

What **You**
Should **Know**
About

Chronic

Low Back Pain

What should I do?

Facts about chronic low back pain:

- “chronic” means the pain has lasted for more than 3 months
- The longer you have had the pain, the less likely it can be cured or will go away completely
- Emotional distress and depression can be caused by low back pain and make pain harder to deal with
- People with chronic low back pain can improve their daily functioning and overall quality of life
- The most effective course of action is a combination of self management approaches in addition to care from health care providers

How do I know that my doctor hasn't missed something that can be cured?

- General practitioners and physiotherapists are trained to identify both serious and curable causes of low back pain
- Whilst it is possible that a curable cause of your low back pain has been overlooked, that is less and less likely as time passes

Who is qualified to help me?

- Your general practitioner and physiotherapist, are trained to evaluate and treat people with chronic back pain. If necessary you may be referred to a pain clinic

Do I need x-rays, an MRI or laboratory tests?

- Most people with chronic low back pain do not need these tests
- Your doctor will order tests only to clarify specific diagnoses

- Improve your pain and wellbeing by focusing on improving your day to day functioning. Stay active and exercise. Use pain coping skills, relaxation and stress management to moderate your pain
- Get involved in rehabilitation, multi- disciplinary pain programmes, self management programme and a support group
- Consider water based exercise or a yoga class with an instructor trained to help people with back problems or join a walking group or gym
- Take Paracetamol or anti inflammatory such as Ibuprofen medication regularly for the pain. Your doctor can prescribed other medication as needed

What can I do and what can be done for me?

- There is no treatment that helps everyone. Most people benefit from using several approaches
- Research has shown that the following self management approaches can help:
 - Stay active and exercise
 - Learn and use pain coping skills, relaxation and stress management
 - Participate in active rehabilitation and multi-disciplinary pain programmes
- The following treatments have been studied and shown to help:
 - Acupuncture
 - Massage may be helpful if combined with activity and exercise
 - A personalised exercise and active rehabilitation programme designed by a physiotherapist
- These medications can be helpful:
 - Paracetamol and anti-inflammatory medication, (Ibuprofen, Naproxen), Codeine, Dihydrocodeine
 - Low dose tricyclic antidepressants (Amitriptyline)
 - Narcotic medication for severe pain under close medical supervision