

WHY DOES MY BACK HURT AND WHAT ABOUT THE FUTURE?

Understanding why your back hurts is key to managing your pain. People with back pain often have many questions about the cause of their back pain and what to expect for their future. These questions are often informed and reinforced by societal beliefs, friends and health care professionals. The latest research shows us that many things we believe about back pain are not supported by evidence. Below are some of the common questions that people with chronic low back pain asked us about their back pain. Our responses are based on the latest research evidence.

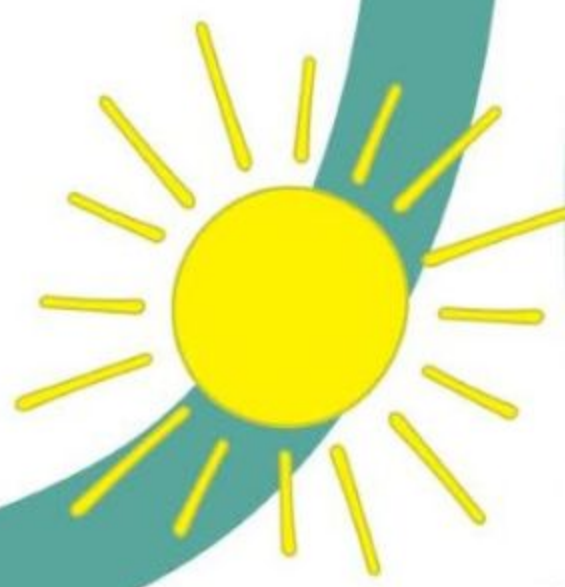


Do I need a scan to find the cause of my back pain?

Scans are important in people that present signs of serious pathology such as cancer, infection, fracture, or nerve compression. However, this accounts for only 5% of people with back pain. For around 95% of people with back pain, scans can't tell us about how much pain you're feeling or how pain is impacting on your life, now or in the future. They also don't tell us what treatment you require.

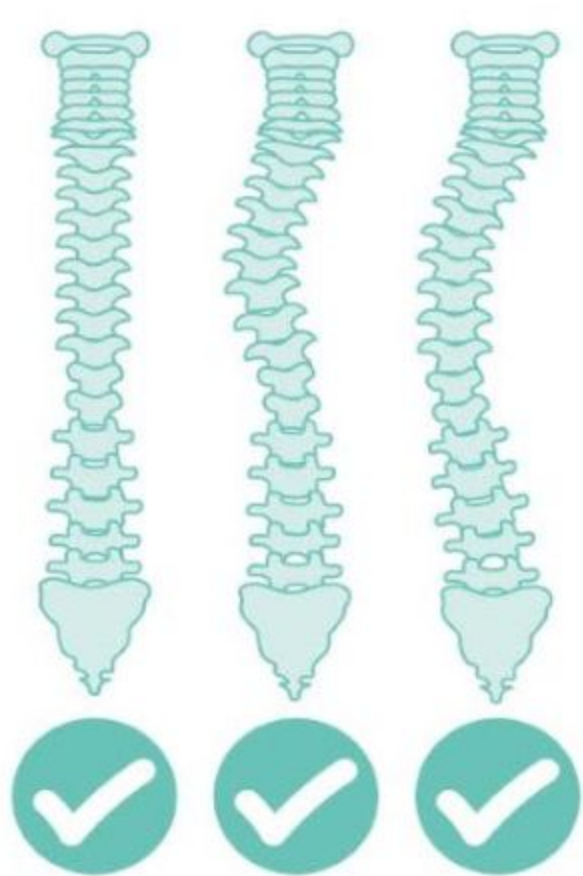
Why does my back hurt?

While back pain can be severe, distressing and debilitating, most people with back pain (95%) have no finding of tissue damage on a scan that can be attributable to their pain. A person's back pain experience can be influenced by many factors such as: previous pain experiences or stress events, levels of sleep, fatigue, physical activity, stress, muscle tension, pain-related fear, worry, mood, and pain beliefs. Importantly the factors are unique for each person. These things act as a volume dial on the nervous system, influencing how sensitive the back structures are to touch, move, and load.



Does the finding of disc degeneration, disc bulges and arthritis on my scan mean my back is damaged and I need to protect it?

While findings such as disc degeneration, disc bulges and arthritis on a scan sound scary and important, they are commonly observed in people without back pain including in top athletes who use and load their backs all the time. For example, at the age of 20 years, 37% of people without low back pain have disc degeneration, 30% have disc bulges and 29% disc protrusions. These findings increase with age and do not predict a person's future likelihood of developing disabling low back pain. So, in many cases these findings are not relevant and should not be a cause of concern.



Does the finding on a scan of scoliosis and curvature of the spine mean I will be more susceptible to back pain?

Our spines come in all shapes and sizes. There is strong evidence that even large scoliosis or curvature of the spine does not increase the likelihood of back pain.



If there is nothing on my scan, does it mean the pain is in my head?

Back pain is 100% real and felt in the back. When nothing shows on the scan this means that the cause of your back pain is not related to identifiable tissue damage or pathology. This doesn't mean the pain is in your head. This is like having a severe headache without damaging the head. There are lots of structures in the low back (muscles, ligaments, joints, and discs) that can become very pain sensitive to movement and loading without being damaged. The sensitivity of these structures are influenced by many factors. These include both physical factors (such as muscle tension and over protection of the back, inactivity or over-activity) and non-physical factors (such as poor sleep, low mood, and pain-related fear). Together these things can result in sensitivity of the spines structures. The good thing is that many of these factors can improve with the right treatment.



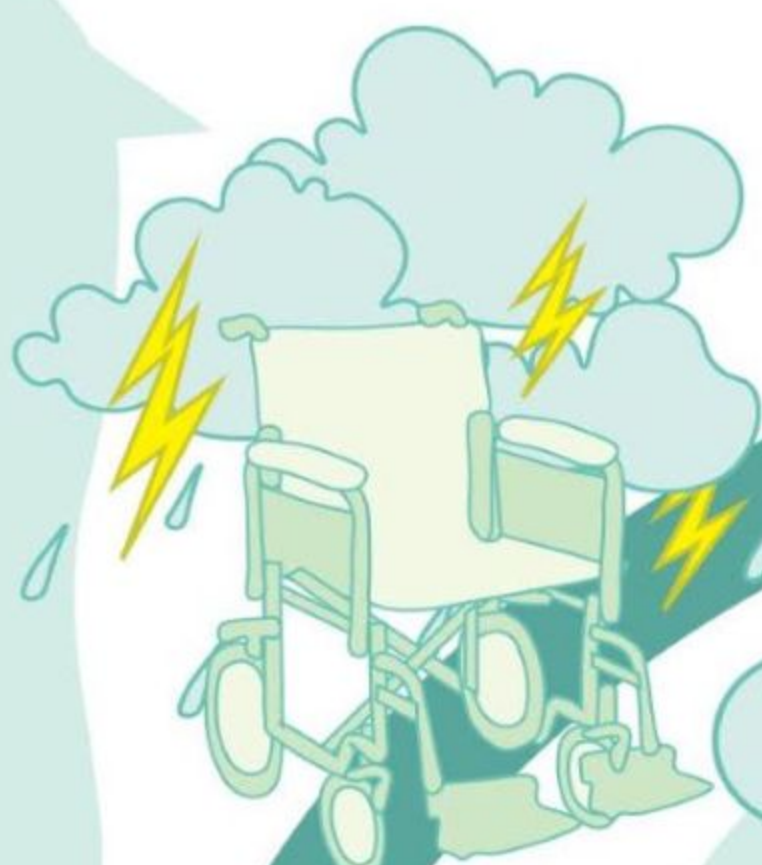
When I get back pain and stiffen it does it mean my back is out of place?

There is strong evidence that backs never go out of place. They are very strong and to damage the back (such as a fracture) requires huge force such as a falling off a ladder or a road traffic accident.



Will my back pain get worse with age, and is there a chance that I will end up in a wheelchair?

Although there is a widely held belief in society that getting older causes or worsens back pain, research supports that evidence-based treatments can help at any age. People with back pain do not end up in a wheelchair. While findings on scans such as disc degeneration and arthritis increase with age (nearly everyone over 60 years of age without low back pain has them), they do not predict a person's level of pain or activity limitation.



Are back pain 'flare-ups' a sign of injury and tissue damage?

Back pain flare-ups often occur and they can be very painful. It is important to know that while they can be frightening, they are usually not related to tissue damage, and they usually settle within a week. Instead, they are often a reflection of a ramp up in the sensitivity of the tissues in your spine. The most frequent triggers for back pain flare-ups are physical factors like muscle tension, inactivity, or unaccustomed activity, or other things such as feeling stressed, low mood, and poor sleep. So, if you have a pain flare-up, it is important to try to stay calm, relaxed, belly breath, and try to keep moving and active for speedy recovery. While this seems counter-intuitive, it is much more helpful than tensing up, avoiding movement, and over-protecting the back as if it was injured.



If my back pain is persistent and severe, will it ever get better?

When a person's back pain becomes persistent (lasting more than 3 months) and they have had lots of recovery. There is strong evidence that even if back pain is severe and has persisted for many years, that the right treatment can significantly reduce pain, disability and improve a person's quality of life. The journey to recovery is different for each person and may take some months with the right care.



Why has my back pain not gotten better?

There is strong evidence that the important predictors of pain persistence are things such as post-traumatic stress, pain anxiety and fear, depressed mood and over protecting the body through muscle tension and avoidance of movement and activity. These emotional factors together can disrupt the normal pain processes in the nervous system driving muscle tension affecting the way we control our body and the sensitivity of our back structures.