

River Cities Interventional Pain Specialists

Since 2004 Dr. Randall P. Brewer has been in clinical private practice in Shreveport, Louisiana and maintains academic appointments at Duke University and Louisiana State University, where he routinely lectures in the areas of Pain Medicine and clinical Neuroscience in the Department of Neurology and the Medical school. He is board certified by the American Society of Anesthesiologists, the American Board of Pain Medicine, and the American Board of Psychiatry and Neurology.

Dr. Brewer and his multi-disciplinary team of highly skilled nurses and physician extenders provide comprehensive pain management treatment solutions to treat chronic pain disorders. The team works collaboratively with patients and area providers to develop individualized treatment plans and attainable goals. . These strategies help patients to effectively address a wide range of chronic pain disorders.

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TOP TEN QUESTIONS ABOUT...



CHRONIC BACK PAIN & EXERCISE

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1. I have chronic low back pain, what is the best exercise for me?

Many different exercises are available for people with low back pain. Most exercises are designed to strengthen the muscles which support your back. Usually it is best to initially work with a physical therapist or other provider with expertise in treating back problems.

2. I just began exercising 2 weeks ago and my pain seems to be worse, should I stop exercising?

If your pain has suddenly worsened and is very severe, you should speak with your physician to determine whether additional work-up is needed. If your pain is a minor worsening of your normal low back pain, you may continue working with your exercise program for at least 2 weeks and reevaluate.

3. Will lifting weights help my back pain?

A new program of weightlifting is generally not recommended for persons with chronic back pain. After a back specific program has been established, a gradual, incremental weightlifting program may be allowable. Close observation and discussion with your physical therapist and physician are advised.

4. I have already been through physical therapy and I was taught back exercises but they didn't help. Should I go back to physical therapy?

Physical therapy may be helpful to "revisit" if you are not currently exercising and your doctor has recommended a new exercise program. Many people will benefit from a "refresher" course of exercise instruction and a discussion of reasonable expectations.



5. I am overweight and when I exercise, my joints hurt. What can I do to hurt less when I try to exercise?

Many overweight persons benefit from exercise programs. In addition to cardiovascular health and weight loss, exercises will potentially improve long-term pain control. Water-based exercises and low impact programs are often very effective forms of getting started with exercise. Occasionally, persons with pain need pain medications to allow them to get started with exercises.

6. I used to run 2 miles nearly everyday. I am getting over a disc herniation in my low back. My back still hurts but my leg pain is gone. When can I start back on my running program?

Persons with disc herniations often have both back pain and leg pain or "sciatica." Once the leg pain has resolved, the disc herniation is likely not irritating the nerve any longer. A gradual program of resuming your running routine (for example a slow half mile run) may begin at that point). Your back pain may take a little longer to resolve, but should improve as you resume your routine.

7. How soon after my injection can I exercise?

If your injection contained local anesthetics (numbing medication) it is generally advisable not to perform strenuous exercise or hard, physical work the day of your injection. Depending upon the type of injection, regular activities may be encouraged to best evaluate the response to your injection. The local anesthetic will have worn off by the day after your injection and you should be able to resume your normal activities, including exercise.

8. How soon after back surgery can I exercise?

Your surgeon will work closely with you regarding your physical therapy and exercise schedule following back surgery. The most important aspect of rehabilitation after surgery is a gradual, progressive exercise program which emphasizes proper spinal alignment. Depending upon your operation, it may take several weeks of recovery to allow vigorous exercise.

9. I have a bulging disc in my lower back. I have back pain running but not walking. What types of exercises can I do to improve my aerobic conditioning?

Bulging discs in the low back can be sensitive to "bouncing" types of exercises. Many people find that exercises such as swimming, elliptical training, and stair climbing are better tolerated. The bulging discs can also be sensitive to exercises with repetitive flexion and extension of the low back. Therefore, exercises in which the spine is kept in alignment or "neutral" are often better tolerated..

10. I have a very busy home and work schedule and cannot find the time to exercise. What can I do to make the most use of my limited time to exercise?

This is a very common problem in our culture. It is a good idea to "schedule" exercise daily. Taking the stairs instead of the elevator, bypassing that front row parking spot, walking on your lunch break, and learning simple exercises to do while reading or watching TV can be very helpful. The "best" exercise is the exercise that you will do regularly, so doctors suggest that it become a part of your routine. Too much exercise too soon may lead to burn out, increased pain, and limited long term health and pain benefits. Give exercise a chance and it will help to decrease your pain.