

PATIENT EDUCATION HANDOUT

Low-Back Pain in Adolescents

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Low-back pain is a common reason for some children and adolescents to see their doctor. The risk for low-back pain increases with increasing age, puberty and growth. At least 7% of 12-year-olds have had at least 1 episode of low-back pain. By age 20, the lifetime prevalence of low-back pain has been reported as high as 80%. Having low-back pain as a teenager is predictive of having low-back pain as an adult.

Most back pain in adolescents is benign and usually caused by musculoskeletal conditions, such as strains or sprains. Some adolescents have had an injury or have serious underlying medical conditions that cause their low-back pain. Eighty percent of adolescent low-back pain does not have a specific cause and may be due to many different things.

Risk factors for having low-back pain include a family history of low-back pain, a previous back injury, time spent sitting, obesity, sports participation and female gender. Teenagers who do not participate in any physical activity are more likely to have low-back pain compared to teenagers who are more active. However, those who are very active in sports, especially very competitive sports, are more likely than sedentary individuals to have low-back pain. A lot of parents worry that a heavy backpack will cause low-back pain, but several studies have concluded that this is not true.

Your doctor should perform a comprehensive history and physical on your teenager during their visit. They should also look for warning signs that the low-back pain may be due to something more serious. Pain that wakens your child from sleep, pain that is sudden, pain that lasts longer than four weeks, fever, weight loss, tenderness over the spine, or any abnormal neurological findings like numbness or tingling need medical attention right away.

There are many ways to help your child or teenager if they are having low-back pain. It is important to let your child rest and avoid activities that make their low-back pain worse. Applying ice in the first 24 hours can help them feel better, after which a heating pad will help. Using over-the-counter medicines, like ibuprofen, can help with their pain and muscle inflammation. Their doctor may also refer them to physical therapy if the back pain is due to muscle weakness. Physical therapy focuses on increasing muscle strength and flexibility. Osteopathic manipulative treatment has also been shown to improve muscle function and movement in this population.

SOURCE(S):

1. Back pain in children. OrthoKids: Pediatric Orthopaedic Society of North America. <https://orthokids.org/en-US/Condition/Back-Pain-in-Children>
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3. Nigrovic P. Patient education: back pain in children and adolescents (beyond the basics). Uptodate.com. Updated August 2, 2021. <https://www.uptodate.com/contents/back-pain-in-children-and-adolescents-beyond-the-basics>

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