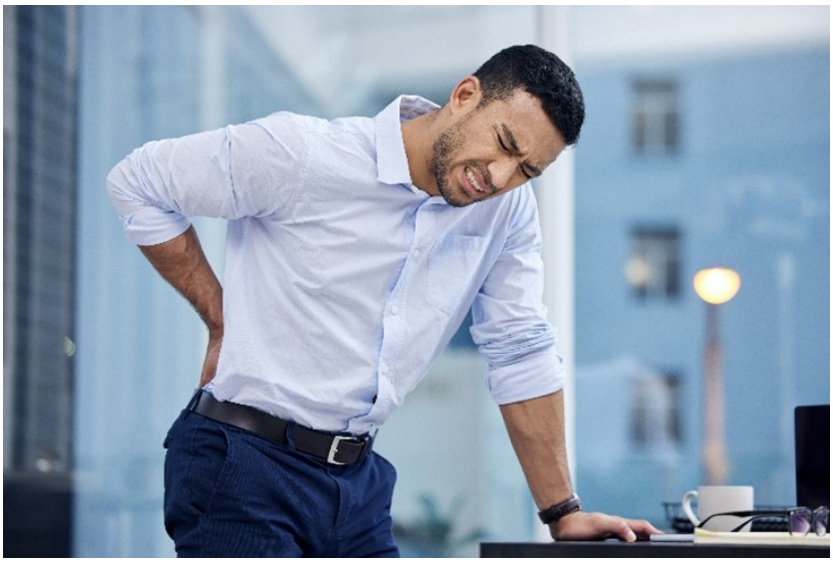
Chronic Low Back Pain

Low back pain is (LBP) is the most common musculoskeletal problem in society and leading cause of years lived with disability. 80% of people will experience back pain in their lifetime, with up to 30% of those people progressing to chronic low back pain lasting more than 3 months.

Most acute LBP episodes improve after a month, but in a section of the population, pain persists past normal healing times, often without obvious structural cause. It's associated with massive costs to the individual and the community both financially and in quality of life of those affected.

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Chronic low back pain encapsulates both the physical characteristics with social and psychological factors that can contribute to ongoing pain. This is often described as the biopsychosocial approach to pain and is one of the greatest challenges facing the healthcare system.

Risk factors include:

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- More common in women.
- Age – risk increases from 30 up to 60 years old.
- Higher pain intensity at the onset of injury.
- Functional limitation or disability.
- Physical work or difficult working positions.
- Obesity.
- Depression and anxiety.
- Previous history of low back pain.

Diagnosis

Chronic low back pain is diagnosed by a comprehensive history and physical assessment by your physio. This considers possible physical, social, psychological and emotional factors that may contribute to the pain process as well as charting the pattern and characteristics of the pain which gives clues as to whether it follows a clear mechanical pattern or is more random.

A battery of tests around strength, mobility, reflexes, sensation, and movement patterns is conducted to develop a story around the person's low back pain. Imaging such as CT scan and MRI are often used but should only be considered when the changes seen fit with the clinical assessment and symptoms as there is often a poor correlation between changes seen on imaging and symptoms experienced.

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Management

Management of chronic low back pain is a multimodal approach based on the assessment findings, addressing both physical and psychological contributors. Common management strategies include:

- Education of the causes and management of chronic low back pain, including advice to remain active and on other lifestyle factors (e.g. sleep patterns, smoking, diet).
- Activity modification and pacing strategies to help control pain and flare-ups.
- A graded exercise program that targets improving function and reducing functional impairments. The type of exercise will be dependent on individual needs, preferences and capabilities.
- Psychological therapies such as cognitive behavioural therapy (CBT) and mindfulness-based stress reduction can be important parts of the management team when first-line treatment has not been effective.
- Manual therapies such as massage, spinal mobilisations or dry needling may be used for short-term relief.
- Occasionally options such as cortisone injections or other pharmacological options will be explored with the medical team.

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If you are experiencing chronic low back pain symptoms, book now with one of the experienced physiotherapists at In Balance Physiotherapy and Pilates.

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