

# Spinal Pain

## Paediatric Management Advice Leaflet

**Spinal pain** such as back or neck pain can be caused by:

- Spending large amounts of time in one position, such as sitting (e.g. studying, watching TV, playing games) or being inactive.
- Carrying a heavy school bag (>10% of child's body weight), or not carrying your bag correctly (e.g. straps too loose/asymmetrically).
- Lifting something awkwardly.
- Having a poor posture.
- Poor muscle flexibility.
- Over training which can lead to muscle spasm.
- A sudden growth spurt.
- Hypermobility.
- Reduced bone density.
- Reduced vitamin D levels.
- Being overweight.



The spine is strong and problems are rarely due to serious damage or disease. You will not normally need an MRI scan or X-ray.

**Posture** relates to the position of the body. Every position that we get into has a demand on the muscles, joints, nerves and connective tissues in the body. Some postures can become painful due increased load through some or all of these structures.

Good posture allows us to sit or stand with minimal effort and without causing strain on our bodies. It also helps us to avoid developing pain and stiffness.

**Kyphosis** is a forward curvature of the upper part of your spine. It can be congenital (from birth) or acquired due to a disorder or posture. If posture related, it is likely it can be corrected.



**Scoliosis** is when your spine is curved or twisted to the side. Scoliosis can affect people at different points in their lives. It can happen before birth (congenital), in young children (early onset) or in older children and teenagers (adolescent idiopathic).

**Treatment for kyphosis/scoliosis** can depend on age, severity and the amount of time remaining for skeletal growth. The goal of treatment is to prevent progression of the curve and further deformity. This will be monitored by your doctor and treatment discussed jointly.



### General Advice

- Keep moving, even if you have to move slowly at first.
- Change position regularly wherever you are (approximately every 30-60 minutes).
- Exercise can really help your back and can relieve pain. Low impact activities (e.g. swimming, Pilates/core stability exercises) may help you initially to return to activity.
- Painkillers can help you keep moving. However, it is important to discuss it with a pharmacist or your GP.
- In the first 24-48 hours of acute back pain, you can use ice. After this, use heat for 10-15 minutes over the affected area to relieve pain up to 3-4 times a day. Protect your skin by wrapping the heat/ice in a towel and regularly check the skin for any redness.
- Continue with or return to normal activities as soon as possible.
- If you have been over training your muscles, stretching can help to relieve backpain.
- Return to sports gradually and only when you can move freely. You may have discomfort initially when returning to sports. Remember to warm up and stretch before and after sports.

### Will my child need treatment?

It is important to keep your child moving regularly within pain limitations. You can complete your own home rehabilitation programme through playing and completing basic mobilisation and strengthening exercises provided in the leaflet. If your child's symptoms do not improve with the advice within this leaflet please contact the Physiotherapy department or seek medical advice from the GP.

## Important signs and symptoms to look out for

If you have severe, unremitting pain which is getting worse over several weeks and are feeling generally unwell, you should consult your doctor. The following symptoms are rare, but if you suddenly develop any of them, you should seek urgent medical advice.

- Severe pain in back, buttocks, perineum, genitalia, thighs and legs.
- Night sweats and severe, unremitting night pain.
- Loss of sensation, pins and needles or weakness in one or both legs.
- Saddle numbness (loss of feeling in the body areas that sit on a saddle – buttocks, anus and genitals, inability to feel toilet paper when wiping).
- Recent onset of bladder dysfunction (inability to urinate/ difficulty initiating urination/ loss of sensation when you pass urine/ incontinence/ loss of the full bladder sensation).
- Recent onset of bowel dysfunction (bowel incontinence/ constipation/ loss of sensation when passing a bowel motion).
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## Mobility Exercises

The aim of these exercises is to help you regain normal movement, build strength and help ease symptoms. Try to exercise at least 3 times a day. Stop these exercises if you feel they are making your symptoms worse.

### Knee Rolls

Lying on your back with knees together and bent. Slowly roll your knees from side to side keeping your upper trunk still. Repeat 10 times.



### Pelvic Tilts

Sit on a stool and practise good posture. First let your back drop and get rounded, then use your back muscles to straighten your back and arch it (not too much). Repeat 10 times.



### Shoulder Rolls

Sit or stand. Place your fingers on your shoulders. Roll your shoulders back. Repeat 10 times.



### Head Turns

Sit or stand. Turn your head to one side until you feel a stretch. Repeat to the opposite side. Repeat 10 times.

### Trunk Extension

Lying face down with both your hands at shoulder height. Straighten your elbows and lift your upper trunk as far up as you can. Keep your pelvis and legs relaxed. Repeat 10 times.



### Single Knee Hugs

Lying on your back. Bend the leg to be stretched towards your chest and hold onto the knee with both arms. Hold for 20 seconds. Repeat 3 times on each leg.



### Trunk Side Flexion

Stand straight with one hand on your hip and the other straight up. Bend to the side with opposite arm reaching overhead. Keep your pelvis in mid position. Hold 20 seconds. Repeat 3 times each side.



### Back Stretch

Stand or sit. Push your shoulders forward, stretch the arms diagonally forwards and down keeping your chin in. Hold for 20 seconds. Repeat 3 times.



### Hamstring Stretch

Stand with the leg to be stretched on a foot stool. Flex your ankle and push the heel towards the footstool keeping your knee straight. Then bend your upper body forwards from your hips keeping your back straight. You should feel a stretch behind your knee and thigh. Hold for 30 seconds. Repeat 3 times on each leg.



### Trunk Rotation

Sit on a chair. Take hold of the back of a chair and look over your shoulder while turning your upper body. Hold for 20 seconds. Repeat 3 times each way.

## Strengthening Exercises



### Chin Tucks

Sitting straight-backed. Pull your chin in, keeping your neck and back straight (not tipping your head forwards). Hold for 5 seconds. Repeat 10 times.

### Bridge

Lying on your back with your knees bent and feet on the floor. Lift your pelvis and lower back gradually off the floor. Hold for 5 seconds. Slowly return to the starting position. Repeat 10 times.



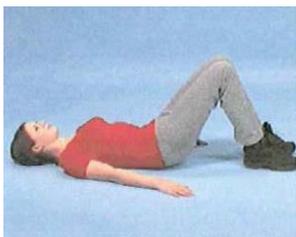
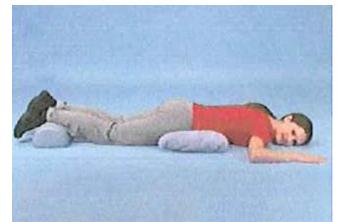
### Clam

Lie on your side with your knees bent. Tighten your buttocks to lift your top knee as far as you can without letting your pelvis rotate forward or backwards. Keep your feet together and back straight during the exercise. Hold for up to 30 seconds. Repeat 3 times on either side.

## Resting Positions

### Prone Lying

Lying face down with a cushion under your stomach. You may need several cushions. Relax for a while in this position.



### Supine Lying

Lying on your back with your knees bent and arms by your side. Try to use this as an alternative to sitting. For increased comfort, try placing cushions or a box under your knees for more support.

### Sitting

Limit sitting as much as possible. If you have to sit, use a chair with good back support or use a rolled up towel or lumbar roll to maintain good posture.



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