

How to manage:

Acute Low Back Pain



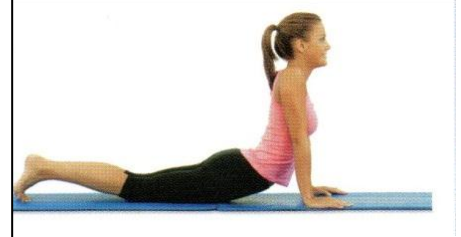
Very often acute low lumbar pain – sited across the lower back – possibly central or across the top of the buttocks or gluteal, associated with pain, and muscle spasm causing severe stiffness, often unable to straighten up to stand or walk and at times unable to lie flat on your tummy. Take GP advice on the use of **anti-inflammatories** – such as IBUPROFEN – DICLOFLEX etc

Protective muscle SPASM will cause you to seize and prevent recovery – ask your GP for **ROBOXIN or DIAZEPAM** both excellent anti muscle spasm drugs.

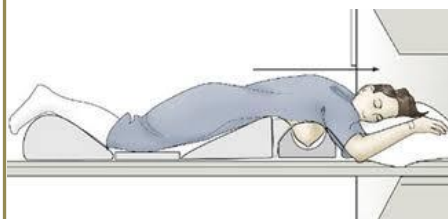
This advice is for use of patients **DIAGNOSED** with acute DISCAL back pain – if undiagnosed and if associated LEG pain get medical advice ASAP.

If you **can** LIE FACE DOWN [prone] try doing some McKenzie **EXTENSION EXERCISES**

1st set go easy – push up until you feel the pain-discomfort. Then each rep-set push a little harder. They are painful because you are pushing – nipping the disc forward into a better position – keep hips and glutes relaxed. Rest between sets.....



3 sets x 8-10

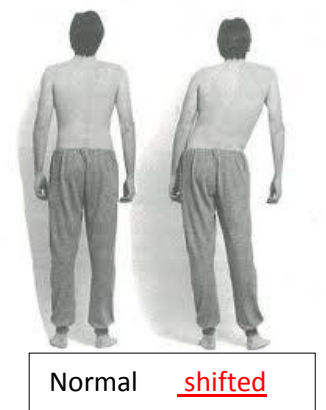


If you can't lie flat on your tummy



Then try **lying over a PILLOW** or several – this will take the pressure off the BULGING DISC and give some pain relief but also give the disc a chance to REDUCE – after 10-15-20mins then slide the pillows out and try the McKenzie **EXTENSION EXERCISES.....**

Some patients present with a **LUMBAR SHIFT** – in that they are **LEANING** to one side... normally this is a response to a large BULGING DISC to the SIDE and the body's response is to lean AWAY from the PAIN – normally no leg pain – and our aim is to get you straightened up by doing **SHIFT corrections** or **SIDE GLIDE @the WALL exercises....** Normally good side to the wall and try work your hip towards wall, gradual increments – don't force it.



Normal **shifted**