



Although medication is not the only treatment option, it is probably the most common - and usually the least expensive. Certainly heat, ice, massage, weight loss, exercise, and physical therapy are useful modalities. They are all worth trying before resorting to a \$3,000 MRI. But for quick relief, what drugs work the best, cost the least, and have the fewest side-effects? Classes of medications that are commonly used to treat back pain include: anti-inflammatory drugs, muscle relaxers, pain medications, and topical treatments.

Of the anti-inflammatory drugs, there's the non-steroidal group (NSAIDs) and the steroidal group. The NSAIDs work well, and can be used chronically or as needed.

The most common side-effect of NSAIDs is stomach irritation. Because of this potential, Celebrex was developed, an NSAID-like cox-2 inhibitor that is less likely to bother the stomach or colon. But it is expensive. Self-pay patients can expect to pay about \$137 for a month's supply of 200 mg, or \$85 for 100 mg at a discount pharmacy. If your income is below \$45,000 and you are not a Medicare patient, you may qualify for the Together Rx Access program for discounted drugs, available online or through your physician. You can also check online for coupons to offset your cost or your co-pay. If you have insurance, this drug is likely to be a 2nd or 3rd tier, requiring a higher co-pay than generic drugs.

But most patients do not have sufficient stomach irritation to warrant the use of Celebrex. If you do have a problem taking anti-inflammatory drugs, a second option is to use a medication to lower your stomach acid (for example, generic Pepcid for \$4), which may allow you to use a \$4 NSAID. Some of these are over-the-counter, but it's important that you consult your doctor with questions of drug interactions and other side-effects.

One list of \$4 generic NSAIDs includes: diclofenac, ibuprofen, naproxen, indomethacin, meloxicam, and piroxicam. Check with your local pharmacy and take their \$4 list with you to your doctor. Over-the-counter NSAIDs include ibuprofen, naproxen, and aspirin. These are lower dose than prescription NSAIDs, but often all a person needs to recover from a strained back.

The Wal-Mart \$4 list also includes prednisone, dexamethasone, and methylprednisolone, three steroids that can be used in an acute situation.

Of the muscle relaxers, baclofen and cyclobenzaprine are quite inexpensive, often under \$5. These are especially useful when your back muscles are tight, or if you cannot sleep. Drowsiness is the most common side-effect. Skelaxin currently comes only as a brand-name, and costs 20 times as much - or more! Currently, Skelaxin offers a printable coupon at the manufacturer's website.

Straight pain medications are also useful. Tylenol (acetaminophen) provides sufficient relief for many people. It can often be used with an NSAID - but consult your doctor first. Excedrin is an example of a single pill that includes both acetaminophen and an anti-inflammatory (aspirin).

The non-narcotic drug tramadol (generic Ultram) is quite inexpensive (on some \$4 lists) and is very effective.

Topical preparations such as the Flector patch or creams such as Voltaren Gel are also effective but expensive. If your doctor prescribes these, check online for a coupon. I've had patients who've found topical creams at the dollar stores that they claim work just as well. If it works for you, go for it.

If none of these choices are effective for you, perhaps you require a short-term narcotic. Any back strain that persists beyond a week or so, especially if it's getting worse, should be evaluated by a physician.

Should you get an MRI? Only if your doctor believes your pain is atypical, or if it's getting worse, or if you can't use your legs properly. An MRI doesn't fix anything. It can show a slipped disc, or spinal stenosis, or cancer, or infections. But for the average Joe or weekend warrior who overdid it moving furniture, no x-rays are generally needed. If your doctor orders a CAT scan [tramadol 100 mg](#) or MRI right off the bat, ask why, and whether a round of conservative therapy might not be appropriate first.

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What is a cortisone shot?

A cortisone shot or a cortisone injection is given to patients to relieve pain mainly caused by joint inflammation. The ankle, hip, shoulder, elbow, knee, wrist and spine joints are the most common areas in the body where patients receive cortisone injections. Outside of the common joints, cortisone shots may rarely be given to the smaller joints in your feet and hands.

An injection of anti-inflammatory medicine into the joint is commonly referred to as a cortisone shot, usually consisting of a mixture of corticosteroid and a local anesthetic. In some more rare circumstances different types of medications may be added to the mixture. The local anesthetic works to relieve pain in the short term, while the corticosteroid reduces the inflammation providing the longer term pain relief. Frequently it is your doctor who will give you the cortisone shot in his office.

Listed below are some side effects and rare complications that may arise from cortisone shots. One of the more frequently asked questions are how often can you receive a cortisone injection? One of the biggest questions debated is what limitations should be placed on cortisone injections. The concerns are raised from repeated cortisone injection exposure that is suspected to further damage and deteriorate joint cartilage. This is the main concern of many doctors and for this reason cortisone injections are usually only given to a patient once every three months per joint. In rare situations more severe forms of arthritis may bend this general rule and these patients receive a cortisone shot once a month.

Another common question often asked is, how painful are cortisone injections? The pain associated with a cortisone injection is dependent on what the mixture of medicinal ingredients is. If you are having the more rare injections to the small joints in your hands or feet, then you are likely going to feel considerably more pain. Larger joints in your body such as the knee or

shoulder will only trigger mild amounts of pain, while injections in other joints through your body will cause moderate amounts of pain.

#### How to Recover From a Cortisone Injection

It is common to feel a little pain and stiffness around the injection site after a cortisone shot. It is best that you continue with your daily routine as this is normal and it will just take a little time for you to start feeling better.

Here are a few activities your doctor may ask you to do in the first few days following your cortisone injection:

Earlier we touched on possibilities of an increase in pain and inflammation. This is commonly referred to cortisone shot flare. The flare in pain will usually lasts for up to forty eight hours, but when it subsides you should start to feel relief from your pain. As in all health concerns, if you have any questions do not hesitate to contact your doctor. Even if there is nothing wrong, confirmation from a professional often puts the mind at ease.