

All rights reserved. All text and photographs in this publication are the property of the author, unless otherwise noted or credited. It is unlawful to reproduce—or copy in any way—resell, or redistribute this information without the express written permission of the publisher. See the copyright page of this book for further limitations and warranties.

# TABLE OF CONTENTS

Foreword .....	5
About the Author .....	7
Acknowledgments .....	7
Introduction.....	9
<b>Chapter 1: Back Pain Is Very Common, and Here’s Why .....</b>	<b>11</b>
<i>How Our Genes Lead to Back Pain • How Spinal Discs Work • Why Disc Degeneration Causes Pain</i>	
<b>Chapter 2: Which of the 7 Types of Back Pain Do You Have?.....</b>	<b>20</b>
<i>Take This Questionnaire to Find Out What Type of Back Pain You Have</i>	
<b>Chapter 3: Acute Severe Back Pain: What Could It Be, and What Should You Do?.....</b>	<b>28</b>
<i>How to Know If You Need Immediate Help • Some Urgent Conditions That Require Emergency Care</i>	
<b>Chapter 4: Choosing The Right Kind of Doctor .....</b>	<b>35</b>
<i>Emergency Physicians • Primary Care Physicians • Psychiatrists • Chiropractors • Spinal Surgeons • Neurosurgeons vs. Orthopaedic Surgeons • Other Specialists • Massage Therapists, Acupuncturists, and Personal Trainers</i>	
<b>Chapter 5: What You Should Know – And Do – If You Have a Herniated (“Slipped”) Disk.....</b>	<b>43</b>
<i>How You Know If It’s a Herniated Disc • Do You Really Need Surgery? • MRI Scans, CAT Scans, and Myelograms • Surviving an MRI Scan When You Have Claustrophobia • What Does It Mean to “Walk It Off?” • Epidurals • Types of Surgery and Risks</i>	
<b>Chapter 6: Spinal Stenosis: What Is It and What Can You Do About It?.....</b>	<b>71</b>

# TABLE OF CONTENTS

*How Spinal Stenosis Causes Pain • When to Suspect Spinal Stenosis • Causes and Symptoms • When Surgery Is Necessary, and How It Is Performed*

**Chapter 7: What To Do If Your Pain is From an Unstable or Deformed Spine** .....86

*Spondylolisthesis: The Most Common Spinal Deformity • What Does ‘Unstable Spine’ Mean? • Scoliosis • Osteoporosis • What Is a Spinal Fusion and How Is It Done?*

**Chapter 8: Chronic Back Pain: What To Do When the Pain Just Won’t Go Away** .....99

*Determining the Cause • Arthritis • Degenerative Disc Disease • How Depression and Stress Affect Back Pain • How to Take Control of the Pain*

**Chapter 9: A Plethora of Back-Pain Care: Pills, Exercise, Injections, and Alternative Treatments** .....107

*Anti-Inflammatories, Narcotics, and Muscle Relaxants • Chiropractic • Traction • Types of Exercise • Stretching • Physical Therapist vs. Trainer • Pain Management • Minimally Invasive Treatments • Destroying Sensory Nerves to Treat Pain • Back Braces • ‘Touch’ Therapy*

**Chapter 10: What You Can Do to Avoid ‘Failed Back Syndrome’** .....131

*Don’t Have Back Surgery If You’re Unprepared • Spinal Stenosis and Spinal Instability As Causes • Missed Diagnosis or Multiple Sources of Pain • Adjacent Segment Failure • Unmet Expectations of Surgery*

**Chapter 11: How to Prevent Back Pain From Ruling Your Life** .....137

*Everyday Things You Should Avoid • Exercise: The Best Preventive Medicine • Why Quitting Smoking Is So Important • How to Avoid Pain From Spinal Deformity and Osteoporosis • Managing ‘Whiplash’ Injuries • Sex and Back Pain*

**Chapter 12: Disc Transplants, Replacements, and Gene Therapy: They Sound Good, But Do They Work?** .....149

*Risks of Artificial Disc Replacement • Disc Transplants – Potential for the Future? • Hope in Gene Therapy*

Glossary .....157

Index .....162

# CHAPTER 3

## Acute Severe Back Pain: What Could It Be, and What Should You Do?

### Acute benign back pain

I had been working hard as Chief Resident of Orthopaedic Surgery, on call every other night, and trying to scrub in on every interesting surgical case that I could.

A young man came into the emergency room with a severed nerve on the side of his knee, and he could not lift his foot up off the floor. In order to repair

the nerve I had to stand in an awkward position bent forward over the operating room table for almost two hours, stitching the nerve with the aid of magnifying lenses.

In the surgeon's lounge following the operation, I bent over to put on my shoes and was struck with such a severe back pain that I almost fell to my knees. A fellow resident helped me to the emergency room, and there I was evaluated by another colleague who suspected that I was passing a kidney stone. He ordered an x-ray of my kidneys, and when the x-ray came back normal, we both realized that the pain was coming from my back. I went home and rested for a few hours with a heating pad and then got out of bed and walked it off over the next few days. I finally understood why my father was so incapacitated when he had

*The pain is horrible! What is wrong? Is it an emergency? How do I get rid of it?*

attacks of back pain and how he recovered from what seemed to be a devastating condition by simply walking it off!

This attack was brought on by no apparent injury and went away without any real treatment except walking it off. To this day, we medical scientists have not been able to pinpoint the exact reason for such attacks of low back pain. Therefore we label the condition as idiopathic low-back pain, meaning the exact cause of the back pain is not known. I suspect such attacks of back pain represent the first complete tears in the side wall (annulus fibrosus) of a degenerated disc, tears that reach the sensitive nerve endings adjacent to the disc.

Whatever the exact reason, the vast majority of acute, severe attacks of low-back pain are way out of proportion to the seriousness of the condition that causes them, and they go away just as mysteriously – but unfortunately not as quickly – as they came. How do we know when to seek help for such an attack?

<b>When to Walk It Off</b>	<b>When to Call for Help</b>
You can still get out of bed and walk	It is too painful to walk
Your legs do not give way	Your legs are weak and won't hold you up
You have normal sensation everywhere	You have numbness in your pelvic area
You have no difficulty urinating	You cannot urinate or you lose your urine
You do not feel faint or light headed	You are faint or lightheaded
You do not feel sick	You have chills, fever, nausea, or sweating
The pain is bearable within an hour of rest	The pain is unbearable, even after rest
You do not feel anxious	The pain comes in spasms
The pain is gradually getting better	The pain is getting worse
The pain is coming from your back	You have chest or abdominal pain