A Patients Guide To Back Pain

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A Patient’s Guide to Back Pain

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Rotation 7, March/February 2018
Problem Identification and Description of Need

- Over 75 percent of the US population will have an episode of lower back pain (LBP) during their life
- Many events will develop into chronic pain lasting more than 3 months
- Recurrences within a year happen in up to 40 percent of cases
- Recurrences within a lifetime occur in up to 85 percent of cases
- As few as 16 percent of patients with LBP will see a physical therapist
- As many as 29 percent will be prescribed narcotics
- Few patients try exercise for LBP and many even restrict their movements out of fear for further injury
Public Health Costs

- LBP is the second most common cause of disability in the US
- Annual work days lost to LBP are estimated at 149 million
- Total costs of LBP including lost wages and productivity is estimated at 100-200 billion USD annually
- Early physical therapy can show a decrease of costs up to 60 percent
Community Perspectives

- From a social worker helping patients with long term narcotics use:
  
  “These patients hurt their backs and then just use pills to temporarily mask the pain. They don’t try to fix the underlying problem, so it just keeps hurting or stops for awhile then happens again. That’s how they get started taking these opiates for years at a time.”

- From a construction worker struggling with long term narcotics use:
  
  “I guess I started with Oxy’s after I tweaked my back at work. I can’t really afford to take time off, so I just use them to help me get through my day. I’m always afraid that something I’m going to do is going to make it worse.”
Intervention

- Intervention involves creation of a handout for patients experiencing an episode of LBP
- The handout stresses the importance of back care besides medications use
- It includes at home exercises, recommendations for physical therapy, and a list and contact information for physical therapists associated with CVMC
Managing Lower Back Pain

Stay Active!

Although it can seem counterintuitive, one of the simplest, best things you can do for your back is moving your back.

Prolonged bed rest has been shown to actually worsen back pain and may cause it to take longer to heal.

Staying active will help to relieve muscle spasms and prevent losing muscle strength.

If your pain is severe, temporary bed rest may be necessary, but rarely is this advised for more than a day.

Physical Therapy and Regular Exercise Can Promote Healing and Reduce Recurrence

If your back pain is severe or has lasted more than a few weeks, your doctor may refer you to a physical therapist.

Physical therapists will work with you to create a formal exercise program to address your specific needs. They may also supervise your sessions or help create plans for you to do at home.

We have many great physical therapists right here in central Vermont!

At home exercises

You should use exercises that increase your flexibility and strengthen the muscles that support your back.

Avoid exercises that include bending and twisting the back, as well as anything that is very painful.

Many people find that pool activities allow for more movement and less back strain.

Pain Medications

Remember that pain medications only mask the pain, they do not address the underlying problem.

Only using pain medications without taking other steps will often lead to longer and more frequent episodes of pain.

Non-steroidal anti-inflammatory drugs (NSAIDs) such as Aspirin and naproxen are often helpful when taken on a regular basis for 3 to 5 days.
Evaluation of Effectiveness and Limitations

- Effectiveness will be measured by analyzing changes in patients' exercise compliance, physical therapy follow ups, and LBP recurrence after receiving the pamphlet.
- The pamphlet is limited by being non-interactive. It is also written at a 7th-8th grade level while trying to keep the quantity of information as succinct as possible. These factors necessitate that much potentially useful information is left out.
- It is also limited by the nature of pamphlets requiring that patients take the time and energy to engage with the information which is not always achievable.
Recommendations for Future Projects

- A survey could be administered to patients to determine their understanding of LBP management options.
- LBP can frequently have a psychosocial component; this aspect could be assessed so as to further engage the social work resources available at Berlin Family Medicine for these patients.
References


