BACKACHE

Dr. Roger A. Schmidt, M.D., California

Backache ranks at the top of the problems of medical diagnosis and constitutes one of the most frequent complaints any physician encounters in his daily practice. The reason for it resides in the structure and function of the back. It would be beyond the scope of this modest presentation to go into details of the anatomy and physiology of the spine and vertebrae supporting the whole trunk through three layers of muscles and fascia1 attached to it in motion or at rest. These muscles supply postural tone which is controlled by the sympathetic nervous system. Should this autonomic function fail for any reason, voluntary contraction of muscles is required to supplement the failing function; this rapidly leads to fatigue, then pain and faulty posture. Of course, for a normal maintenance of the motor system of the back, a normal function of the vertebrae, pelvic bones, joints, tendons, muscles, blood vessels and nerves is required.

The sensory, motor and autonomic nerves of the trunk and extremities and many nerves to the viscera originate and pass through the back. Many abdominal organs are suspended to the back. No wonder back pains may be due to various lesions involving so many organs and structures. Let us review briefly the origin of back pains:

- (a) Pain arising from lesions of the spinal column; trauma,² fractures, dislocations and sprained liagaments, pressure from edema and hemorrhages, spasms, are the expressions of such lesions. Spondylolisthesis occurs mostly in the lumbar spine. Osteoporosis, when advanced, is a frequent cause of back pains in the aged. Osteomyelitis and Pott's disease occur more often in the young. Primary sarcoma³ and more frequently metastatic carcinoma⁴ or multiple myeloma⁵ are a cause of backache only when the tumor formation stretches or irritates the periosteum.
- (b) Pain arising from lesions of the joints of the spine, may be caused by inflammation, like in spondylitis rizomelica,⁶

not rare in teen-agers and young adults, starting with the sacroiliac and gradually ascending. Osteoarthritis⁷ of the spine is another common cause; it is not really an inflammation, but rather a degenerative process. Often low back pain is associated with sciatica and the cause of the pain is a herniated disc⁸ stretching the posterior ligament.

- (c) Pain arising from lesions of the ligaments, fascia and muscles is usually the result of strain or sprain from heavy lifting or pulling in a stooped position. Muscle spasm occurs as a protection to an underlying lesion. Myositiso of the back common in systemic dieases (gonococcal, staphylococcal or virus infection, in trichinosis and diffuse vascular disease, such as periarteritis nodosa10 and angioneurodermatomyositis).11 Fibrositis, 12 myofibrositis, 13 peri-arthritis, involve particularly the neck, interscapular and lumbar regions and constitute the so-called torticollis or lumbago. When the onset is acute, the cure may be rapid and complete, but relapses are frequent. When insidious, it turns out to become a chronic condition, worse in the morning and evening, better in the middle of the day. When the pain orginates from trigger points, it can be relieved sometimes dramatically by an injection of novocainif one misses the homeopathic remedy.
- (d) Lesions of the spinal cord and meninges¹⁴ are important factors of back pain, originating in trauma and infections, and due to reflex spasm (Kering's Lasegue's signs).
- (e) Chronic backache may be caused faulty body mechanisms without localized diseases of the back: hip disease, inequality of lower limbs' length, pes planus, 15 scoliosis, 16 lordosis, 17 obesity, pregnancy, etc.
- (f) Viscerosomatic¹⁸ referred pains of the back have to be elucidated in each case: lesions of the posterior pleura, of the mediastinum—including neoplasms and aortic aneurysms. Gall-bladder diseases, live diseases and right subdiaphragmatic abscess, affect the right shoulder and scapular region. Backache is common in diseases of the gastrointestinal tract in doudenal and pancreatic lesions. Obstructive uropathies most always cause pain in the costovertebral angle. Low backache fre-

quently accompanies diseases of the colon, rectum, prostate and affections of the female pelvic organs.

(g) Finally we must mention the backaches of psychosomatic origin. Psychogenic backache is most difficult to diagnose for lack of pathognomonic signs. Physicians in the Armed Forces are particularly familiar with this type—including the malingerer. . . .

This condensed and by no means exhaustive list of causes of back pains brings out the multiplicity of the factors involved and the necessity for ascertaining them by thorough examination and evaluation, then for determination of prognosis and homoeopathic prescribing.

Let us now consider a few remedies that have given me excellent results, reminding you once more of this constant homoeopathic principle: Prescribe for the patient and all his symptoms, and not for the name of the disease or syndrome.

A pain in the neck is not always easy to prescribe for. Lycopodium is one of the main remedies to be studied for neck or lumbar pain. The pain is mostly on the right side, with head drawn to the left; better by gentle motion. Painful stiffness of the back, better from passing flatus (Ruta), better after urination, worse standing or sitting or rising from a seat, with the usual characteristics of this polychrest: worse from 4—8 p.m., craving for sweets, warm drinks, etc.

Lachnantes, marvellous remedy for torticollis and neck pains of the tuberculinic; head drawn to one side—mostly right, often associated with chilliness, a sore throat and fever.

Niccolum: cracking and wrenching pains in the neck when moving head backward and forward. Pain as if sprained. Pain in the small of the back during a soft stool.

Rhus Tox. may also be indicated for neck pains, but more often for the typical lumbago, starting on the left side, moving to the right, caused by a draft during perspiration (Calc. P) or during cold wet weather, worse beginning of motion, by rest, by pressure and lying on the painful side, worse by everexertion; after midnight. Better by change of position, continued motion (Sep., Puls.), local heat and rubbing (Phos.). Many

lumbagos respond within 24 hours to this remedy when the symptoms agree.

Bryonia—complementary to Rhus Tox.—affects the right side mostly—some times the other—no need to stress its main modalities: worse by motion, stooping, rising up, coughing, deep breathing, becoming hot; warming weather. Better by rest, pressure, lying on the painful side, drawing knees up (Coloc.) and warm applications.

Berberis Vulgaris has many modalities similar to Bryonia. it is a good arthritic remedy full of gout and lithiasis. Stiff and painful back, located in the lumbosacral region the pains are often associated with kidney disturbances, renal colics (mostly right) with local numbness, radiating over the kidney and down the iliac crest to the anterior thighs; worse by motion, jarring, rising from sitting, urinating.

Bellis Perennis—a great traumatic remedy with a genuine ability to dissolve ecchymoses. A preventive of cancer following trauma. Also known as curing the "railway spine" and good for rheumatism, gout, sprain, luxations and traumatic coccygodynia (Hyper., Mez., Sil.) worse on the left side, by touch, better by continued motion.

Hypericum—the socalled Arnica of the nerves—when the spine or nerves have been traumatized (Nat. Sul.) worse by motion, cold, foggy damp weather, jarring. In lumbago, when turning in bed is almost impossible, and the patient has to sit up before turning, think of Nux Vomica (Bry., Zn.). Nux is to be thought if in torticollis caused by cold and drafts, and low backache before and during defecation (Agar). Better by warm applications.

Aesculus is often indicated in backache; lumber, sacral or sacroiliac, and also the neck. Rheumatic, plethoric, venous fullness. Can hardly walk or rise from a seat.

Agaricus has some peculiar back symptoms; stiffness of the whole spine, as if it would break on attempt of bending (Variolinum). Cold spots like ice on back. Pain mostly in neck and lumbosacral region, worse stooping, sitting or exertion.

Pulsatilla should be studied in curvature of the spine. Pains in lumbosacral area, wandering rheumatic, worse by rest, rising

from sitting, better slow motion or walking. Sensation of cold water poured down the back. To be considered for low back pain during menstruation (Am. Carb., Cimic., Nux M., Sul.), from suppressed menses.

Tellurium has cured a severe case of lumbago and sciatica affecting the right side worse from touch and pressure, cough, laughing, pressing at stool and lying on the right side.

Chelidonium: stiffness of the neck (Rhus., T., Lyc.). Pain in region of the right scapula and below, extending to the chest or stomach, worse early morning (4 a.m.) with cold extremities, mostly the hands. Lumbar pains, as if the spine would break when bending forward.

Variolinum will cure some of the worst backaches known. Stiffness of the neck with pain and tenderness. Intolerable aching in lumbar and sacral region, worse by motion. Chills like streams of ice water trickling down the back (Pul.). Incidentally, Burnett considered this remedy as the best in shingles and postherpetic neuralgia.

Two other remedies should be mentioned because of their specific action on the lumbar region:

Kali Carbonica, with its special weakness in this area, its perspiration and chills, its intolerance of cold, its tendency to take colds, its stitching pains, worse between 2-3 a.m., better in warm weather,

Antimonium Tartaricum: lumbago with impotence. The least effort produces cold chills, with contractures. Worse evenings, by cold wet weather, better by keeping the spine sraight.

The severe back or lumbar pains that accompany influenza or intermittent fever, respond quickly to Eupatorium Perfoliatum (Influenzinum).

- 1. Fascia: A sheet of tissue which covers and connects muscle tissues.
- 2. Trauma: Wound or injury.
- 3. Sarcoma: Type of Tumor.
- 4. Metastatic carcinoma: Cancer transferred from a primary site to another organ.
- .5. Myeloma: A type of tumor. (Bone marrow.)

6. Spondylitis: Inflammation of vertebra, (Pott's disease), usually tuberculous.

Spondylitis rhizomelica: Advancing rigidity of spine from below upward (due to antiphlosis).

- 7. Osteoarthritis: •Inflammation of bones or joints.
- 8. Herniated disc: Protrusion of disc from between vertebrae.
- 9. Myositis: Inflammation of the muscles.
- Periarteritis: Inflammation of the external sheath of an artery. Nodosa: Nodular swellings.
- 11. Angioneurodermatomyositis: Infectious inflammation of both skin and muscles involving blood vessels and nerves.
- 12. Fibrositis: Exessive formation of white fibrous tissue which is inflammatory, as in chronic rheumatism.
- 13. Myofibrositis: Increase of inflammatory connective tissue between muscle fibrils.
- 14. Meninges: Membranes covering the brain and spinal cord.
- 15. Pes planus: Flat-foot or splay-foot.
- 16. Scoliosis: Lateral curvature of the spine.
- 17. Lordosis: Forward curvature of the spine.
- 18. Viscerosomatic: Relating to organs enclosed within the great cavities of the body, especially the abdominal cavity.

-The Layman Speaks, May 1958.

THE PROBLEMS OF HOMEOPATHIC PRACTICE ETC.

(Cond. From page 488)

standing the fact that Bengal has the proud privilege of having the oldest Homocopathic State Faculty maintaining its existence since the British days. This attitude of the West Bengal Government must be changed, and homocopaths must be rescued from the inequitable and handicapped position in the field of practice, as well as in the field of employment in the Employees' State Insurance and Rural Health Scheme, etc.