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Low Back Pain in Family Practice

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Low Back Pain in Family Practice

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PRECEPTOR: DR. LINDSEY WILHELM

PLATTSBURGH, NY

Problem Identification

- ▶ Low back pain is the leading cause of years lived with disability¹
- ▶ Second most common reason for visiting a physician¹
- ▶ Chronic low back pain affects up to 23% of people in the world²
- ▶ 80-85% of people affected over their lifetime¹
 - ▶ One year recurrence from 24-80%²
- ▶ Over 30% of people do not recover within 6 months³
- ▶ For most patients a definitive cause is never identified²

Public Health Cost

- ▶ Healthcare expenditure estimated to be up to \$91 billion per year⁴
 - ▶ Only heart disease results in higher healthcare expenditure
- ▶ Including loss of productivity and work costs are estimated to be up to \$635 billion per year⁴
- ▶ 1-2% of all adults in the US are disabled due to low back pain⁵
- ▶ People with low back pain are more likely to smoke, be depressed, have sleep disturbances, and a variety of other comorbidities⁶
- ▶ Patients with chronic low back pain make more healthcare visits⁶

Community Perspective

- ▶ “In my work [as a Physical Therapist] about 50% of my patients of have back pain. It can be anyone young or old.” – local physical therapist
- ▶ “So many people that I see really push for MRI looking for slipped disk, but the pain doesn’t correlate with the scans they get. If you look at most elderly people they’ll have a herniated disk but those don’t all cause pain. Most people get back pain from things that don’t need a scan but that we can help them with.” – local physical therapist
- ▶ “Lots of people have poor body mechanics and posture. Just the way they stand can make their back issues worse. It’s one of the most important things we can help people work on and it’s something they can easily work on outside of their PT sessions” – physical therapist

Intervention and Methodology

- ▶ Create patient information trifold pamphlet
- ▶ Pamphlet strives to improve understanding of:
 - ▶ Causes
 - ▶ Treatment
 - ▶ Prevention of recurrence
- ▶ Manage patient expectations for imaging, pain management
- ▶ Prime patient for what the physician may do or tell them



How is Back Pain Treated?

If your back pain requires treatment, the pain may be initially treated with a non-steroidal anti-inflammatory drug (NSAID) like ibuprofen or alternatively acetaminophen. Sometimes muscle relaxants or other pain reducing medications are used when appropriate.

Narcotic or opioid pain medications are avoided for long term pain control. They do not control long term pain better than NSAIDs and they have significant side effects, and are highly addictive.

In many cases, you may be referred to physical therapy. Physical therapy can help reduce your pain and also prevent it from coming back in the future. Physical therapists have many tools to help people with back pain.

How do I avoid having my Back Pain return?

Stay Active!

Staying active is one of the best things you can do for your back.

Too much rest can actually slow down healing. Staying active helps keep your back muscles strong. This will help healing and decrease your pain.

A stronger back is less likely to get re-injured or to start hurting again.

Physical Therapy

Physical therapy is key for helping your back to heal and to stay strong in the long run.

Physical therapists have a variety of tools and techniques to help your muscles and joints to get stronger, more flexible and healthier.

You may be given home exercises to do by your therapist. Making sure you do these is one of the most important things you can do for your future back health.



LOW BACK PAIN

Patient information

Results/ Response Patient Focused Pamphlet

- ▶ An educational pamphlet was created and presented to the residents and attendings
- ▶ The response from providers was positive
- ▶ It was acknowledged that it filled a gap in patient education resources in the office

What Causes Back Pain?

Most commonly back pain is caused by a **Muscle strain or sprain.**

- Muscle injuries are most common after trauma or from frequent use such as heavy lifting.
- Muscle pain is relieved by rest.
- Your back may be tender and hard to move due to tight and painful muscles.

Other less common causes include:

Spondylosis

- Age related wear and tear including arthritis.
- Pain is worse with activities and may impact your hips.

Disk Herniation

- Disks are cushions between the spinal bones.
- Sometimes they can bulge out and push on a nerve.
- The pain may go down your legs.
- You may also feel numbness or tingling.

Who Gets Back Pain?

Low back pain is one of the most common conditions today.

In fact, up to 85% of people get low back pain at some point during their lifetime.

“In my work [as a Physical Therapist] about 50% of my patients of have back pain. It can be anyone young or old.”



How is Back Pain Evaluated

Your doctor will ask you about your back pain and will want to know about: any injury/trauma, timing, location, pain in other areas,

Make sure to tell your doctor if:

- You have had any bowel or bladder issues
- Numbness especially in your inner thighs or groin,
- Weakness in your legs

Imaging

In most cases your doctor will not need to have you get an X-ray or MRI. In most cases they do not help find out why you have pain.

If your symptoms have been present for more than 6 weeks, have continued to get worse or are severe your doctor may order and X-ray and sometimes an MRI.

Results/ Response Patient Focused Pamphlet

- ▶ The pamphlet was designed to be very accessible
- ▶ Patient focused language with limited jargon was used
- ▶ Simple layout improves accessibility

Evaluation of Effectiveness and Limitations

- ▶ Evaluation
 - ▶ Provide information to patients after being roomed but prior to seeing their physician
 - ▶ Assess whether it impacted – patient understanding of back pain, patient expectations, treatment compliance (attending PT) – via survey
- ▶ Limitations
 - ▶ Providing a pamphlet requires patients read and engage with the material
 - ▶ Information is limited and will not apply to all patients

Recommendations for Future Projects

- ▶ Evaluate different types of patient education
 - ▶ Different forms of media
 - ▶ Different focus – more detailed about either the cause, treatment, or chronic management rather than one pamphlet that addresses all of these topics superficially
- ▶ Evaluate if patient education helps mitigate the psychosocial factors that commonly contribute to chronic LBP
- ▶ Study whether providing patients with information affects their decision to go to a doctor for their pain

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