We rest, ice the painful area of the back and start a short course of aspirin, acetaminophen or ibuprofen and we are back in the gym in no time.

The overwhelming majority of such back injuries are muscular in origin. Commonly referred to as an ordinary backache, it usually affects healthy folks between the ages of 20-55 with pain confined to the lumbosacral area, buttocks and thighs. The pain is usually mechanical in nature, which means that it varies with position and physical activity. The discomfort rarely lasts for more than 4-6 weeks.

But what if the pain doesn't go away? What if it worsens? Backaches can be severe and limit your ability to function. The concern arises when the pain doesn't significantly improve during those first six weeks and the usual rehab regimen doesn't seem to be working. I stress the word "concern" because even when backaches last longer than six weeks there is rarely a cause for alarm. However, if the pain affects one's ability to function at home or at work, the sensible thing to do is to discuss this with your doctor, who will probably suggest a "work up." This is a series of tests to exclude or "rule out" a more significant problem.

Most physicians will initiate the work up with three tests that will rule out greater than 95 percent of possible underlying problems. The first is routine X-rays of the spine. This old standard is still best to discover a fractured bone, benign misalignment of the spine from trauma or a previously undiagnosed congenital abnormality made worse by trauma. The second test is usually a bone scan, which can detect more subtle fractures, areas of arthritis that were disrupted and made painful by a trauma. It can also detect traumatic alterations in the facet joints.

We forget that the spine, like the knee, hip and shoulder, has joints that can be disrupted by exercise. These painful situations are most commonly the result of exercises that require us to torque or rotate the spine. That is why it is important to tell your doctor the type of exercise that caused the initial pain, as it may be a clue to the proper diagnosis and treatment. Although some physicians will request a CT scan or MRI right away, I usually wait until the other tests are done. Remembering that the CT scan is superior for the visualization of bone and the MRI better for the visualization of soft tissues, both are useful.

Having gone down this route, it is still unlikely that a specific diagnosis as to the origin of the ordinary backache will be made. The reason is that even our most sophisticated imaging techniques can't detect subtle traumatic and inflammatory changes in the muscle, ligaments and tendons. Because we can't effectively immobilize these areas, the pain cycle may continue. That is why it is important to diagnose and treat backaches

quickly and before the pain continues and becomes chronic.

A final word of caution: Be alert if, in addition to the back pain, you develop leg pain; numbness, tingling, leg weakness and decreased ability to control your bowels or bladder. These are the warning signs that indicate that the injury is more severe and demand immediate medical attention and a proper medical work up.

Every year, my phone lines are busy with

patients old and new who are ailing with back pain. Most calls are from folks like you and me who didn't warm up, didn't hydrate, didn't rest between exercises or simply did much too much that first week in the gym. The best advice I can give is don't make these mistakes. It took a while to get out of shape. It will take a while to get back in shape.

If you develop a severe backache, have it diagnosed and treated quickly. If the symptoms don't respond or progress with excessive problems mentioned previously, seek medical attention right away.

Jack Stern, M.D., Ph.D., is a board-certified neurological surgeon who is internationally recognized for his expertise in lower back pain. To learn more visit safespinesurgery.com.

