

Sciatica Self Care

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INTRODUCTION

The vast majority of sciatica cases are caused by or related to herniation and/or degeneration of one or more of the spinal discs in the lower back. Because of this, the information and self-care instructions in this book are directed at disc-related sciatica cases.

Explanations of, and care suggestions for sciatica and sciatica-like symptoms due to other underlying causes can be found on my websites:

www.SciaticaSelfCare.com

www.SciaticaTreatmentAtHome.com

DISCLAIMER

The suggestions in this book are safe and effective for the vast majority of individuals; however, the advice contained herein cannot and does not take the place of professional treatment. If you fail to improve within a few days of using the suggested self care measures, or if you get worse, an evaluation with a qualified health care professional is strongly recommended.

In particular, if you experience a loss of bowel or bladder control, severe weakness in your legs, and/or numbness in the groin and buttock area (“saddle anaesthesia”), you should seek medical attention as soon as possible, as this is a sign of possible severe neurological damage.

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CHAPTER 1: Simple And Effective Self Care For Sciatica And Disc Pain

Ice or Heat?:

One of the common confusions people have with self-treatment is the question of when to use ice and when to use heat. There are all sorts of recommendations out there but a simple rule of thumb is to base the decision on what the symptoms are.

If you have sharp or intense pain with or without swelling, this usually indicates that there is inflammation present, and this is a time to use ice.

On the other hand, if your symptoms are mostly stiffness or mild soreness, there is usually not significant inflammation present, and in this situation heat is a better choice.

As a precaution, anytime you have experienced a trauma, or think you might have injured yourself, it is best to avoid using heat for at least 48 hours to make sure that the inflammatory response has not been activated and the inflammation has simply not had enough time to set in.

When in doubt, avoid using heat!

Although heat may feel good while it is on (because heat causes pain signals to be partially blocked from reaching the brain), heat also increases the inflammatory response of the body. Increased inflammation means increased pain when you stop using the heat.

Although ice may not feel as comfortable as heat, it is one of the best anti-inflammatory measures you can take. The short-term discomfort of applying ice usually pays off in long-term relief.

Although some experts recommend alternating ice and heat (for example, 10 minutes of ice followed by 10 minutes of heat), I have not seen any particular advantage in doing this. For most situations, choosing one or the other based on the symptoms as was just discussed is usually the simplest approach and in my opinion works just as well or possibly better than trying to alternate the therapies.

Regardless of whether you are using ice or heat, you should always separate the ice or hot pack from the skin with a layer of cloth to prevent skin damage.

It is also important to avoid applying ice or heat on an area that has been recently treated with Theragesic, Icy Hot, Biofreeze, Ben Gay, or any other topical analgesic - wait until the sensation of the analgesic has completely worn off, otherwise the ice or heat could cause skin irritation or damage.

Also when using either ice or heat, you should only apply the treatment for about 15 minutes at a time, allowing the skin to return to normal temperature (to be safe, allow 1 to 2 hours) before re-applying the treatment. As it may take a few minutes for the cold or warm sensation to make it through the cloth layer between the cold/hot pack and your skin, begin timing when you start to feel the temperature change on the skin.

If you have impaired circulation or decreased skin sensitivity due to nerve damage, diabetes, etc., it is best to check with your doctor first before using ice or heat.

McKenzie Method:

McKenzie exercises (named for physical therapist Robin McKenzie) can also be very beneficial during times of acute sciatica pain and inflammation

(although they also have benefit as a preventive form of exercise as well). McKenzie exercises are often associated with extension (backward bending) of the spine, but in reality they are about testing for, and then exercising in, positions and stretches that alleviate or produce “centralization” of symptoms.

Centralization means that the symptoms move closer to the spine. For example, if you have low back pain with sciatica (leg pain), centralization would be where the symptoms leave or lessen in the leg, even if the pain stays the same or gets worse in the buttocks or low back. Over time, in most cases the buttock and low back pain will also improve in situations where initial centralization is achieved.

Because the vast majority of the time extension of the spine is beneficial in reducing or centralizing pain, McKenzie exercises are often called “McKenzie Extension Exercises”, but true McKenzie Technique

actually tests for the position(s) that are beneficial for an individual patient.

So, although McKenzie exercises most often do involve extension of the spine, they can involve flexion (forward bending), side bending, and/or rotation – depending on what position reduces or centralizes symptoms.

The following positions/stretchers from McKenzie technique are the most common ones that are helpful. You may find other positions that work better for you. You will probably have some pain when you first move into a new position. After you get into each position, wait 30 seconds to a minute to see what happens with your symptoms.

The thing to remember is that you are looking for a position that eases the symptoms the furthest away from the spine.

If you have sciatica all the way to the foot, a good position would be one that moves the pain out of the foot and calf, even if it intensifies pain in the buttocks or low back. If you only had sciatica in the buttock and thigh, a good position would be one that moves the pain out of the buttock and thigh, even if it gets worse in the low back.

Any position that makes the symptoms the furthest from the spine WORSE should be avoided!

In other words, do NOT continue with any position that makes symptoms either more intense in the leg or extend further down the leg.

Keep testing different positions until you find the one that does the best job of alleviating the symptoms furthest from the spine. Once you find a position that

works well, hold that position for 1 to 2 minutes and then take a break for 30 seconds or so in a neutral position. Repeat the beneficial position frequently, as long as it continues to relieve the symptoms furthest from the spine.

The following are illustrated instructions for the most commonly helpful McKenzie exercises.

Low Back Pain & Sciatica (Acute Symptom Care):



Figure 1. Lie on your stomach on the floor or another firm surface and prop your upper body up on your elbows while keeping your hips/pelvis down on the floor. Hold this position for 30 seconds to a minute or more at a time. Experiment with bending your upper body left and right to see what position reduces or centralizes the symptoms the most, and use that position when doing the exercise. This can be repeated many times throughout the day during times of acute flare-ups.



Figure 2. The “Cat” stretch is an alternate exercise to the one in Figure 1. Simply get on your hands and knees and slowly relax your back and abdominal muscles so that your stomach hangs down and your lower back curves downward. Keep your head raised, looking in front of you. Hold this position for 30 seconds to a minute or more. This can be repeated frequently throughout the day when needed.



Figure 3. If you have an exercise ball, you can use it to stretch your back in extension as shown. If you have difficulty balancing on the ball, be sure to have someone assist you by holding the ball still. This position can be maintained for up to several minutes, but be sure to hold your head up periodically to avoid getting lightheaded. If you do not have an exercise ball, you can use a couple of pillows underneath your low back to place it in extension.



Figure 4. As mentioned in the text, McKenzie exercises are usually associated with spinal extension (backward bending), but in reality, McKenzie method uses any position that reduces or centralizes symptoms, including flexion (forward bending). A flexion stretch of the spine can be done on a thick pillow, or on an exercise ball as shown. Because flexion can cause worsening of disc problems, it is recommended that you only use this positioning for short periods of time (a minute or less) unless otherwise instructed by a health care professional.

The same exercises just discussed can also be used as a preventive measure once symptoms are gone. As a general rule, if there are no significant symptoms, using just straight extension (as in Figures 1 and 3 works quite well for preventive purposes.

Sleep Position:

Sometimes simply lying or sleeping in certain positions will help reduce sciatica and other disc-related symptoms. For most cases, there are two suggested sleep postures. One is on the back with a pillow under the knees (keeping the knees bent reduces tension on the spinal cord and nerves). The other is lying on one side with a pillow between the knees. Illustrations of these positions are on the next page.



Figure 5. Recommended sleep positions.

Topical Analgesics:

There are numerous lotions, creams and gels you can apply to temporarily reduce pain. Different people prefer different products. Some prefer products that create a burning sensation such as Theragesic, while others prefer the cooling effects of menthol-based products like Biofreeze or Icy Hot. Regardless of the type used, the basic effect of most of these products is to stimulate nerve endings that will distract the central nervous system's attention away from pain. I suggest experimenting with different ones to see what works best for you.

Laser and LED Devices:

Another passive therapy that has at-home treatment possibilities is light therapy using either LEDs (Light Emitting Diodes) or “Cold” Lasers. Usually the red-colored lights are the most effective for pain and inflammation control. Simply shining the light over the area of pain and on the low back (where the nerves that form the sciatic nerve arise) can start to reduce pain within a few minutes.

Although professional treatment lasers tend to be more powerful and have more features, you can get good effects from even an ordinary laser pointer device from an office supply store or one of several LED home-treatment devices (see the Resources section at the end of the book).

Magnetic Therapy:

Magnets have become increasingly popular for self-treatment of pain. Magnetic therapy products can work quite well for some people. Nikken, a popular “network marketing” company specializes in therapy magnets, and an experienced Nikken distributor can be a convenient and knowledgeable source for magnetic therapy products.

There are other sources for therapy magnets though (see the “Resources” section), that sell magnetic products for much less than what comparable Nikken products cost. If you feel comfortable with purchasing and using magnets on your own, these other magnetic therapy suppliers are probably the most cost-effective choice.

If you decide to try magnets, I do have some basic tips: In most cases, it is recommended to use the

“bio-North” side of a magnet toward the body when treating pain conditions. Most magnets will be marked as to their polarity, or if they come with a cloth-covered side and a metal or smooth side, the cloth goes against the body.

Magnets can be overused, in which case symptoms will worsen after an initial period of relief. For this reason, I recommend using magnets for a maximum of about an hour at a time, with at least an hour break before re-applying.

If you do experience a worsening of symptoms after an initial period of relief with the magnets, simply discontinue using the magnets for several hours and then try them again – but for a shorter period of time.

Oxygen:

Some sciatica symptoms are due to ischemia (lack of oxygen supply) of the nerves. In some cases it is possible to reduce these symptoms by increasing the oxygenation of the blood.

Now, getting access to an oxygen tank is tricky if you don't have a breathing problem, but in recent years there have been a few "oxygen bars" popping up in major cities where you can go and pay to use oxygen.

If you do have oxygen available to you, it is definitely worth a try. If not, simply doing deep breathing exercises (breathe in slowly as deeply as you can, hold the breath for a few moments, and then slowly breathe out fully before breathing in again) will raise the oxygen content of your blood and may help ease pain.

If you do get a chance to try oxygen, and you want to have full time access to it, there's a link to a company that sells a very handy oxygen concentrator machine for home use listed in the "Resources" section.

Over The Counter (OTC) Medication:

There are a variety of OTC medications that can be used to decrease pain and/or inflammation. Because of individual variations in body chemistry, one product may be more effective than another for a given person.

In general, if you do want to try an OTC medication, I suggest using one of the NSAIDs (non-steroidal anti-inflammatory drugs), because these products will reduce both pain and inflammation.

Most of the OTC pain medications are NSAIDs. The one notable exception is Tylenol (acetaminophen), which is strictly a pain-killer and does not reduce inflammation.

Regardless of what product you use, it is important to adhere to the package dosing directions, as overdosing on these products can cause serious (potentially fatal) side-effects.

The other recommended precaution is to only use these products for a few days at a time because long-term daily use of anti-inflammatory drugs can actually interfere with healing by suppressing the body's ability to produce collagen.

Ironically, although aspirin and ibuprofen are commonly-used to treat the symptoms of degenerative discs and degenerative spinal arthritis, these medications appears to actually speed up the

progression of these conditions when used daily for extended periods of time.

Because joint cartilage is composed of collagen, the collagen-suppressing effect of these medications interferes with the repair and reconstruction of the joints, thereby accelerating degeneration, even though the medication reduces symptoms for a time.

Nutritional Supplements:

There are a number of nutritional supplements that can be beneficial for easing the symptoms and even helping the body repair herniated and degenerated discs and spinal joints, thereby reducing sciatica.

The quality of nutritional supplements varies considerably, and for this reason I recommend purchasing supplements from professionals (nutritionists, medical doctors, doctors of chiropractic,

naturopathic doctors, etc) who dispense nutrition products, because professionals usually have done the background work to find good quality products.

Another option is to talk to local health food store proprietors as to their recommendations (when you get similar recommendations from more than one store, those are probably reliable choices). While the cheapest product is probably not the best, the most expensive product is not necessarily all that good either, so it pays to work with professionals to get good products.

The majority of the nutrients that can be beneficial for disc problems and spinal degeneration fall into two categories: anti-inflammatory supplements and "chondroprotective" supplements.

The [anti-inflammatory supplements](#) exert their effects by controlling the inflammatory response and thereby

reducing swelling and pain. There are many such supplements, but among the most popular and best-documented by scientific research are: omega-3 fatty acids (EPA and DHA – mostly from fish oil), bromelain, hesperidin, quercetin, curcumin (tumeric), MSM, ginger, and aloe vera.

As with OTC medications, different ones work better for one person than another. For the sake of simplicity, I recommend using either Omega-3 fatty acids (at a dose that provides approximately 1,000 mg of EPA per day), or a product with a combination of two or more of the other substances mentioned (follow package instructions for dosing recommendations).

If you are already taking either over-the-counter or prescription anti-inflammatories, or you are on blood-thinning drugs such as coumadin, it is strongly recommended that you consult with a pharmacist or

licensed healthcare provider before starting any nutritional anti-inflammatories as there is a potential for dangerous interactions.

Unlike anti-inflammatory medications, these supplements do not appear to interfere with collagen production to a significant extent and would therefore be better suited to long-term daily use.

The "chondroprotective" supplements are those that provide building blocks for the body to produce new cartilage. One of the most popular of these is glucosamine, which comes in the sulfate and chloride forms, as well as something called N-acetyl glucosamine. For joint cartilage repair, the sulfate and chloride forms are the most researched and appear to be equally effective.

In addition to glucosamine, chondroitin sulfate, MSM (also mentioned above as an anti-inflammatory), and

SAM-e all appear to help the body repair joint cartilage. Again, for the sake of simplicity, I recommend a combination product containing at least glucosamine, chondroitin, and MSM (my suggested daily dose would be approximately 1000 mg each of glucosamine and chondroitin).

One other group of supplements that may provide some help in the form of temporary symptom relief is the [natural muscle relaxers](#). These include valerian root (if you happen to get a bottle and open it up – it's supposed to smell that bad!), passion flower (passiflora), and hops. In case you were wondering, yes, that's the same hops as in beer. You can use hops in supplement form, or if you really get desperate, adequate quantities of the beer form will usually take at least some edge off the pain (this suggestion is “tongue-in cheek”, but in reality self-medicating with alcohol for symptom relief may work

as well or better than even prescription medication for some people – as a short-term measure!).

Although usually pretty mild, these herbal muscle relaxers can sometimes have a powerful sedative effect on some people, so it is advised not to take them before driving or operating heavy machinery just to be on the safe side.

It is also strongly advised that you not combine these supplements with prescription muscle relaxers or alcoholic beverages as they can interact.

Bed Rest:

Although once the main recommendation for injuries of all kinds and still a common recommendation in cases of sciatica, extended bed rest has been shown

to be counterproductive in most cases of sciatica and disc injuries. While it may be necessary due to pain to lie down a lot during the first few days of an acute sciatica episode, it is recommended to be as mobile as possible as soon as possible.

Extended bed rest results in accumulation of swelling in the injured area as well as muscle deconditioning, which ultimately delays recovery.

Unless specifically prescribed by a doctor, bed rest should not extend beyond a few days.

Mind-Body Healing:

One other type of “exercise” that I think bears mentioning is the use of visualization and positive affirmations to enhance healing. While this is not

physical exercise, mind-body healing techniques do involve regimented mind exercises, and can be very beneficial.

When one has a health problem such as a painful disc condition, there is often a tendency for fear, anxiety, and depression to set in, and for one's thoughts to be focused on the health problem and its symptoms. Negative emotions and focusing on symptoms can actually increase one's perceptions of the symptoms, making things worse. In addition, negative emotions can trigger the release of stress hormones, which increase inflammation, also tending to make things worse.

On the other hand, by consciously focusing one's thoughts on healing and feeling good, it is often possible to reduce the perception of symptoms and possibly even promote healing.

The more consistent you are at imagining yourself as being healed – as if it has already happened, not as some future event – the greater the potential for healing to actually occur. This takes a bit of mental discipline, but the rewards can be well worth it. After all, if your activities have been limited by sciatica and other disc-related symptoms, you probably have some extra time to devote to imagining yourself as healed.

One distinction I think is important is to be sure you give yourself positive messages of being healthy, not negative messages of not being in pain. For example, if you are using verbal affirmations, you want to use phrases like “I am happy and grateful that I am totally healthy and feel wonderful!”, as opposed to things like “I am so happy that I am no longer in pain.”

The reason for this is that if you are thinking about not being in pain, the brain still has to focus on pain – tending to reinforce it. If I tell you, “Don’t think about a pink elephant.”, chances are you made a picture in your mind of a pink elephant.

For best results, you want to be focused on what you WANT – in this case, being healthy, feeling great, and doing all the great things in life you want to do. The more you can keep your mind focused on being healthy and feeling good, the greater the benefits.

At first, it may be difficult to shift your focus away from your symptoms, but with some practice, it will get easier to focus on being healthy. Use positive affirmations, imagine yourself doing favorite activities and feeling great while doing them, and be grateful for the amazing healing ability of your body. Again, imagine yourself as being healthy and feeling great right now, instead of it being some future event.

Most people who make the effort to do this are pleasantly surprised at the difference it makes.

Emotional Freedom Technique:

In addition to simply directing your thoughts toward being healed, there is a technique that is sometimes helpful in alleviating pain and/or alleviating other stressors that may be causing increased pain due to muscle tension.

This method is called Emotional Freedom Technique. It uses acupressure stimulation combined with verbal affirmations (you simply repeat a phrase related to your pain or stressor while you tap on various points on your body).

The full instructions for doing this technique on yourself are available free online (there is a downloadable free basic manual at www.EFTUniverse.com).

CHAPTER 2: COMMON BACK EXERCISES YOU SHOULD AVOID

When you are having acute disc-related symptoms like sciatica and/or severe low back pain, there are some exercises that should be avoided until such time as the major symptoms subside and the sciatica is gone.

It is important to avoid hamstring stretching if you have active sciatica, especially by bending forward at the waist when standing or sitting.



Figure 6. Hamstring stretches like these should be avoided while sciatica and other acute symptoms are present.

The reason why you should avoid hamstring stretches is that although tight hamstrings are sometimes a contributing cause to low back problems, **if you try to stretch the hamstrings when you are having acute disc-related symptoms, there is a tendency to stretch the sciatic nerve and its component nerve roots as well.** If those nerve elements are already irritated, stretching them will only make things worse – often MUCH worse.

You may benefit from hamstring stretches once the nerve irritation subsides as part of a rehabilitation program, but wait until you are feeling better, and stick to stretching by lying on your back and bringing the leg towards your body, rather than bending your body toward the leg while standing or sitting.

Another type of exercise to avoid when you are having major symptoms is abdominal strengthening,

such as with sit-ups or crunches (partial sit-ups). Again, although weak abdominal muscles do contribute to back problems, the time to start reconditioning the abdominal muscles is not when you have sciatica or major back pain. Sit-ups and crunches increase pressure in the spine, and may greatly increase pressure on sensitive, already irritated nerves. Wait until your symptoms have subsided before doing any abdominal exercises, and even then start slowly and build up gradually.

CHAPTER 3: AVOIDING THE CAUSES OF SCIATICA AND DISC PAIN

If you are reading this book, I realize that you probably already have sciatica and the information in this chapter may seem like it comes a little too late. Even if you do already have sciatica, there are ways you can help keep it from getting worse, as well as prevent future problems.

So, here's a list of common things to AVOID as much as possible:

Avoid carrying or lifting something with your arms extended out in front of you.

Avoid bending forward at the waist when standing or sitting.

Avoid sitting for prolonged periods of time, particularly in a slouched position or in an unsupportive seat.

Avoid trying to lift something that is very heavy for you.

Avoid twisting repeatedly or while holding something heavy when standing or sitting.

Avoid lifting weights with poor form or body position, or "cheating" a lift by jerking a weight up to gain momentum. Lifting the appropriate amount of weight for your strength level with good form and slow, controlled movements will build muscle much faster than using momentum to lift a heavier weight that you cannot control.

In addition, if you already have sciatica or have recently had an episode of sciatica, it is a good idea

to avoid or at least limit high-impact activities like running, jumping, contact sports, off road driving or cycling, snow skiing on uneven terrain, and boating or water/jet skiing on choppy waters.

Now, certain activities like sitting may not always be avoidable. When you simply have to engage in such activities, you can do a lot to reduce the negative effects of them by simply taking frequent breaks. The breaks do not need to be very long. Just taking a stretch break (or do some of the exercises shown in the next chapter) for 30 seconds to a minute every 20 to 30 minutes can go a long way toward preventing problems.

When you need to lift something, it is a good idea to test the weight by lifting with low to moderate effort to find out how heavy it is rather than grabbing it quickly and pulling up without knowing if it is more than you can handle safely. When it's too heavy for you, get

help to lift it. It is far better to swallow a little pride and ask for help than to risk an injury that could permanently disable you.

Although commonly used to supposedly prevent low back injuries that can result in sciatica, back belts, whether they be the elastic kind often seen in industry, or the wide leather belts used in weightlifting, are rarely an effective means of injury prevention by themselves.

In fact, some studies on the use of industrial back belts have shown no benefit whatsoever when the back belts were dispensed without any education or training for the users. Back belts are usually helpful as a part of an overall back injury prevention program because they act as a reminder to the user to bend and lift properly (when the user has been educated on the importance of proper lifting techniques).

There are some special back braces that can be used in the course of sciatica treatment that provide stabilization and partial decompression of the spine, but these are usually only dispensed by licensed healthcare providers as a part of an overall treatment regimen. Such doctor-prescribed braces are much more restrictive to movement than the typical industrial back support.

CHAPTER 4: RESOURCE GUIDE

Ice Packs:

Various types of gel ice packs are available anywhere first aid supplies are sold, or the old fashioned ice pack you put ice cubes and water in can work too, but a simple ice pack you may already have in your freezer is a package of frozen peas or corn. Other frozen foods can work, but peas and corn are small enough that the package can be formed easily to the area needing treatment.

Hot Packs:

As with ice packs, you can obviously buy a hot pack at many stores, but you can also use a wet/damp towel heated for a minute or so in a microwave oven
(DO NOT USE A REGULAR OVEN TO HEAT THE TOWEL DUE TO FIRE RISK!)

The heated towel can then be used by itself, or put in a plastic bag to keep it from making your clothes wet.

Exercise Balls:

Exercise balls are usually available at any store that carries sporting goods. Beware of extremely inexpensive ones, as these can be prone to leaks or bursting. To purchase one online, good quality exercise balls are available at www.optp.com.

Magnetic Therapy Products:

If you are in a hurry, you may be able to get magnetic therapy products right away from a local Nikken distributor. Nikken products are a bit pricey, but a distributor may be able to get you the product you need within a few hours, plus a distributor can give

you helpful tips on how to use magnetic therapy products.

On the other hand, magnetic therapy products can usually be purchased at a much lower cost than what a similar Nikken product would cost. I have included links below to the main Nikken website, as well as a link to a low-cost supplier of magnetic therapy products:

www.nikken.com

www.lhasaoms.com (in the “products” menu, select “Supports and Bio-magnetic Products”)

Lasers and LED Devices:

There are numerous products on the market that range from \$15 or \$20 up to thousands of dollars. For acupuncture stimulation, a regular red laser pointer works quite well. For treatment of a broad area, an LED Device with multiple light emitters may

be easier to use (they often can be laid on or strapped to the body). Here's a couple of sources for Laser and LED Products:

www.laserplanet.com

www.lightrelief.com

Oxygen Concentrators:

For home oxygen machines, one of the simplest and least costly products is here:

www.o2innovations.com

Emotional Freedom Technique:

For information, including a full FREE downloadable manual on Emotional Freedom Technique, go to

www.EFTUniverse.com.

Conclusion

I hope that you have found this ebook helpful. If you need additional help or information, my SciaticaSelfCare members website has a tremendous amount of additional information, including:

Video Instruction For The Exercises In This Book

Text And Video Instructions For Advanced
Self-Treatment Methods

Reviews Of The Pros and Cons Of The Professional
Treatment Options That Are Available

Opportunity For A Free E-Consultation
On Your Case With Dr. Best
For More Information, Visit:

www.SciaticaSelfCare.com

or

www.SciaticaTreatmentAtHome.com