

“Oh, My Aching...”

Back? Neck? Feet? Zap that pain fast—and make sure it doesn't come back.

By Gail O'Connor

You worked in the garden—now your back is out of whack

To every season, there's an activity that can lead to a back-wrenching overuse injury. This time of year, it may be gardening, carrying heavy bags down a long airport concourse, or helping your freshman move into his dorm room. If you know you have a vulnerable back, you may unwittingly be making matters worse: In a recent Ohio University study, James Thomas, Ph.D., associate professor of physical therapy, found that backache sufferers who were worried about pain tended to avoid moving around, ultimately weakening already strained muscles, which set them up for another pain whammy.

Try this at home Rest for two days, applying ice and taking pain relievers (see “Fast Pain Zappers,” page 53). Then focus on strengthening all your muscle groups to take pressure off your back. Experts advise walking and cross-conditioning (swimming, bike riding).

When to see the doctor If pain started as the result of trauma—a car accident, say, or a fall—or if you have other symptoms, such as leg weakness, tell your doctor; he may want to check for a fracture or nerve irritation. →

You hurt your shoulder reaching for the top shelf

Major-league pitchers injure their shoulders throwing fastballs—you were merely retrieving a platter from a high cabinet. What gives out? Your rotator cuff, the small network of muscles and tendons that connects your upper arm to your shoulder. “As you get older, even as early as 40, your rotator cuff loses some of its elasticity, making it more vulnerable to injury,” explains Kimberly Templeton, M.D., associate professor of orthopedic surgery at the University of Kansas Medical Center. Two common triggers: repeating an overhead motion, like you do when swimming freestyle laps, and sudden strain—extending your arms to stop a fall or, more embarrassingly, pulling a tight sports bra over your head.

Cradling a cordless phone on your shoulder has made neck pain the diagnosis du jour

Try this at home Until the pain subsides (that could be several weeks), avoid lifting heavy objects and doing activities that call for raising your arm. But don’t immobilize your shoulder. “Joints need to move to stay healthy,” says Dr. Templeton. **When to see the doctor** If you felt severe pain when you injured your shoulder and it’s very weak, you may have torn a tendon, which could require further rehab or surgery.

Keeping up with your e-mail is (literally) a pain in the neck

Cradling your cordless or mobile on your shoulder while you multitask has made neck pain the diagnosis du jour. But the biggest offender is the computer. “Watch someone at her desktop,” says Doris K. Cope,

M.D., director of the pain-medicine division at the University of Pittsburgh Medical Center. “She’ll be leaning forward, muscles tense, and pulling in her shoulders, which strains the neck.”

Try this at home A new Danish study has found that strength-training exercises with weights can relieve neck pain. What’s more, the effects last even if you stop. You can ask a trainer to show you neck-strengthening moves; if you don’t belong to a gym, consider hiring a trainer for one session (the American Council on Exercise can link you to names of certified trainers at acefitness.org). To prevent neck pain, invest in a headset for your phone. At the computer, position your monitor at eye

level and keep your head centered over your spine. Take breaks to stretch or to do shoulder shrugs.

When to see the doctor If the trouble started after a fall or accident; also, if the pain is sharp or radiating, if an arm or leg seems weak, or if you have tingling or numbness (you may have nerve involvement).

Your heel hurts so much you can’t walk straight

If you’re hobbling out of bed most mornings, you could have plantar fasciitis, an inflammation of the fibrous bands (fascia) along the sole of your foot. While plantar fasciitis is frequently a symptom of “too much exercise, too fast,” says Letha Griffin, M.D., a specialist in sports medicine at the Peachtree Orthopaedic Clinic



Douse the fire: To head off burning pain after a long walk, place feet in icy water (rose petals optional)

in Atlanta, some unlucky people—those with flat feet or low or high arches—are

simply more prone to the disorder. **Try this at home** Wear shoes with inner cushioning and thick sole support whenever possible, and next time you have a zappos.com urge, check your size at a shoe store (it may have changed). After a long walk, head off inflammation by placing your feet in a tub of ice water for 10 minutes, pulling them out every few minutes so you don’t suffer an ice burn.

When to see the doctor If the pain is severe, your M.D. may refer you to an orthopedist or podiatrist; a physical therapist can stretch calf and foot muscles and teach you how to continue therapy at home.

Your knees hurt from sitting (yes, sitting) too long

Call it the Seinfeld theory of injury: straining your knees while doing nothing. Keeping your legs bent at a 90-degree angle for a prolonged period puts pressure on the knee-joint cartilage, which can lead to swelling and pain. You’re more prone to this problem as you hit your 40s, when the cartilage begins to soften.

Try this at home To take pressure off knees, strengthen your thigh muscles (quadriceps) with daily leg lifts: →

Photograph by Susan Prody/Getty Images

Lie on the floor, keeping your knees straight but not locked; raise your right leg as high as you can, then lower slowly. Repeat on left, doing about 10 lifts on each side twice a day. When you're sitting, straighten your knees as often as possible.

When to see the doctor If there's a locking, catching, or "giving way" sensation in the knee, you may have arthritis or torn cartilage. Also make an appointment with your doc if the pain started suddenly after a fall.

Your eBay hours are stratospheric—and now you can hardly hold a cup Surprise: It's the infamous tennis elbow. While the racquet sport is one cause of this burning pain on the outside of your elbow, any repetitive motion, including too many hours checking out vintage glassware online, can also bring it on.

Try this at home Cultivate patience. A Swiss study found that neither forearm-strengthening exercises nor a support band eased the pain of ten-

nis elbow. Only time helped. At the computer, every hour or so spread your fingers out, then gently pull each finger outward. If tennis triggered your problem, once you're ready to hit the court again, take a refresher. "If you don't swing correctly, you'll put stress on tendons and ligaments," says Dr. Cope.

When to see the doctor If you can't straighten or flex your arm, if there's significant swelling around the joint, or if you can't carry even a coffee cup, you may have joint instability, arthritis, or another more serious problem that needs checking.

Yesterday you ran in the company 5K. Today it hurts to walk

If the pain is in the front of your lower legs, you probably have shin splints—the result of an overload on the shinbone and connective tissues. Jumping (the neighborhood volleyball game *seemed* like a fun idea) can also be the culprit.

Try this at home In bed at night, keep the foot of your painful leg (or legs) elevated above your heart. Avoid hard-impact activities until the ache's gone. Then restart slowly. Sue Stanley-Green, director of the athletic-training education program at Florida Southern College in Lakeland, advises a day-on, day-off program. The first time out, alternate five minutes of running and walking; increase running by a minute or two per session. On off days, do strength training with bands or weights.

When to see the doctor Shin splints almost always get better with time (and proper, cushioned footwear). If you're still in pain after six weeks, or the problem recurs when you resume impact activity, your M.D. may send you to a physical therapist. ■

Fast Pain Zappers

Wrap an ice pack (or bag of frozen peas) in a towel, and apply to the tender area as often as necessary, but for no more than 20 minutes at a time.

Take a pain reliever You may want to start with acetaminophen (Tylenol); a review of 65 studies showed that for low-back pain, it's as effective as nonsteroidal anti-inflammatory drugs, such as ibuprofen (Motrin, Advil), but less likely to cause adverse side effects. Stick to doses on labels; if OTC pills aren't helping after three days or if you still need them after 10 days, see your doctor.