

Persistent Low Back Pain A guide to understanding Persistent Low Back Pain

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Persistent Low Back Pain

A guide to understanding
Persistent Low Back Pain





Contents

About this guide	4
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Section 01: Understanding persistent low back pain

What is low back pain?	6
What is persistent low back pain?	6
What is sciatica?	6
Common facts about persistent low back pain	7
Risk factors for persistent low back pain	8
Sitting posture and persistent low back pain	9
Lifting and persistent low back pain	9
Why is my persistent low back pain getting worse?	10

Section 02: Managing persistent low back pain

Moving forward with persistent low back pain	13
Treatments available for persistent low back pain	16
Useful resources for persistent low back pain	19


Appendices

01. Back Exercises	22
02. Exercise Log	24
03. Medications for Low Back Pain	26


About this guide

Lots of people suffer with low back pain. We hope this guide gives you a better understanding of why low back pain is so common and what factors lead to the persistence of low back pain. It will also give you the best evidence information on how to manage your low back pain to improve your overall quality of life.


Key Messages




Back Pain is common and generally not due to serious injury




Keeping active & taking regular exercise from the outset is really important




Persistent back pain can be scary but don't worry, it should improve



Surgery is rarely needed for back pain



Back pain often gets worse due to fear, anxiety and lack of movement



If your symptoms are not improving, seek help but don't worry



SECTION

1

**Understanding
persistent low back pain**



What is low back pain?

Low back pain is pain in the area between your ribs and your pelvis. The pain can also spread to one or both legs. However the pain is centred more in your back than in your leg.

What is persistent low back pain?

Persistent low back pain is low back pain that persists or lasts for longer than 12 weeks. Though the pain may be lasting longer than you would have hoped, there is rarely a serious cause of the pain.

What is sciatica?

Sciatica is a condition which originates in your low back but the pain is centred in your leg rather than your back.

Sciatica is caused by irritation of a nerve which travels from your lower back to your leg. People with sciatica usually describe pain in a specific pattern in one or both legs. You can also have back pain with sciatica but the leg pain will be worse than the back pain. Sciatic leg pain can be associated with pins and needles and/or numbness in the leg/s. Sciatic leg pain can be severe when it develops. The good news is most episodes of sciatica get better without requiring any specific treatment. Most people report a significant improvement in their leg pain severity within 6-8 weeks.

The information provided in this booklet is more related to people who suffer with persistent low back pain rather than Acute sciatica (leg pain).

Simple facts about persistent low back pain



1 Back pain is common

Most people will have back pain at some point in their lives. It is most common between the ages of 40 and 65. Back pain affects women more than men. Don't worry, the good news is for most people back pain becomes less problematic as you get older.

2 Back pain can recur

Don't be surprised if back pain recurs at times.

3 Persistent low back pain is rarely due to serious pathology

The good news is for most people, back pain, no matter how severe is rarely due to any serious disease. It can start for no obvious reason or from a minor strain.

4 Don't take back pain lying down

There is very strong evidence that keeping active and gradually returning to all usual activities is important in aiding recovery.

5 Scans are rarely needed

Scans such as MRIs or CTs are generally not helpful in the early days and do not change your management. Many findings on MRI scans are present in people without back pain. Your GP can advise you as to whether a scan is indicated for your persistent low back pain.

6 Persistent back pain can be scary but don't worry

'Do not worry' – most back pain is treatable and once you understand it and know how to help it, it becomes less of a problem in your life.

7 Exercise is good for back pain – 'Hurt Does Not Mean Harm'

It is ok to move – often you are afraid to move and exercise as you are fearful of making the problem worse but often the less you move, the worse the problem gets.

8 Do not fear bending and lifting

Your back is stronger than you think and designed to lift and bend. In the same way that a person can get a sore knee after doing unaccustomed activity, people can get back pain when they lift something awkwardly or something that they are not used to.

Risk factors for persistent low back pain

Sedentary lifestyle

If your work and lifestyle are very sedentary e.g. office-based work, driving for a living and you are not doing regular exercise outside your work, you are more at risk of developing back pain.



Lack of physical exercise:

There is strong evidence that people who do not take regular exercise are more at risk of persistent back pain.



Poor health status

Having poorer health e.g. diabetes, heart or respiratory problems, depression etc. may limit your ability to exercise and heighten your risk of persistent back pain.



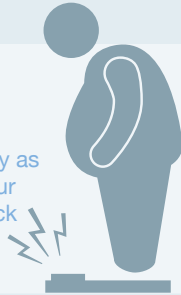
Low mood, stress, anxiety

There is evidence that pre-existing anxiety, low mood, being tired and run down, low energy, recent illness can put you at greater risk of developing persistent back pain and impact on your ability to cope and deal with your back pain.



Excess weight

If you are overweight and deconditioned, particularly as you reach middle age, your risk of developing low back pain may be greater.



Family history

There is some evidence that persistent back pain can run in families.



Smoking

There is evidence that people who smoke are more at risk of developing back pain.



Poor sleep

When you are in pain, getting good quality sleep can be difficult. In the same way that poor sleep can make you more stressed, give you a headache, make you tired or feel down, it can also cause or prolong back pain.



Sitting Posture and persistent low back pain



Does my posture cause low back pain?

No specific posture has been shown to prevent or reduce back pain. Different sitting postures suit different people. Changing posture regularly is the best thing you can do to help your back.

Lifting and persistent low back pain



Is lifting safe for my low back pain?

People with low back pain often believe that activities such as lifting, bending and twisting are harmful and should be avoided. However there is no clear link between any of these factors and back pain.



While a lifting or bending incident could initially contribute to a person's back pain, bending and lifting are normal activities and should be practised to help strengthen the back. The principle is similar to that of returning to running and sport after an injury – one needs to train to regain fitness. Seek advice from a chartered physiotherapist.

Why is my persistent low back pain not getting better?

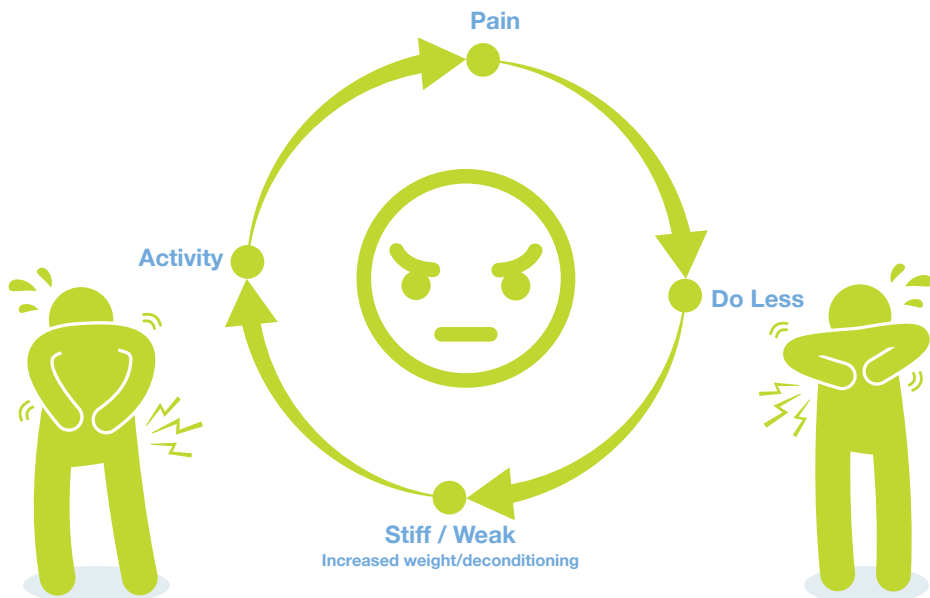
Factors as outlined in previous pages can lead to the persistence of low back pain. In addition the deconditioning that occurs when you have back pain for a long time can lead to persistence.

Persistent low back pain and physical health

It can be common with persistent back pain to reduce your activity levels and stop exercising as it hurts to move. In addition, a fear of making the back pain worse can result in doing less rather than more. Initially this can be helpful but if continued long-term over a series of weeks and months, it leads to increased stiffness and deconditioning of your back.

This is called the vicious cycle of inactivity - the less you do, the less you are able to do. Ultimately avoiding activity and movement over a long-term period may lead to the persistence of your back symptoms. It is important to move and exercise.

Vicious Cycle of Inactivity



'IF YOU DON'T USE IT, YOU LOSE IT'

Persistent low back pain and emotional health

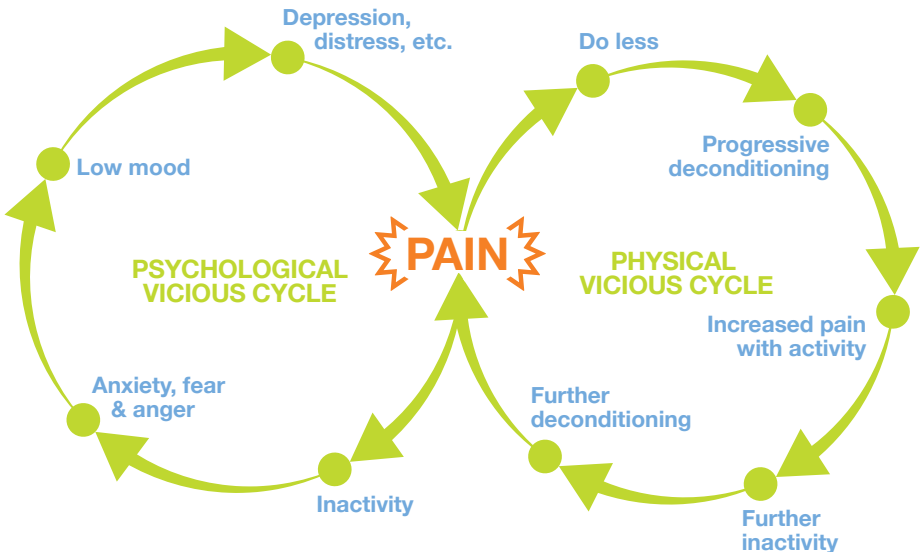
For some people, persistent back pain can not only lead to physical deconditioning but also emotional deconditioning.

If your back pain limits your ability to work, socialise, participate in family events and maintain your normal lifestyle, it naturally can lead to feelings of low mood, worry, anxiety and stress. For example, not being able to work can lead to financial worries, inability to do things with your children can lead to feelings of guilt. Dealing with health professionals and medical clinics can be stressful and often can lead to increased anxiety around the problem. Not understanding the nature of the problem and why it is persisting can be worrying. Persistent pain can make you irritable with family and friends.

If your life is limited by your back pain on a long-term basis, it can affect your confidence, relationships and the way you feel about yourself. Social factors including difficult relationships at work or home, low job satisfaction, stressful life events like a death or illness can all lead to the persistence of low back pain.

The evidence shows that negative feelings/emotions can amplify your feelings of pain, result in you doing less and lead to the persistence of your symptoms.

Vicious Cycle of physical & emotional deconditioning





SECTION

2

**Moving forward
with persistent low back pain**

What can I do?

The good news is there are lots of things you can do to help your back.



Try to maintain your usual activities as much as possible. Spending long periods of time lying down or resting can slow down recovery. When returning to your activities, start gradually and do not worry if it is uncomfortable to start with. You do not have to wait until the pain is gone before returning to normal activity or work.



During times of flare-up, when your pain is severe, you may require medication. As your flare-up settles you can reduce your medication. Talk to your GP or pharmacist who will advise you as to what medication is best for you and how to use it. Appendix 1 includes some information about medications which may be prescribed for low back pain.





03: Can exercise help?

Exercise is one of the best treatments for low back pain. Regular exercise reduces the risk of developing future episodes of back pain.

- Cardiovascular exercise such as walking, swimming, cycling are all suitable for your back. Back specific exercise like yoga and pilates can also help.
- No one form of exercise is better than another: choose a form that you enjoy and are likely to stick with.
- International guidelines recommend 30 minutes of moderate intensity exercise 5 days per week or 10,000 steps per day. Moderate intensity exercise is where you get slightly breathless e.g. brisk walking. When you have back pain, start with a small amount of exercise and overtime gradually build up as your low back pain allows.



- It can be normal to experience pain and discomfort when you start to exercise but don't worry: you are not making the problem worse. Like any unaccustomed activity, there may be an element of soreness when you resume activity - this is normal.
- Sometimes it can be difficult to keep motivated: having an exercise buddy, using an activity monitor or an exercise app, or adding a social element to your exercise plan may help keep you motivated.
- Consult a chartered physiotherapist for further direction with respect to exercise and your low back pain.





04: Are there any back exercises I can do to help my back?

At the back of this manual, there are some simple back stretches you can do to maintain the flexibility and mobility of your spine. Also included is an exercise log (Appendix 1 & 2). For additional guidance on back specific exercises, consult a chartered physiotherapist.



05: What else can I do to help myself?

If stress, low mood, anxiety are contributing to your persistent low back pain, addressing these factors is really beneficial. It can be helpful to look at your overall health to help you to recover from back pain. Getting enough sleep, being active, taking care of your weight, giving up smoking, reducing work and life stress, are all important in helping you manage your persistent back pain.



Management options for persistent low back pain

If treatment is required for your persistent low back pain, the health professionals who will be most involved in your care will be your GP and a Chartered Physiotherapist.

Most low back pain improves and gets better with physiotherapy. If routine physiotherapy does not help, more intensive rehabilitation which addresses both your physical and emotional well being may be considered.



What will a Chartered Physiotherapist do?

A Chartered Physiotherapist will:

- Perform a detailed assessment taking a history of your symptoms and a physical examination.
- Plan a treatment programme with you to suit your needs.
- Give advice on return to work, sport, daily activities and minimising the risk of recurrence of your low back pain.



Specific evidence based treatments may include:

- Education to improve your understanding and allow you move forward with your back pain
- Exercise therapy including strengthening, stretching and conditioning programmes - this may be done individually or in a group setting.
- Manual therapy - mobilisation/ manipulation of the spine may be performed by a chartered physiotherapist.
- Cognitive behavioural therapy or other forms of psychological support can be provided to address negative feelings, anxiety or low mood which may be associated with your low back pain and help improve your overall emotional well being





What will a pain specialist do?

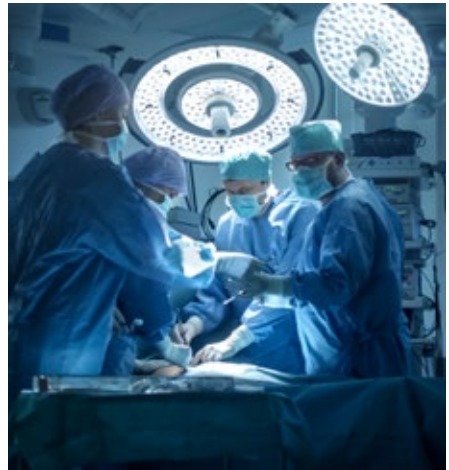
A small percentage of people with low back pain require referral to a Pain Specialist. A consultant pain specialist will review your medication. In addition, they may consider more targeted treatments such as injections, epidurals or a multidisciplinary pain management programme. A multidisciplinary pain management programme is delivered in specialised centres by a team of health professionals including a doctor, nurse, psychologist, chartered physiotherapist and occupational therapist who work closely with you to assist with your rehabilitation. There are a small number of pain management programmes in Ireland at present.



Will an operation fix my low back pain?

It is rare to need surgery for persistent back pain. The most common reason for back surgery is persistent severe sciatica (leg pain) that has not responded to non-surgical treatment.

Discuss management options including surgery with your GP or Chartered Physiotherapist.





Useful resources for persistent low back pain

Understanding Pain in less than 5 minutes and what to do about it !

https://www.youtube.com/watch?v=C_3phB93rvI

Low Back Pain - Dr. Mike Evans

<https://www.youtube.com/watch?v=BOjTegn9RuY&t=6s>

10 Facts every person should know about back pain

<https://www.youtube.com/watch?v=Hif5Cxikdmo>

All you ever wanted to know about low back pain. Dr. Mary O’Keeffe

<https://www.rte.ie/brainstorm/2018/0130/937071-all-you-ever-wanted-to-know-about-back-pain/>

10 Sciatica Facts

<https://www.southtees.nhs.uk/resources/10-sciatica-facts/>



Appendices

APPENDIX 1:

Exercise Programme

The following pages include a selection of specific back stretches which you can do independently at home. For a more tailored exercise programme contact a chartered Physiotherapist.



A back exercise programme should consist of flexibility, strengthening and aerobic exercise.

Flexibility Exercises

Flexibility exercises aim to improve the movement of your back.

Strengthening Exercises

Strengthening exercises aim to improve the strength of the back muscles.

Aerobic Exercise

For example, walking, swimming, cycling are important to improve your overall fitness and help your back pain.



Get into a habit of logging your activity levels in your *exercise diary* at the back of this manual. The exercise diary acts as a good motivation tool and allows you to review your activity levels over time.

BACK EXERCISES

Knee to Chest Stretch

Gently pull both knees to your chest

HOLD
10
seconds

REPEAT
x2

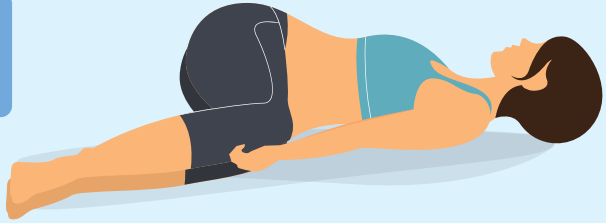


Trunk Rotation Stretch

Gently roll your knees to floor with opposite arm out stretched.

HOLD
10
seconds

REPEAT
x2
each side



Angry Cat Stretch

Arch and Hollow low back towards ceiling.

REPEAT
x5



Press Up

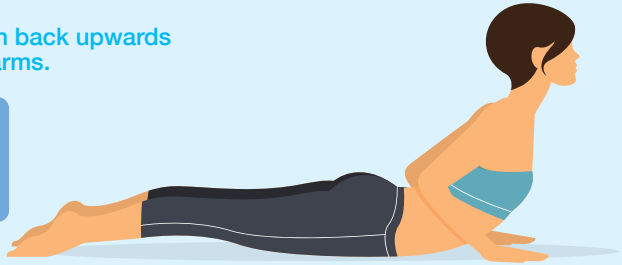
Lying on stomach. Arch back upwards towards ceiling using arms.

HOLD

10
seconds

REPEAT

x3



Mid Back Stretch

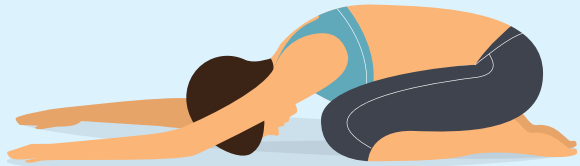
Sit on heels. Stretch your arms along mat, aiming to get as low as possible, keeping bum on heels.

HOLD

30
seconds

REPEAT

x1



Hip Stretch

Get into position as shown in picture. Feel the stretch in the front of the left hip region.

HOLD

30
seconds

REPEAT

x1
each side



APPENDIX 2: EXERCISE DIARY

Back Exercises

(Min 4 times/week)

Physical Exercise

e.g. Walking, Cycling, Swimming, Gym etc.
GOAL: 150 mins/ week, Moderate Intensity
10,000 steps/day

WEEK 1

MON		
TUES		
WED		
THURS		
FRI		
SAT		
SUN		

WEEK 2

MON		
TUES		
WED		
THURS		
FRI		
SAT		
SUN		

WEEK 3

MON		
TUES		
WED		
THURS		
FRI		
SAT		
SUN		

Back Exercises

(Min 4 times/week)

Physical Exercise

e.g. Walking, Cycling, Swimming, Gym etc.
GOAL: 150 mins/ week, Moderate Intensity
10,000 steps/day

WEEK 4

MON

TUES

WED

THURS

FRI

SAT

SUN

WEEK 5

MON

TUES

WED

THURS

FRI

SAT

SUN

WEEK 6

MON

TUES

WED

THURS

FRI

SAT

SUN

APPENDIX 3:

Medications often prescribed for low back pain

Medication Type	Function	Evidence of effectiveness in LBP	Notes
Paracetamol	Reduces pain	Good quality studies have shown that it does not relieve back pain better than a placebo (pretend) treatment when used on its own.	
Non-Steroidal anti-inflammatory drug (NSAID)	Reduce inflammation	Good quality studies have shown that NSAIDs help reduce long-term back pain and short-term back pain (pain less than 6 weeks) however the effect is small.	Can sometimes cause stomach pain so should be used with another medicine.
Anticonvulsants	Used to treat nerve pain	Recent study found that it is no more effective than a placebo (pretend) in patients with back pain and sciatica but causes more side effects.	Clear diagnosis of nerve pain (in the leg) is important before a trial because of potential side effects.
Muscle relaxants	Relieve muscle spasms and tightness	Effective in reducing short-term back pain (Back pain that lasts less than 6 week) and long-term back pain.	Treatment should be limited to short periods (for example 2 to 4 weeks) due to the risk of side effects.
Opioids	Relieve Pain (Used for moderate to severe pain and only if other medications have not worked)	Short term use can help to relieve chronic (long-term) low back pain better than a placebo (pretend).	Taking opioids for longer than 1 month may make pain worse and there are risks of other serious side effects and dependence (addiction).





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