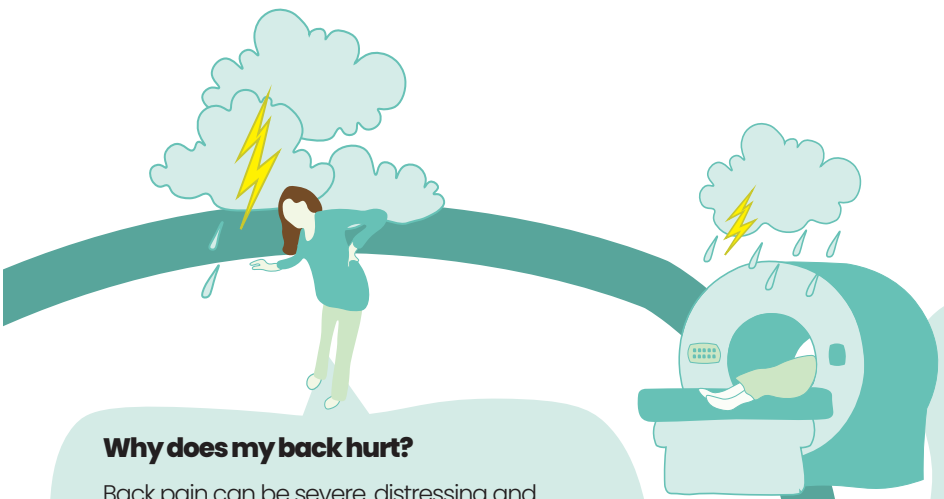
WHY DOES MY BACK HURT AND WHAT ABOUT THE FUTURE?

Understanding why your back hurts is key to managing your pain. Below are some of the common questions that people with chronic low back pain asked us about their back pain. Our responses are based on the latest research evidence.



Why does my back hurt?

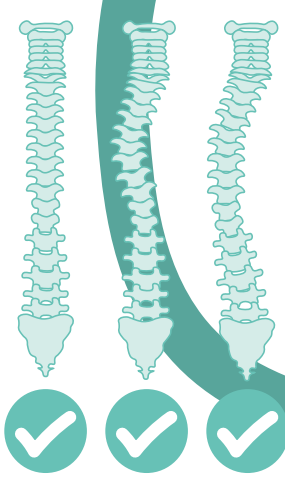
Back pain can be severe, distressing and debilitating. Surprisingly, most people with back pain (95%) have no finding of tissue damage on a scan that can be can be found to cause their pain. Sometimes pain can begin with an awkward, repeated or sudden loading event, while at other times it can arise for no apparent reason.
A person's back pain experience can be influenced by many factors such as: poor sleep, inactivity, over-activity, muscle tension, fatigue, carrying excess body fat around the belly, stress, low mood, worry and our beliefs about the pain. Importantly the factors are unique for each person. These things act as a volume dial on the nervous system influencing how sensitive the back structures are to touch, movement and load.

Do I need a scan to find the cause of my back pain?

Scans are important in people who present with signs of serious pathology such as cancer, infection, fracture or nerve compression. However, this accounts for only 1-5% of people with back pain. For around 95% of people with back pain, scans cannot tell us about how much pain you are feeling or how pain is impacting on your life, now or in the future. They also do not tell us what treatment you require.

Does the finding of disc degeneration, disc bulges and arthritis on my scan mean my back is damaged and I need to protect it?

Findings such as disc degeneration, disc bulges and arthritis on a scan sound scary and important. However, they are commonly found in people without back pain including in top athletes who use and load their backs all the time. For example, at the age of 20 years, 37% of people without low back pain have disc degeneration, 30% have disc bulges and 29% have disc protrusions. These findings increase with age and do not predict a person's future likelihood of developing disabling low back pain. So, in many cases these findings are normal and not the cause of the pain.



Does the finding on a scan of scoliosis and curvature of the spine mean I will be more susceptible to back pain?

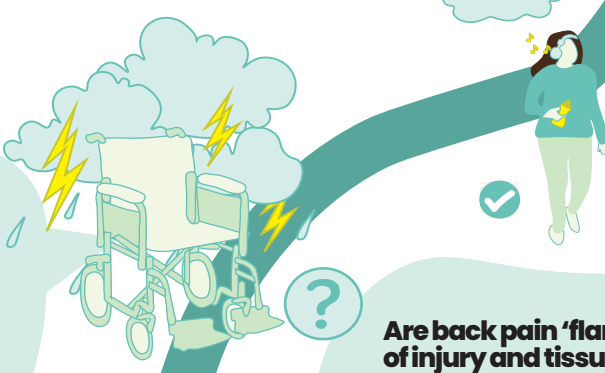
Our spines come in all shapes and sizes. There is strong evidence that even large scoliosis or curvature of the spine does not increase the likelihood of back pain.

If there is nothing on my scan, does it mean the pain is in my head?

Back pain is 100% real and felt in the back. When the cause of back pain doesn't show on the scan, this does not mean the pain is in your head. This is like having a severe headache without damaging the head. There are lots of structures in the low back (e.g. muscles, ligaments, joints, nerves and discs) that can become very pain sensitive to movement and loading without being damaged. The sensitivity of these structures is influenced by many factors. These include both physical factors (such as muscle tension and over-protection of the back, inactivity or over-activity) and non-physical factors (such as poor sleep, stress, low mood and pain-related fear). Together these things can result in sensitivity of the spines structures. Importantly, these factors can improve with the right treatment.

When I get back pain and it stiffens does it mean my back is out of place?

Backs don't go out of place, unless you have a severe trauma. They are very strong and to damage the back (such as a fracture) requires huge force such as falling off a ladder or a road traffic accident.



Will my back pain get worse with age, and is there a chance that I will end up in a wheel chair?

While there is a common belief that getting older causes or worsens back pain, back pain be effectively managed at any age. People do not end up in a wheelchair because of their back pain. While findings on scans such as disc degeneration and arthritis increase with age (nearly everyone over 60 years of age without low back pain has them), they do not predict a person's level of pain or activity limitation.

Are back pain 'flare-ups' a sign of injury and tissue damage?

Back pain flare-ups are common and they can be very painful, scary and distressing. In the absence of a traumatic injury, they are usually not related to tissue damage. Instead, they often reflect sensitivity of the tissues in your spine related to factors like muscle tension, inactivity or unaccustomed activity, or feeling stressed, low mood and poor sleep. Importantly, most flare-ups will largely settle within a week with the right care. Trying to stay calm, relaxed (e.g. belly breathe) and try to keep moving and active speeds recovery. In contrast, tensing up, avoiding movement and over-protecting the back as if it was injured delays recovery.

If my back pain is persistent and severe, will it ever get better?

When a person's back pain becomes persistent (lasting more than 3 months) and they have had lots of treatment, it is common they can lose hope for recovery. Even if back pain is severe and has persisted for many years, the right treatment can significantly reduce pain, disability and improve a person's quality of life. The journey to recovery is different for each person and may take some months with the right care.

Why is my back pain not better?

There are many reasons why back pain doesn't get better. This can relate to things such as: over-protecting the body through muscle tension and avoidance of movement and activity, poor sleep, high levels of stress, pain related worry and fear and depressed mood. These factors result in changes to the nervous system, resulting in increasing the sensitivity of our back structures, and tension in our muscles affecting the way we control our body and move. This can also be promoted or reinforced by interactions with health care providers.

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