Back In The Saddle, The Desk Jockey Rides Again

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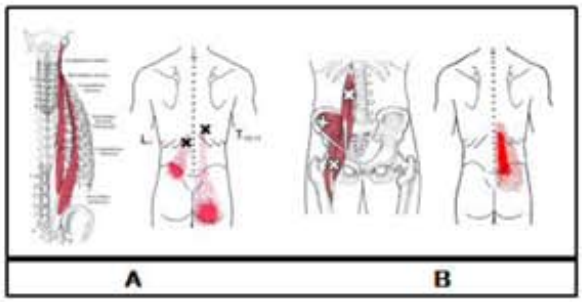
After a family outing, Bob noticed low back pain that wouldn't go away. In reviewing his actions, all that came to mind was the pain began after lifting his 6 year old son. Bob remembered leaning forward, twisting to the left and lifting the boy.

When he came to MyoRehab, he described his pain starting at the mid back and traveling down his to the hips. He said his pain was worse in the morning and getting out of bed was difficult. Bob had been able to control his pain with a hot shower and over-the-counter pain medication. This no longer worked.

Bob was athletically inclined and was concerned that his inability to workout at the gym over the last few months was causing him to put on a few extra pounds. He felt that the extra weight contributed to the increased back pain.

Bob was a technician and spent long hours sitting at a desk. He described himself as a "desk jockey". By the end of the day, his low back pain was nearly unbearable. Bob said he had difficulty standing upright and occasionally found himself walking to the restroom bent over.



After reviewing his medical history in-depth, we did a range of motion evaluation. This enabled us to identify a significant player in the origin of Bob's pain. As you can imagine, the muscles on both sides of the spine were painful and in spasm. Collectively, these long muscles are known as the paraspinals. (Illustration A)

When palpated, the Trigger Points in the paraspinals reproduced most of Bob's pain. A Trigger Point is a hypersensitive point in a muscle that when stimulated, produces pain that is referred in a predictable pattern usually away from the Trigger Point. Trigger Points in the paraspinals of the mid-back were referring pain into Bob's low back and buttocks.

Bob also described more specific pain along the lumbar spine. This pain pattern was produced by the iliopsoas. (Illustration B) The iliopsoas muscle attaches to the front of the lumbar spine and travels down through the pelvis to attach at the upper thigh.

The iliopsoas, together with the paraspinals, contributes to keeping the body erect. Usually, when one of these muscles is injured, it is only a matter of time before the other muscle develops Trigger Points.

When treating one of these muscles, the other must also be treated. Failure to do so can create an imbalance that could lead to increased pain. Additional muscles were also treated to insure this painful condition would not easily return.

We also addressed factors that would perpetuate Bob's pain. We discovered that Bob was sleeping in a fetal position. Keeping the hips flexed (knees drawn up to the chest) provided partial relief from the low back pain, but kept the iliopsoas shortened all night long. When Bob tried to stand up in the morning, his iliopsoas muscle resisted lengthening producing its typical pain pattern.

Likewise, in this position his paraspinals remained stretched all night long. Due to the Trigger Points in the paraspinals, when he stood up and shortened them, their pain pattern became obvious.

The fetal position is not unlike the position of the body seated at a desk. This accounted for Bob's inability to stand upright after long periods of sitting. Eliminating perpetuating factors by providing Bob with alternative sleep positions combined with a specific exercise program for work and home put this "desk jockey" back in the saddle. Bob also learned that bending his knees and keeping his back straight while lifting would prevent this injury from reoccurring.

Are you a "desk jockey" with low back pain? Is your pain increased when you get out of bed in morning or sit at a desk too long? Give us a call at MyoRehab.