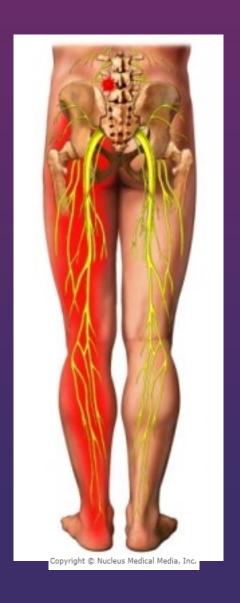
Symptoms

- Back pain
- Shooting leg pain, numbness, tingling, weakness
- May or may not be symmetric
- Worse with walking, standing, sitting or lying down, twisting or turning



Other causes of back pain

- Infection
- Trauma
- Cancer
- Idiopathic
- Kidney stone, pancreatitis, abdominal aneurysm, or other non-spinal etiologies



When to see a specialist

- Pain does not improve in 2 weeks
- Everyday life activities are impacted

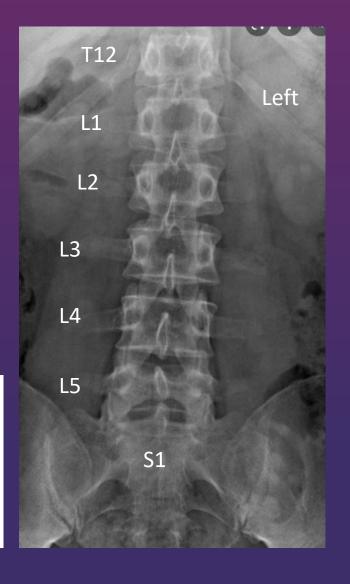


https://www.rd.com/article/shouldnt-wash-dishes-by-hand/



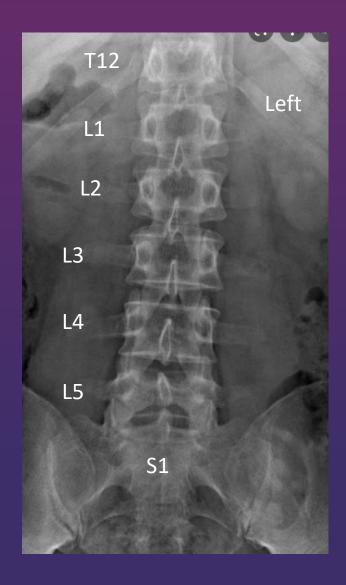
https://hikingwashington.com/best-hikes-near-seattle

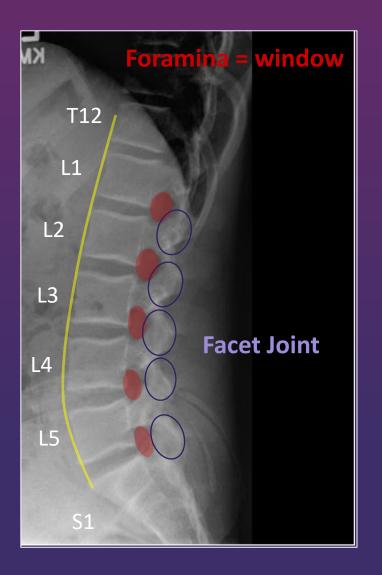
X-Rays





X-Rays





MRI





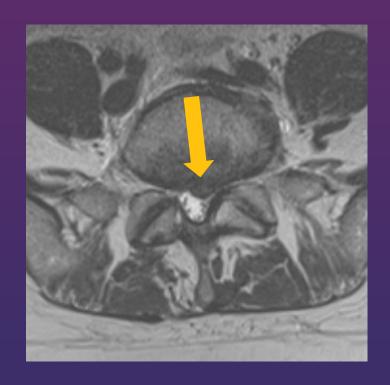


DENTIAL – DO NOT DISTRIBUTE UW Medicine

Disc herniation

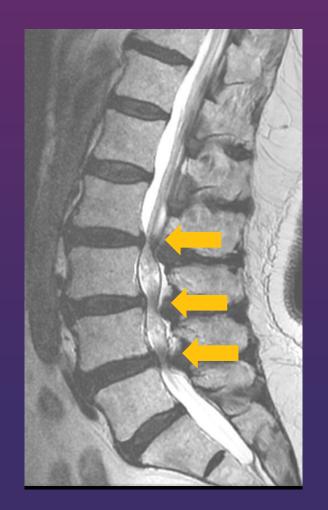
- Disc = jelly filled donut
- Incident with immediate back discomfort
- Develops worse back pain and leg symptoms the next day

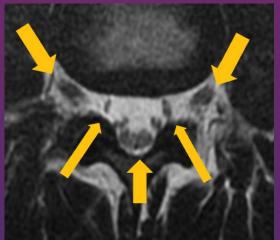




Lumbar stenosis

- Stenosis = narrowing
- Walking and standing intolerance
- Improves with sitting, bending forward
- May also have shooting leg pain, numbness, tingling, weakness







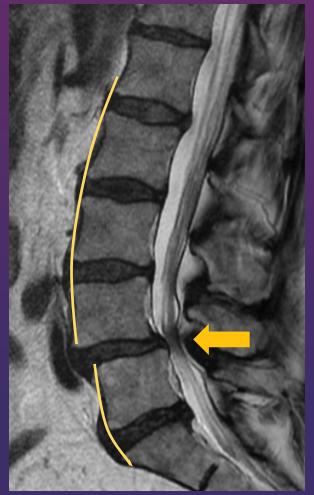
Spondylolisthesis with stenosis

- Spondylolisthesis = slipped vertebrae
- Many causes, but most often:
 - Degenerative
 - Traumatic



Normal





Facet arthropathy

- Arthritic joint pain
- Back pain worse with twisting and turning motions
- Usually no or minimal leg symptoms

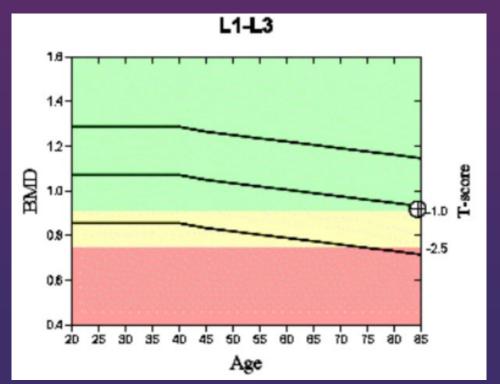




Normal

Osteopathic Compression Fractures

- Bone density test (DXA scan)
 - Females age 65+, Men age 70+
 - Medications, prior fracture after age 50
- Osteopenia vs Osteoporosis
 - Normal = ≥ -1.0
 - Osteopenia = -1.0 to -2.5
 - Osteoporosis = ≤ -2.5
- Predict fracture risk





84 yo white male, L1 osteoporotic compression fracture

Treatment

- Physical therapy
- Anti-inflammatories
 - Ice
 - NSAIDs (ibuprofen, naproxen, meloxicam, diclofenac)
 - Short course of systemic steroids
- Procedures: epidural steroid injection or facet joint injection
- Surgery

