INTRODUCTION AND AIM OF THE WORK

Back pain accounts for 5 - 8% of athletic injuries, although back pain is not the most common injury, it is one of the most challenging for sports physicians to diagnose and treat (Harvey and Tanner, 1991).

Athletes with great demands on the back are subjected to an increased risk of symptomatic damage of the spine (Sward et al., 1990).

Physicians dealing with athletic population must be familiar with various signs and symptoms of back and leg pain and must be able to differentiate between vascular and neurogenic etiology.

(Conner, et al., 1993).

Due to increased interests in physical fitness and to the fact that athletes start their training in younger ages, the risk for injuries to the growing individual has increased, the spine as with the rest of the skeleton is greater risk of injuries during growth, especially during adolescent growth spurt (Sward, 1992).

Typical causes of back pain in athletes include:

- 1- Muscle strain.
- 2- Intervertebral disc injury.
- 3- Interspinus bursitis.
- 4- Spondylolysis.

(Mann et al., 1991)

The key to proper management of lumbar spine problems in athletes include:

- 1- Comprehensive diagnosis.
- 2- Aggressive, effective non-operative cares.
- 3- Pin pointing operation that do as the damage as possible to normal tissue but correct pathologic lesion.

(Watkins and Dilin, 1990).

The aim of this study:

- (I) Determination of the incidence of low back pain in athletes of various sports.
- (II) Identification of the common causes and risk factors of back pain in these athletes.
- (III) Examination and reporting radiological changes in plain X ray occurring in this group of patients.