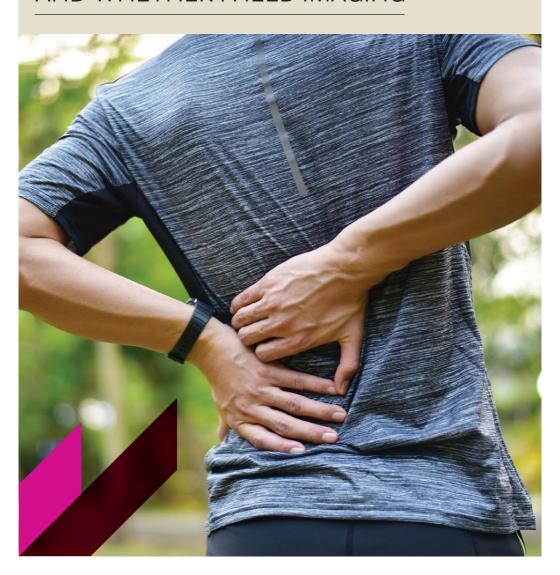


Health Sciences

MACQUARIE University
SYDNEY-AUSTRALIA

Understanding my low back pain

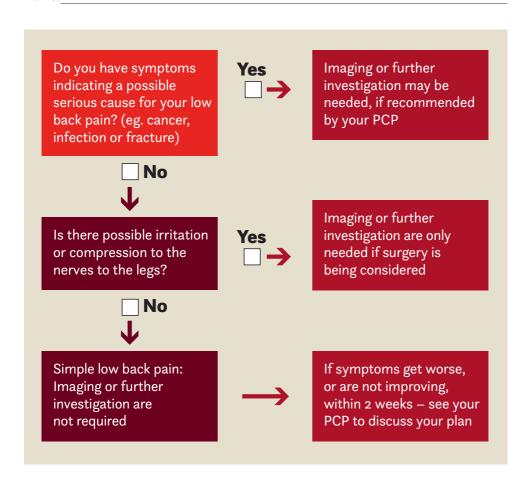
AND WHETHER I NEED IMAGING



Do I need imaging or further investigations?

Imaging or further investigations don't usually help low back pain. Your PCP can show you whether you need further investigations based on the flowchart below:

Name:



All about low back pain

WHAT IS CAUSING MY LOW BACK PAIN?

Common causes of low back pain include minor soft tissue injuries such as muscle spasm or joint sprain.

Less than 1 in 100 people with low back pain have a serious cause for their pain (eg, fracture, cancer, infection or inflammatory arthritis).

These conditions are usually obvious and your PCP will take a clinical history and perform an assessment to 'check' for them.

I HAVE STRONG PAIN - DOESN'T THIS MEAN A BAD INJURY HAS OCCURRED?

No – lots of research shows that strong pain does not equal a bad injury.

Many people experience a lot of pain. This does not mean there is any damage in their back.

Some factors that can change the pain you feel include your mood and stress levels, your sleep quality and your lifestyle and general fitness levels.

HOW COMMON IS SIMPLE LOW BACK PAIN?

It is common and often reoccurs.

Four out of five people will get low back pain at some time in their life. Half of these will go on to get further episodes of back pain throughout their life.

Recurrence is common and does not mean that there is greater reason for concern.

WHAT IS SIMPLE LOW BACK PAIN?

Low back pain, where no indication of a serious cause can be found.

Pain may be mild or very strong, but it typically improves a lot over the first couple of weeks.

There may also be pain into the legs.

As the back gets better, the leg pain usually improves too.

Why isn't imaging needed?

Imaging (eg, x-rays, CTs or MRI scans) doesn't usually **help find the cause of pain.**

The treatment and speed of recovery for most cases of back pain is the same whether imaging is used or not.

WON'T IMAGING SHOW WHAT IS CAUSING MY LOW BACK PAIN?

No - the underlying cause of back pain **cannot** usually be seen on imaging.

Imaging can help diagnose serious causes of low back pain - but, these are very rare and your PCP will check for signs of them.

I KNOW OTHER PEOPLE WHO FOUND 'CHANGES' ON IMAGING OF THEIR BACK – WHAT IF I HAVE THESE 'CHANGES' TOO?

Many 'changes' can be seen on imaging, but it is unknown if they are causing your pain.

Most of the 'changes' seen on imaging are normal and more common the older you get.

Even people **without back pain** commonly have imaging 'changes'. For example, 6 out of 10 middle aged people without back pain have changes on imaging such as disc bulges or degeneration.

WHY SHOULDN'T I GET IMAGING 'JUST IN CASE'?

Unnecessary imaging has some risks:

- Radiation exposure (for x-ray and CT) can increase the risk of cancer.
 Less radiation is better
- It can cost you money and is time consuming
- Changes on imaging are often seen and may cause stress, anxiety and worry, even though they are usually unimportant
- Imaging has been associated with worse patient outcomes and an increase in unnecessary surgery

What can I do to help decrease my low back pain?

The best thing you can do is to **stay as active** as possible.

HOW WILL ACTIVITY HELP MY LOW BACK PAIN?

Activity keeps the back mobile, flexible and strong. **Movement, even if it causes temporary mild pain, is good for your back.**

Research shows that bed rest or prolonged inactivity can delay recovery.

WHAT EXERCISES CAN I DO WHEN I HAVE LOW BACK PAIN?

Any exercise you enjoy can help decrease your pain and get you moving.

Some suggestions include:

- Gentle stretches or exercises (such as Tai Chi or Yoga)
- · Aerobic exercises like walking or swimming

You can also ask your PCP for some safe exercises and stretches if you are unsure.

IS THERE ANYTHING ELSE I CAN DO?

- Try to stay positive and take steps towards a healthier lifestyle.
- When you feel stressed, angry or worried your pain might feel worse. Managing these feelings might help your low back pain.
- Lifestyle factors may also be associated with low back pain. You might find it helpful to address poor sleep patterns and consider changes to diet, alcohol intake and smoking.



MY BACK HURTS - HOW CAN I STAY ACTIVE?

You may need to take things a bit easier for a few days, but you also need to get back into your normal activities as soon as possible.

Normal activities include your regular work, household and recreational activities.

Staying active is safe with simple low back pain – even if there is some pain.

Pain with movement does not mean you are doing any damage to your back.

What is my low back pain management plan?

THE FOLLOWING SUGGESTIONS MAY HELP REDUCE YOUR PAIN AND INCREASE YOUR RECOVERY:

- Take it easy for the first day or two after the pain starts if needed, then start
 getting back into your normal daily activities as soon as possible.
- · Try to avoid staying in one position for a prolonged time.
- Try some gentle exercise such as walking, swimming or stretching.

POSSIBLE PAIN-RELIEF STRATEGIES RECOMMENDED BY YOUR PCP:

Pain-relief medications: Heat Referral to a physiotherapist / chiropractor / osteopath / other OTHER SUGGESTIONS FROM YOUR PCP (EG. SPECIFIC EXERCISES, STRESS RELIEF, SLEEP STRATEGIES, ETC.)

What should I do next?

☐ Please come back in	for a review
Please come back if your pain is not improving after	weeks
As long as your pain is improving you do not need to return for a review	

WHEN SHOULD I RETURN FOR FURTHER MEDICAL ADVICE?

Occasionally low back pain does not improve or symptoms may change.

CONTACT YOUR HEALTH CARE PRACTITIONER IF YOU HAVE ANY OF THE FOLLOWING SYMPTOMS:

- Difficulty passing or controlling urine or stool
- 2 Numbness around your back passage or genitals or in both legs
- 3 Unsteadiness on your feet
- 4 Pain which gets worse rather than better over several weeks
- Feeling generally unwell with your low back pain (for example: fever or unexplained weight loss)





ACKNOWLEDGEMENTS

The following information sources were used in the development of this booklet:

- Burton K, Klaber Moffett J, Main C, Roland M, Waddell G, The Back Book 2nd Edition (2002), The Stationary Office, England
- · National Health and Medical Research Council: Acute Low Back Pain
- · Orthopaedic Spinal Services, SA Health: Advice for Managing Low Back Pain
- · Orthopaedic Spinal Services, SA Health: Scans and Low Back Pain
- · NPS MedicineWise: Back Pain Choices



CRICOS Provider 00002J 35-1026, 09/22