



Don't Let Pain Keep You Out of the Race

By Amy Rice, MSPT, Center for Pain Management

The streets and sidewalks of Indianapolis are now crowded with amateur athletes at the height of training for the OneAmerica 500 Festival Mini-Marathon. With 35,000 people registered to run or walk the country's largest half-marathon the first weekend of May, training is a popular topic of water cooler conversation.

The pros know that many sports injuries are usually the result of improper training. But since most of us are not professional students of the sport of running, it's important to note that strength training and flexibility are key to avoiding running injuries that can lead to sudden back injury or even chronic pain.

The National Institute of Health Statistics indicates that low back pain is the most common type of pain reported by Americans. The good news is — especially when it comes to running — most pain can be prevented with preparation or greatly eased with proper pain management treatments.

Here are some quick guidelines to help you successfully avoid back injuries whether you're gearing up for the race or committed to daily jogs.

- **Seek medical advice.** Preparing for an event such as the Mini-Marathon will likely involve a change in your workout routine and an increase in physical exertion. If you're thinking about training for an event like the Mini, it's wise to talk with a doctor about your cardiovascular risk factors and personal fitness level prior to changing your workout routine — especially if you have a history of back pain. If you've had a lower back injury in the past, you may be prone to re-injury. And if you're not in tip-top shape, you may need to focus on strengthening your core muscles as you're training. A medical professional can prescribe physical therapy or a range of strengthening or stabilization exercises to supplement your training program. Seek out a local pain center for trained specialists in your area.
- **Wear the right equipment.** Each time your foot hits the ground while running, you can exert a force on your spine three to six times your body weight. A good pair of running shoes will have a wide surface area and sufficient cushion designed to help prevent back injury or back pain by absorbing some of this shock. It's recommended that if you're running three to four times per week, replace your shoes every three to four months. As soon as your shoe loses some of its cushion, you're at greater risk for injury to your lower back, especially if you run on pavement. Also, different foot types require different shoes.
- **Don't overdo it.** Most lower back pain and back aches come from overuse. While it's true that exercise makes you stronger, it also can make you weaker. Exercise tears muscle tissue, so building rest days into your workout schedule is essential to giving your body a chance to reduce inflammation and repair muscle tissue.
- **Stretch, warm up and cool down.** Cold muscles are more prone to injury than warm ones. To improve performance and avoid injury during runs, you should gradually increase your core body temperature and the amount of blood flowing to your muscles by first stretching and warming up. Walking briskly or jog before you run, for instance. At the end of your workout, take another three to five minutes to cool down and stretch yet again.
- **Listen to your body.** Some aches and pains can be relieved by using over-the-counter, anti-inflammatory medications and resting for a few days. But when you've pushed your

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body too hard, too quickly or too often, you can experience acute pain that comes on suddenly and is intense and debilitating. This is your body telling you that something is wrong, so don't ignore it or it may turn into a chronic pain issue. A specialist in pain management can thoroughly assess your condition and offer options for fast pain relief.

There are a variety of treatments for back and neck pain that range from conservative to very aggressive. In addition to over-the-counter medicines and rest, other treatment modalities include physical therapy, weight control, steroid injections, non-steroidal anti-inflammatory medications, physical rehabilitation, and — in extreme cases — surgery or spinal cord stimulator implantation.

Recently, a figure skater from Fishers was beginning her typical morning training routine when she suddenly experienced a pain so paralyzing that her neck and

back became immobilized. She was preparing for a competition and did not have weeks or even days to rest. She bypassed the urgent care clinic and emergency room, and instead contacted a pain management center where she was seen by a physician the same day.

The patient, who was diagnosed with a facet injury in her neck, was presented with three treatment options. She chose the option that offered the most rapid return to her training schedule: steroid injections at the site of injury. She was pain free and back in training the next day, and competed just a few days later.

Like this athlete, you don't have to just "deal with it" when pain occurs or wait for it to "go away." Whether your goal is to get back to your Mini training schedule, get back to work or simply get back to life, seek medical treatment from a qualified pain management specialist.



About the Author

Amy Rice, MSPT, brings more than 15 years experience in the medical industry to her role as administrator of the Center for Pain Management, located in Indianapolis. She is a licensed physical therapist, a Fellow of the American Academy of Pain Management, and holds a master's degree in physical therapy and bachelor degrees in biology and music performance. Amy manages day-to-day operations of the Center's medical practice and surgery center. The Center for Pain Management's team of board-certified pain physicians, psychologists, licensed physical therapists and supporting professional staff offers the most comprehensive, evidence-based diagnostic and treatment programs available to pain patients in Central Indiana. Expert services include a balanced mix of modalities including interventional treatments such as facet, spine or epidural injections or nerve blocks; and spinal cord stimulation, medication management, physical therapy and psychological evaluation. For more information, call 317-706-PAIN, log on to www.indypain.com or e-mail arice@indypain.com.