

## CHRONIC LOW BACK PAIN

For people with long standing, disabling back pain, complete alleviation of their problems is unlikely. The aim is to enable them to self manage their problems, minimise pain and maximise function. This is often **NOT** what people want to hear. Helping patients accept this, cope with it and live a better life with **SOME** pain is a challenge. People may have deeply held inappropriate health beliefs that need to be identified and addressed

### ACKNOWLEDGE THAT BACK PAIN IS NOT JUST A MECHANICAL PROBLEM

Empathetic exploration of psychological and social factors (relationships, work) can be helpful in understanding what might be contributing to people's problems but can be misconstrued as dismissing their problems as "all in the mind". A sensitive explanation of how anxiety, depression, attitudes and activity can act as a "volume control" amplifying or moderating pain, is often extremely helpful and frequently something patients recognise in themselves

### RISKS FOR DEVELOPING AND/OR MAINTAINING LONG TERM PAIN AND DISABILITY

- Belief that pain and activity are harmful
- "Sickness behaviours" like extended rest
- Low or negative moods, social withdrawal
- Treatment that does not fit best practice (e.g. extended bed rest, opiate use)
- Problems with claims and compensation
- History of back pain, time off, other claims
- Problems at work, poor job satisfaction
- Heavy work, unsociable hours
- Overprotective family or lack of support

### TOO LITTLE ACTIVITY OR TOO MUCH?

Most people avoid activity that causes pain in the belief that they cause harm (fear avoidance). Whilst this is understandable it leads to less and less activity and more and more disability and dependence resulting in muscle weakness that causes more joint damage and pain. Other people do too much at once to get it over and done with or spend long periods in a poor working environment and with bad posture. Advising "rest-activity cycling" (interspersing bouts of exercise and activity with short rests) and suggesting ways that people can protect their back in the home/work environment provides control and avoids exacerbating their pain.

### SUPPORT RETURN TO ACTIVITY AND EXERCISE

People with long standing pain and failed management are often highly resistant to the notion that exercise and activity are beneficial. Exercise is very beneficial for people with chronic pain, even those who don't think it will help them. Exercise frequently involves some initial discomfort and many people need support, reassurance and encouragement at this stage. Advice about changing lifestyle and behaviour to include participation in regular exercise and physical activity needs to be given clearly, convincingly, consistently and repeatedly if people are to accept it. This is more appropriate than the traditional advice to "let pain be your guide"

### WHAT EXERCISES TO DO AND HOW TO DO THEM

To be effective exercises must be performed long term. Patients are less likely to exercise if advice is inconsistent. Advice about the benefits of activity should be clearly and frequently enforced. It is important that people find something that is enjoyable, affordable and accessible in a friendly environment. Swimming, gentle aerobics and yoga are all suitable. Home regimens can also be effective, although greater motivation is required to attain and sustain benefit.