

THE CLINICAL CHIROPRACTOR

SCHUBBE RESCH CHIROPRACTIC & PHYSICAL THERAPY • SUMMER 2008

LOW BACK PAIN WITH REFERRED PAIN

Referred low back pain can vary widely with regards to severity and quality. It tends to be achy, dull and migratory. The pain tends to come and go and often varies in intensity.

Area of Pain Distribution

Referred pain is usually felt in the low back area and tends to travel into the groin, buttock and upper thigh. The pain often moves around and rarely presents below the knee.

Diagnosis of Referred Pain

Referred pain is the result of the extensive network of interconnecting sensory nerves that supply many of the tissues of the low back, pelvis and thigh. An injury to any of these structures can cause pain to travel—or be “referred”—to many other structures. It is important to understand that this type of pain is not due to “pinched nerves”.

Treatment of Referred Low Back Pain

In general, referred pain is treated with the same types of conservative care as axial back pain and will frequently diminish as the low back problem resolves. Once the possibility of a serious underlying medical condition is ruled out, treatment of referred low back pain is conservative (non-surgical) and may include one or a combination of the following:

- Chiropractic manipulation
- A short period of rest (e.g. one or two days)
- Physical therapy, active exercise and stretching
- Ice packs and/or hot pads
- Appropriate medications for pain relief

If the above treatments do not successfully reduce the patient's pain to a manageable level, then additional assessment and treatment should be considered such as special imaging, epidural injection or surgical consult.

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LOW BACK PAIN AND SCIATICA: RADICULAR PAIN

Radicular pain is often referred to as radiculopathy, and in lay terms is often described as sciatica. This type of pain is often deep and steady, and can usually be reproduced with certain activities and positions such as sitting or walking. Radicular pain can be accompanied by numbness and tingling, muscle weakness and loss of specific reflexes.

Area of Pain Distribution

Radicular pain radiates into the lower extremity (thigh, calf and occasionally the foot) directly along the course of a specific spinal nerve root. The most common symptom of radicular pain is sciatica (pain that radiates along the sciatic nerve—down the back of the thigh and calf into the foot). Sciatica is commonly caused by compression of the L5 and S1 nerve roots. Compression of higher lumbar nerve roots such as L2, L3 and L4 can cause radicular pain into the front of the thigh and the shin.

Diagnosis of Radicular Pain

A radiculopathy is caused by compression, inflammation and/or injury to a spinal nerve root in the low back i.e.

- Subluxation of vertebrae
- Herniated disc
- Foraminal stenosis
- Muscle spasms
- Inflamed joint
- Nerve root injuries

Treatment of Radicular Pain

It is usually recommended that a course of conservative treatment (such as chiropractic manipulation, physical therapy and medications) be conducted for six to eight weeks. Adjustments directed specifically to the lumbar and sacroiliac regions often relieve symptoms. The effect is produced by stretching the posterior muscles and relieving the joint fixation, and by stimulating mechanoreceptors. If conservative treatment does not alleviate the pain, further imaging and appropriate referral to a physiatrist/neurosurgeon may be recommended.

Referral by medical practitioners to a chiropractor may be the best first course of treatment for patients presenting with referred or radicular low back pain.

Radicular Pain Versus Referred Pain: Understanding the Difference

The terms "radicular pain" and "referred pain" are often used interchangeably by both laypersons and professionals. There are, however, distinct differences between the two. Differentiating between referred pain and radicular pain is critical when determining the proper treatment plan.



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Clinical studies have shown the positive impact of spinal manipulation. If you feel any of your patients would benefit from spinal manipulation, please call us at 920-738-0200 or 920-0660, or visit www.schubberesch.com.
Be assured, your patient will be referred back to you after we treat their condition.

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