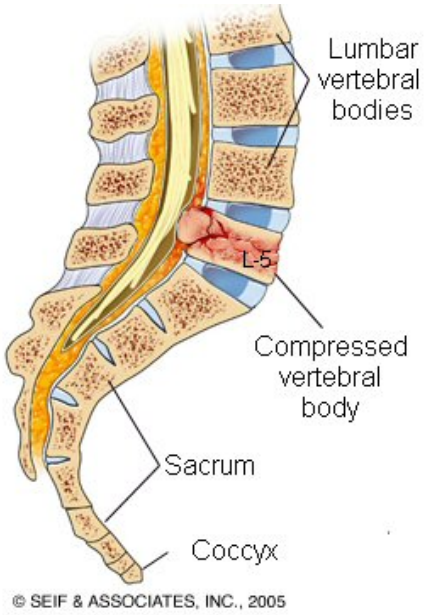
Back, Compression Fracture

A compression fracture happens when a force is put upon the length of your spine. Slipping and falling on your bottom are examples of such a force. When this happens, sometimes the force is great enough to compress the building blocks (*vertebral bodies*) of your spine. Although this causes a lot of pain, this can usually be treated at home, unless your caregiver feels hospitalization is needed for pain control.



Your backbone (*spinal column*) is made up of 24 main vertebral bodies in addition to the sacrum and coccyx. These are held together by tough fibrous tissues (*ligaments)* and by support of your muscles. Nerve roots pass through the openings between the vertebrae. A sudden wrenching move, injury, or a fall may cause a compression fracture of one of the vertebral bodies. This may result in back pain or spread of pain into the belly (*abdomen*), the buttocks, and down the leg into the foot. Pain may also be created by muscle spasm alone.

Large studies have been undertaken to determine the best possible course of action to help your back following injury and also to prevent future problems. The recommendations are as follows.

FOLLOWING A COMPRESSION FRACTURE:

Do the following only if advised by your caregiver.

- If a back brace has been suggested or provided, wear it as directed.
- Do not stop wearing the back brace unless instructed by your caregiver.
- When allowed to return to regular activities, avoid a sedentary life style. Actively exercise. Sporadic weekend binges of tennis, racquetball, water skiing, etc. may actually aggravate or create problems, especially if you are not in condition for that activity.
- Avoid sports requiring sudden body movements until you are in condition for them. Swimming and walking are safer activities.
- Maintain good posture.
- Avoid obesity.
- If not already done, you should have a DEXA scan. Based on the results, be treated for osteoporosis.

FOLLOWING ACUTE (SUDDEN) INJURY:

- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Use bed rest for only the most extreme acute episode. Prolonged bed rest may aggravate your condition. Ice used for acute conditions is effective. Use a large plastic bag filled with ice. Wrap it in a towel. This also provides excellent pain relief. This may be continuous. Or use it for 30 minutes every two hours during acute phase, then as needed. Heat for 30 minutes prior to activities is helpful.
- As soon as the *acute phase* (the time when your back is too painful for you to do normal activities) is over, it is important to resume normal activities and/or work hardening programs. Back injuries can cause potentially marked changes in lifestyle. So it is important to attack these problems aggressively.
- See your caregiver for continued problems. He or she can help or refer you for appropriate exercises, physical therapy and/or work hardening if needed.
- **If you are given narcotic medications** for your condition, **for the next 24 hours do not:**
  - Drive
  - Operate machinery or power tools.
  - Sign legal documents.

- Do not drink alcohol, take sleeping pills or other medications which may interfere with treatment.

If your caregiver has given you a follow-up appointment, it is very important to keep that appointment. Not keeping the appointment could result in a chronic or permanent injury, pain, and disability. If there is any problem keeping the appointment, you must call back to this facility for assistance.

SEEK IMMEDIATE MEDICAL CARE IF YOU DEVELOP:

- Numbness, tingling, weakness, or problems with the use of your arms or legs.
- Severe back pain not relieved with medications.
- Changes in bowel or bladder control.
- Increasing pain in any areas of the body.

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