

Managing back pain

Practical tools and techniques
to help you lead a fulfilling life

Important Information

This information booklet has been compiled by TAL Life Limited ABN 70 050 109 450 (TAL) in consultation with:

- Kellie Jansen (Musculoskeletal Physiotherapist at Bend & Mend Physiotherapy
www.bendandmend.com.au)
- The Positivity Institute (thepositivityinstitute.com.au) and
- Jen-Kui Maxwell (Accredited Practising Dietitian)

for the information of TAL's customers.

The health and medical information provided in this booklet is general information only and is not a substitute for advice from a qualified medical or other health professional. This booklet is not intended to diagnose, treat, cure or prevent any health problem. Always consult your general practitioner or medical specialist before changing your diet, starting an exercise program, or taking medication or supplements of any kind.

While all care has been taken to ensure that the information provided in this booklet is accurate and complete, neither TAL nor its employees accept liability for any loss or damage caused as a result of reliance on the information provided.

The information in this booklet is current as at 1 June 2017.

© Copyright 2017 TAL Life Limited



Introduction

Back pain affects up to 25% of the Australian population on any one day and is one of the most common health conditions in Australia. It can happen at any age and can last just a few days or many years¹.

There are many different treatment options that claim to help back pain with some being more effective than others. The most important thing to do when you experience back pain is to keep moving.

If your back pain is severe, does not get better, or shows signs of worsening, you should seek out the help of your doctor or physiotherapist.

UNDERSTANDING BACK PAIN

Page 2

RECOVERING FROM BACK PAIN

Page 7

TREATMENT OPTIONS FOR BACK PAIN

Page 18

WHERE TO FIND MORE INFORMATION AND SUPPORT

Page 21

Understanding back pain

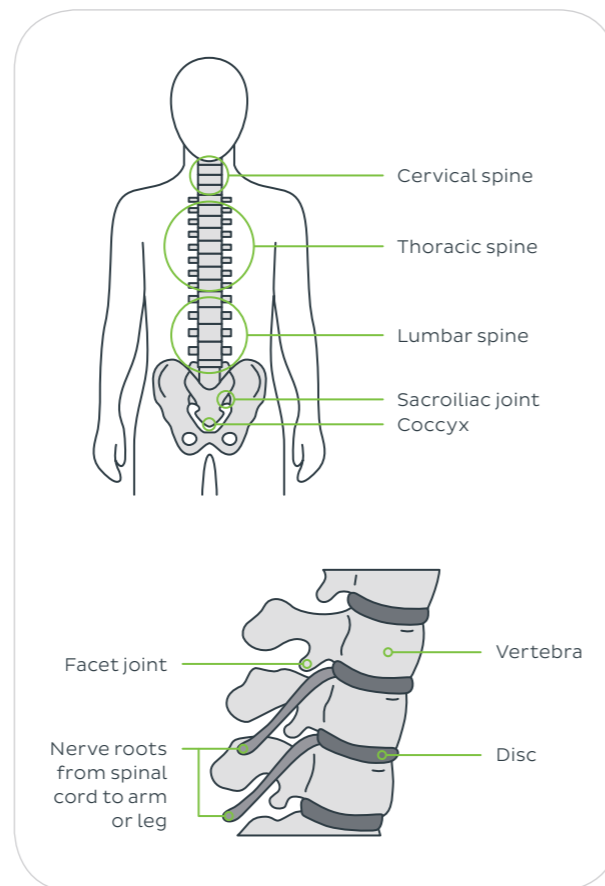
The spine is one of the strongest parts of the body. The way it is put together is designed for movement.

The back is built around the bones of the spinal column which consists of 33 bones (vertebrae) sitting one on top of another. The spine sits on the pelvis and is topped by the skull. The bones of the spine are connected by discs at the front and facet joints at the back. The discs help to absorb loads on the spine and, with the facet joints, give the spinal column its flexibility.

Back pain is very common, with most of us likely to experience at least one bout in our lifetime. Your back problem may cause hot, burning, shooting or stabbing pains in your back and sometimes into one or both of your legs. You may also get pins and needles which can be due to nerve irritation.

Resting for more than a couple of days after back pain starts to hurt is not advised as your back is designed for movement. The sooner you get back to your normal activities the sooner you will recover from a bout of back pain. It is best to keep active and continue going to work even though some things that you do will be painful; moving gently will not damage your back.

Your doctor will be able to discuss your pain with you and may prescribe pain relief medication in the early days to ease the discomfort and help you to start to move. Although back pain is very distressing, in most cases it is not due to any serious disease or damage. X-rays and scans are not recommended for the majority of people with back pain.



BACK MYTH: RETURNING TO WORK WHILST RECOVERING FROM BACK PAIN IS BAD

Active work has a positive impact on your physical and mental wellbeing. Research has shown that long-term work absence, work disability and unemployment are harmful to physical and mental health and wellbeing².

BACK FACT: LOWER BACK PAIN IS EXTREMELY COMMON, BEING THE THIRD MOST COMMON HEALTH COMPLAINT SEEN BY AUSTRALIAN DOCTORS¹



BACK PAIN IS SOMETIMES REFERRED TO AS...

Non-specific back pain: this is the type of back pain that most people will have at some point in their life. It is called 'non-specific' because it is usually not clear what is actually causing the pain. In other words, there is no specific problem or disease that can be identified as to the cause of the pain.

Signs to look out for

The following symptoms are very rare, but if you suddenly develop any of them, you should seek medical advice straight away.

- Severe pain in the back, buttocks, perineum, genitalia, thighs and/or legs
- Loss of sensation, pins and needles or weakness in one or both legs
- Saddle numbness or tingling (change in sensation in the body areas that sit on a saddle: buttocks, anus and genitals, e.g. inability to feel toilet paper when wiping)
- Recent onset of bladder dysfunction (inability to urinate, difficulty initiating urination, loss of sensation when you pass urine, incontinence, loss of the full bladder sensation)
- Recent onset of bowel dysfunction (bowel incontinence, constipation, loss of sensation when passing a bowel motion)
- Recent loss of sexual function (inability to achieve erection or ejaculate, loss of sensation during intercourse).



If you are experiencing any of these symptoms, seek immediate medical advice

Understanding back pain

What risk factors can cause back pain?

There are many risk factors that can contribute to the onset of back pain – some which you cannot change, but many of them you can.

Risk factors you cannot change

Age

As you get older, your risk of back pain increases. There is a general consensus that the prevalence of back pain increases with age³.

Family history

There is some evidence that certain types of spinal disorders have a genetic component. For example, genetics has been identified as an important risk factor in degenerative disc disease⁴.

Diseases

Some types of arthritis and cancer can contribute to back pain.

Risk factors you can change

Excess weight

Being overweight increases stress on the lower back, as well as other joints (e.g. knees) and is a risk factor for certain types of back pain symptoms. People with a BMI >27.6 may be at greater risk of back pain⁵.

Smoking

People who smoke are more likely to develop back pain than those who don't smoke⁶.

Sedentary lifestyle

Lack of regular exercise increases risks for occurrence of back pain, and increases the likely severity of the pain.

Occupational hazards

Any job that requires repetitive bending and lifting has a high incidence of back injury (e.g. construction worker, nurse). Jobs that require long hours of standing without a break (e.g. barber) or sitting in a chair (e.g. software developer) that does not support the back well also puts the person at greater risk⁷.

Poor posture

Any type of prolonged poor posture will, over time, substantially increase the risk of developing back pain. Examples include slouching over a computer keyboard, driving hunched over the steering wheel and lifting incorrectly.

Stress

Stress and other emotional factors are believed to play a major role in lower back pain, particularly chronic low back pain⁸.

TIPS FOR IMPROVING POSTURE



Don't slouch

Slouching doesn't necessarily cause discomfort, but over time this position can place strain on muscles and soft tissues. This strain may increase tension in the muscles, which may in turn cause pain.



Stand with your weight evenly distributed on both legs

Leaning more on one side whilst standing can place excessive pressure on one side of your lower back and hip that could lead to pain.



Prevent 'text neck'

Hunching over a keyboard or prolonged use of a mobile can contribute to you developing a rounded upper back, which can cause shoulder and upper back stiffness.



WARNING SIGNS: POSTURE

Any type of prolonged poor posture will, over time, substantially increase the risk of developing musculoskeletal pain.

Examples include slouching over a computer keyboard, driving hunched over the steering wheel and lifting improperly.



BACK TIP: SAFE LIFTING

Learning and following the correct method for lifting can help prevent injury and avoid back pain. For further advice on correct lifting techniques, please contact your state or territory work health and safety authority.

What are the symptoms of back pain?

Back pain can be felt as a sharp pain, ache or spasm and can be felt in the middle of the back or on either side. Your back may feel stiff, making it difficult to turn or bend in certain directions.



BACK FACT

The muscles, ligaments, discs or bones in your back could all be the source of back pain. Fortunately, conditions like arthritis, cancer or infection are rare causes of back pain⁹.

BACK MYTH

The discs in your back can be painful if damaged but the term “slipped disc” is not an accurate description of what occurs. Discs may “bulge,” “herniate” or “degenerate” but they do not “slip.”

BACK HINT

People sometimes use the word “sciatica” to describe pain in the leg that originates from the lower back. This can occur when the sciatic nerve, which runs from the back all the way down the leg to the foot, becomes irritated. Sciatica can be effectively treated.

Your back pain may come on suddenly or gradually, and the pain may be very bad or relatively mild. Back pain can make your day-to-day life difficult and impact your ability to get dressed, move around, or sleep.

Most people have pain only in their back but some people have pain down one leg as well. It could be in your groin, buttock, or thigh, or run right down to your foot and is caused by a nerve becoming irritated or, in some cases, compressed. If this happens you should see your doctor or physiotherapist.

Your doctor or physiotherapist may not be able to tell you exactly what is causing the pain as it could be attributed to many things, such as:

- Strained muscles or ligaments in your back. Bad posture, for example, sitting or standing in a way that puts pressure on the muscles and joints around your spine
- Wear and tear on the bones in your spine (the vertebrae and facet joints). This is more likely to happen as you get older
- Damage to a disc (e.g. disc prolapse/herniation, annular tear, disc degeneration) is not a common cause of back pain.

It can be worrying not knowing exactly what is wrong but the good news is that research shows you do not need to know the exact cause of the pain to be able to deal with it successfully. It is rare for back pain to be caused by a serious medical problem⁹.

If you have back pain for a short time there's usually no need to have an X-ray or scan as it's not likely to show anything useful. However, if your doctor thinks your back pain might be caused by something more serious like a badly trapped nerve, an infection, or a fracture, you might need to have an X-ray, CT scan or an MRI scan. Also, you should always get medical help straight away if you feel numbness or tingling in your bottom, lose control over when you go to the toilet, are unable to walk, or notice that your foot is 'dropping' or dragging when you walk. These are signs of a more serious problem.

Recovering from back pain

Most back pain lasts less than two weeks and subsides without the need for specific medical treatment, and about 9 in 10 people feel better within six weeks¹⁰.

Many people who have had a bout of back pain get another bout in the future. You can talk to your doctor or physiotherapist about ways to lower your chance of future back pain.

Staying Active

Your back is designed for movement so the sooner you get back to your normal activities the sooner you will recover from a bout of back pain. It is best to keep gently active and continue going to work. Though some things that you do will feel painful, moving gently will not damage your back.

Pain can feel worse if your back stiffens up; try to continue moving as normally as you can within the limits of your pain.

You might feel better if you change positions more often and avoid the one position for too long. For example, alternate regularly between walking, sitting and standing. If travelling for long periods, try to plan your journey so that you can change position frequently.

Additionally, it is useful to prioritise your daily tasks for a few days and leave those that might aggravate your pain such as vacuuming and lawn mowing.

The health benefits of work

Good work improves general health and wellbeing and reduces psychological distress. Even health problems that are frequently attributed to work – for example, back pain and mild to moderate mental health conditions – have been shown to benefit from activity based rehabilitation and an early return to good work².

Being at work:

- Is generally good for mental and physical health, and wellbeing
- Can help in your recovery from injury or illness
- Keeps us busy and challenges us to develop ourselves
- Gives us a sense of pride, identity and personal achievement
- Enables us to socialise, build contacts and find support.



TIPS FOR DRIVING WITH BACK PAIN

- Know how long to allow before the pain begins, so you can take regular breaks.
- Move around and do back stretches in your breaks.
- Ensure your seat is adjusted so it is comfortable for you.

Regular exercise

Research has shown that people who do regular exercise recover quicker and are less likely to develop chronic back pain¹¹.

If your back pain lasts a while, lack of movement can cause the muscles to become weak. This makes it more likely that you'll strain them in future.

Exercise is the most important way that you can:

- Ease stiffness and pain
- Build up muscle strength and stamina
- Improve your flexibility and general fitness.

The type of exercise you should do will vary depending upon on your level of fitness. Consult your doctor or physiotherapist before starting any exercise program.

There is no perfect type of exercise for low back pain. It's better that you do a type of exercise you enjoy and are likely to stick to. This could include:



Walking provides low-impact regular movement for the joints and muscles, and can help ease back pain



Swimming takes the strain off joints and muscles while working out the entire body



Yoga improves balance and increases flexibility



Pilates strengthens core muscles and the spinal column and promotes good posture



Exercise programs provide a cardiovascular workout and all over body conditioning, including the back and core muscles



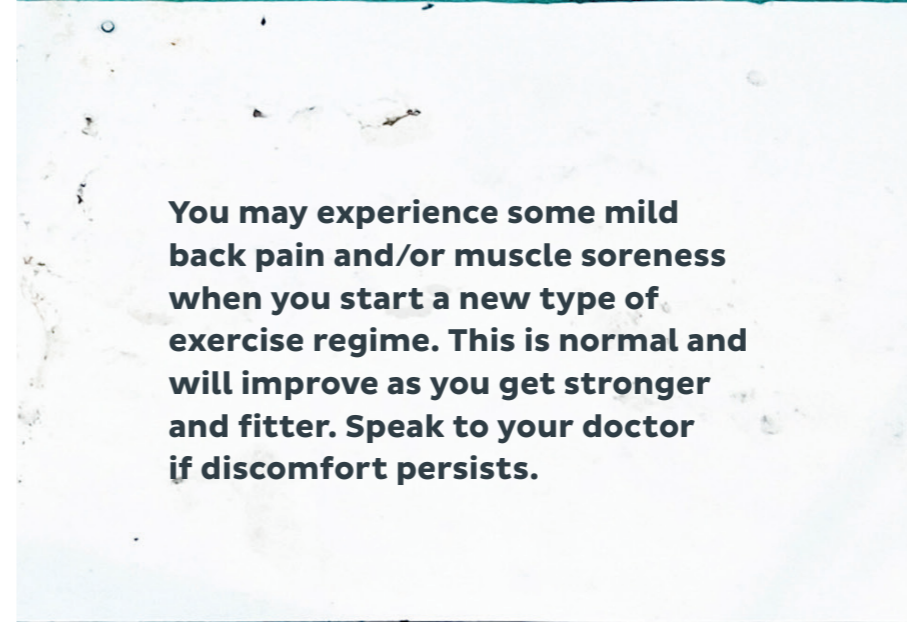
BACK TIP: DON'T STAND ALL THE TIME

Using a standing desk is a good idea if you work in an office and usually sit most of the time. However, it is not a good idea to stand all day. It is best to alternate between sitting and standing positions if you can.

Rest from activities that aggravate your back pain

Activities such as heavy lifting, prolonged sitting, and sometimes twisting can aggravate back pain when it is acute (within the first 6 weeks) so are best avoided early on. For example; long trips in the car and long flights.

Some simple lifestyle changes can help minimise the effect these activities have on your back long term. Make sure you use the correct lifting technique, take regular rest breaks from sitting at work, or use a standing desk to alternate between sitting and standing. Your doctor or physiotherapist can advise you on changes to your own lifestyle that will help your recovery.



You may experience some mild back pain and/or muscle soreness when you start a new type of exercise regime. This is normal and will improve as you get stronger and fitter. Speak to your doctor if discomfort persists.



EARLY WALKING PROGRAM

One type of exercise that is safe and easy to do early on is walking.

Here is one example of an early walking programme following the onset of back pain:

Week 1

Walk for 10 minutes, 3 times a week. For example, get off the bus one or two stops early.

Weeks 2 – 3

Walk for 15 minutes, every day. For example, walk the dog.

Weeks 4 – 5

Walk for 20 minutes, every day. For example, a walk around the block.

Week 6 onwards

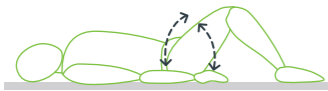
Aim to walk for 30 minutes most days of the week.

After a while you may like to walk a little faster or add in some small hills to your walk. It's okay to feel a little puffed when walking but you shouldn't feel too breathless and should still be able to chat to someone along the way!

Wear supportive footwear such as sneakers when walking to provide a cushioning effect.

SIMPLE EXERCISES

In the early days or weeks, you can do simple exercises to get you moving. Start with 10 repetitions of each exercise and build up to 20. Consult your doctor or physiotherapist before starting any exercise program.



Pelvic Tilt

Keeping your bottom on the bed or floor, slowly flatten the small of your back, and then arch your back. Keep your feet flat.



Cat Stretch

Round your spine upward to curve your back, and then slowly arch your back.



Knee Roll

Bend your knees keeping your feet flat. Slowly rock your knees from side to side as far as you feel comfortable, keeping your shoulders relaxed and down on the bed or floor.



Back Extension

Lying face down with both hands under your shoulders. Use your arms to push up, arching your back, keeping your hips on the bed/floor. Don't hold the position, lower and repeat. You may find you can only partially straighten your arms – this is fine.

RESTING AND SLEEPING

You may find the following positions useful for sleeping or resting.



Lie on a bed or the floor with your knees bent and your feet flat. Try using one or two pillows under your knees for support.



Lie on your side with your hips and knees slightly bent. Place a pillow between your knees for comfort. A small rolled-up towel placed under your waist may also give support.

MYTH: EXERCISE IS BAD FOR BACK PAIN. IN FACT, REGULAR EXERCISE HELPS PREVENT CHRONIC PAIN¹¹

Recovering from back pain

Eating well

After experiencing a bout of back pain it is not only important to move your body, but it is also important to eat well.

Back pain can be aggravated when you are carrying too much body weight which can put a lot of pressure on your bones and joints. If you are overweight or obese, it can benefit you to lose weight.

The Australian Dietary Guidelines¹² suggest the following tips that can help to achieve a healthy weight and improve overall health:

Enjoy a wide variety of foods from these five groups every day

- Vegetables, including different types and colours, and legumes/beans
- Fruit
- Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals, rice, pasta, noodles, polenta, couscous, oats, quinoa and barley
- Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans
- Milk, yoghurt, cheese and/or their alternatives, mostly reduced fat (reduced fat milks are not suitable for children under the age of two years).

And drink plenty of water.

Limit saturated fat

Limit foods high in saturated fat such as biscuits, cakes, pastries, pies, processed meats, burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.

Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and mono-unsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Limit added salt

Limit intake of foods and drinks containing added salt.

- Read labels to choose lower sodium options among similar foods
- Do not add salt to foods in cooking or at the table.

ASSESSING A HEALTHY WEIGHT

These goals are a general guide. Work with your doctor to set your personal goals.

BODY MASS INDEX (BMI)

How to measure BMI

$$\text{Weight (kg)} \div \text{Height (m}^2\text{)} = \text{BMI}$$

For example, a 75kg person with a height of 1.75m:

$$75 \div (1.75 \times 1.75) = 24.5 \text{ BMI}$$

Risk Classification

BMI	Classification	Risk
Less than 18.50	Underweight	Low*
18.50 – 24.99	Normal range	Average
25.00 – 29.99	Overweight/ Preobese	Increased
30.00 – 34.99	Obese Class 1	Moderate
35.00 – 39.99	Obese Class 2	Severe
40.0 or greater	Obese Class 3	Very severe

* Risk of other clinical problems increased

Recovering from back pain

Limit added sugars

Limit intake of foods and drinks containing added sugars, such as confectionery, sugar sweetened soft drinks and cordials, fruit drinks, vitamin waters, energy and sports drinks.

Limit alcohol intake

If you choose to drink alcohol, limit intake. For women who are pregnant, planning a pregnancy or breastfeeding, not drinking alcohol is the safest option.

Australian guidelines recommend no more than two standard alcoholic drinks per day.

WHAT ABOUT GLUCOSAMINE AND CHONDROITIN?

Glucosamine and chondroitin are substances naturally found in the body which are thought to be important components in building and maintaining healthy cartilage. They are commercially available as supplements, which have been made from shells of crustaceans (in the case of glucosamine) or from cow or shark cartilage (in the case of chondroitin).

There is limited and unclear evidence that supports the effectiveness of glucosamine and chondroitin in reducing joint pain. Despite this, both supplements are relatively safe to take with few side effects.

Speak to your doctor if you want to trial glucosamine and/or chondroitin to make sure you choose the right type and dose for you.

Omega 3 oils and fish oil supplements

There are some food components and substances that may have some impact on relieving inflammation or controlling symptoms that you may experience from back pain.

Omega 3 oils

Eating foods rich in omega-3 fats (a type of polyunsaturated fat) may reduce inflammation that you experience. While the effects are not as potent as some medications, they do not have serious side effects and provide heart health benefits too.

Fish oil supplements

Fish oil supplements are widely available in supermarkets and pharmacies in a range of doses. The dose needed to reduce inflammation in conditions such as back pain is about 2.7 grams of omega-3 (EPA plus DHA) daily. This dose usually requires either:

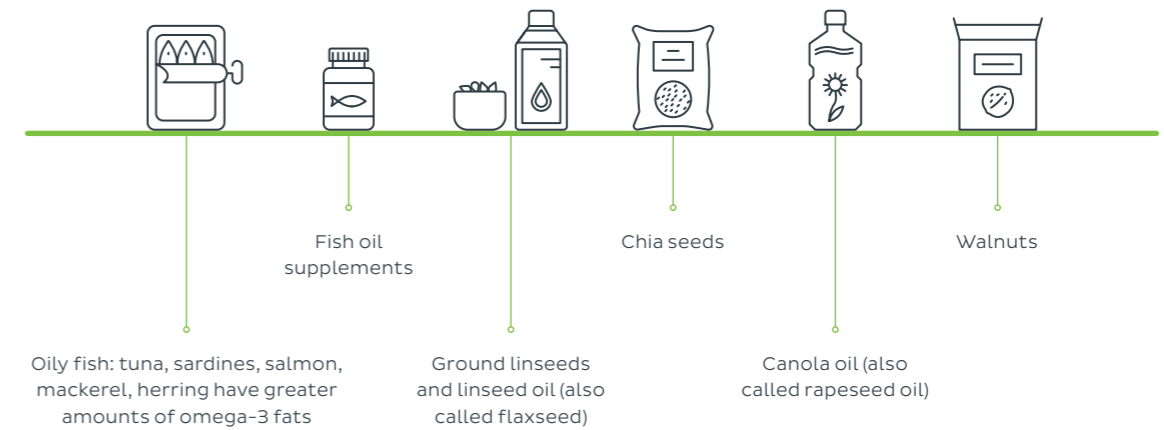
- 9–14 standard 1000mg fish oil capsules, or
- 5–7 capsules of a fish oil concentrate per day, or
- 15mL of bottled fish oil, or
- 5–7mL of concentrated bottled fish oil per day.

It may take a few months to notice improvements in symptoms after you start taking fish oils regularly. If there is no change; speak with your doctor about other options. Make sure that if you use supplements to take pure fish oil rather than fish liver oils (such as cod liver oil). Fish liver oils contain large amounts of Vitamin A which can cause serious side effects if taken in large doses.



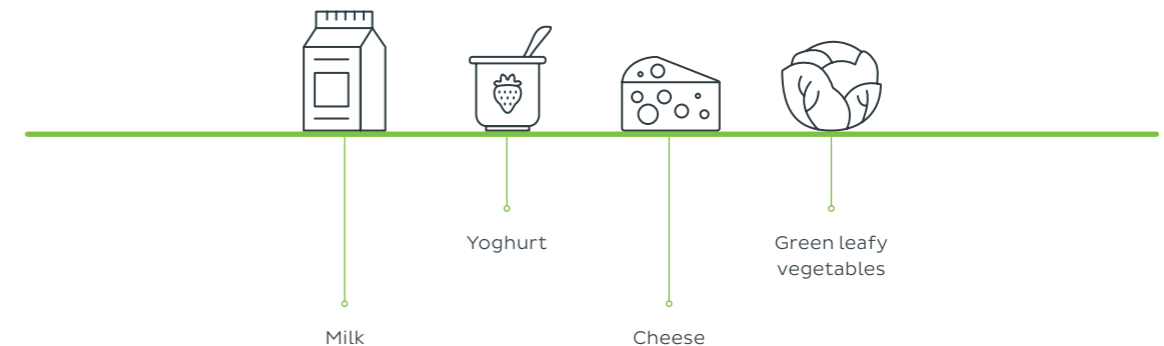
As with all supplements, you should ask your doctor or pharmacist for advice before taking fish oil, glucosamine or chondroitin and check whether you can take it with any existing medicines.

FOODS RICH IN OMEGA-3 FATS

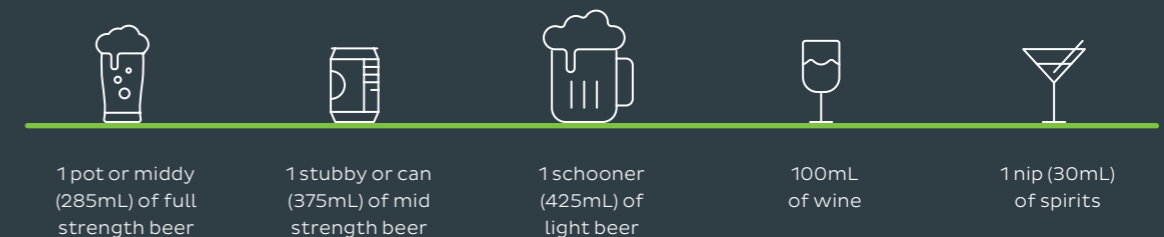


FOODS HIGH IN CALCIUM AND VITAMIN D

Calcium and Vitamin D are both important to increase bone strength. Vitamin D also helps improve calcium absorption, as well as boost the immune system. Low fat dairy products and green leafy vegetables are the best way to get both of these.



WHAT IS A STANDARD DRINK?





Recovering from back pain

Managing your emotional health

When you are managing back issues, it is common to experience a range of emotions including stress, worry, anger, grief, frustration and sadness. These are all normal emotions and can motivate you to manage your symptoms and engage in treatment. The emotional distress may change over time as a result of changes in your capacity, your levels of and ability to cope with pain, changes in your symptoms and perceived effectiveness of your treatment.

It is, however, important to take note of how you are feeling and to address feelings of depression and anxiety that last longer than two weeks. It is also important to pay attention to your use of substances to help manage your symptoms. The good news is that with the right treatment, most people recover from anxiety, depression and substance misuse. This can have a positive impact on your recovery from back pain.

What is depression?

Depression is more than just sadness or a low mood, which is a common part of the human experience. Instead depression is a serious condition that can have severe effects on both physical and mental health.

Depression causes great distress and can have a significant impact on your capacity to function as you used to. It might even make you less able to follow your treatment plan. The sooner you seek help, the quicker and more effective your recovery can be so if you have any of the following symptoms, you should talk to your doctor.

Have you:

- Felt isolated from social supports?
- Lost or gained a lot of weight or had less or more appetite?
- Had sleep disturbance?
- Lacked motivation to engage with others or tasks which you previously enjoyed?
- Felt slowed down, restless or overly busy?
- Felt tired or had no energy?
- Felt worthless or felt excessively guilty?
- Had poor concentration, difficulties thinking or been very indecisive?
- Felt irritable, frustrated and moody?
- Had recurrent thoughts of death or dying?

What is anxiety?

Anxiety is more than just feeling “stressed” – it’s a serious condition that can make it difficult to cope with day-to-day life. Anxious feelings are a normal reaction to a situation where a person feels stressed and usually pass once the situation has passed, or the ‘stressor’ is removed.

It is normal to be afraid when your health is compromised. Changes in symptoms can often cause feelings of worry and fear. If these feelings become persistent and/or widespread you might consider seeking support. Like depression, the sooner you seek help, the quicker and more effective your recovery can be so if you have any of the following symptoms, talk to your doctor.

Are you:

- Feeling very worried or anxious most of the time?
- Finding it difficult to calm down?
- Experiencing physical symptoms such as hot or cold flushes, tightening of the chest, difficulty breathing or a racing heart?
- Feeling overwhelmed or frightened by sudden feelings of intense panic/anxiety?
- Experiencing recurring thoughts that cause anxiety, but may seem silly to others?
- Avoiding situations or things, which cause anxiety (e.g. social events or crowded places)?



Managing stress

Trying to relax is a crucial part of easing the pain caused by muscle tension. Whilst you cannot always avoid stress, you can learn to reduce and manage stress.

The following tips can help you look after your mind and body, and reduce stress and its impact on your health.

- 1 Identify warning signs**
Learn to notice the signs in your body that indicate when stress is becoming a problem, such as tensing your jaw, experiencing headaches, irritability and short temper.
- 2 Identify your sources of stress**
These might include late nights, deadlines, relationships, financial worries or changing jobs. By anticipating, managing or even finding ways to remove the source will help reduce stress.
- 3 Establish routines**
Routines such as regular times for exercise and relaxation, meal times, waking and bedtimes, can be calming and reassuring, and can help you to manage your stress.
- 4 Look after your health**
Focus on healthy eating and getting regular exercise. Take time to do activities you find calming or uplifting, such as listening to music, walking or dancing. Avoid using alcohol, tobacco or other drugs to cope.
- 5 Connect to others who care**
Share your thoughts and feelings with others when opportunities arise. Don't 'bottle up' your feelings. When you share your concerns or feelings with another person, it does help relieve stress. But it's important that the person you talk to is someone that you trust and who you feel can understand and validate your thoughts and feelings.
- 6 Make time for fun and relaxation**
Nurturing yourself is a necessity, not a luxury. If you regularly make time for fun and relaxation, you'll be in a better place to handle life's stressors. Relaxation techniques such as yoga, meditation, and deep breathing can help you manage stress levels.
- 7 Manage your time**
Poor time management can cause a lot of stress. Try not to over commit yourself. Prioritise or delegate tasks to others if you can.

BREATHING EXERCISES FOR STRESS

This calming breathing technique for stress, anxiety and panic takes just a few minutes and can be done anywhere.

- Let your breath flow as deep down into your belly as is comfortable, without forcing it
- Try breathing in through your nose and out through your mouth
- Breathe in gently and regularly. Some people find it helpful to count steadily from one to five. You may not be able to reach five at first
- Then, without pausing or holding your breath, let it flow out gently, counting from one to five again, if you find this helpful
- Keep doing this for three to five minutes.

DID YOU KNOW...

A stress journal can help you identify the regular stressors in your life and the way you deal with them. Each time you feel stressed, keep track of it in your journal. You will begin to see patterns and common themes.

Write down:

- What caused your stress
- How you felt, both physically and emotionally
- How you acted in response
- What you did to make yourself feel better.

Back issues and substance use

Pain associated with back problems is one of the most common reasons for people to seek medical help. When pain medications are properly prescribed and used, the chance for addiction is relatively low, although it can still occur.

When your condition is causing significant pain it can be easy to rely on substances (both prescription and recreational, for example, alcohol) as a 'grab' for relief. The belief that "more is better" becomes problematic and "use" can become "misuse". If you or someone around you is concerned about your use of medication or other substances, it is important to seek help.

Seeking professional help

Minimising your distress and putting on a brave face is not the answer. Actually, this can worsen your condition. Depression, anxiety and substance misuse are just like other health problems, there are treatments available; however there is no one size fits all. There are a range of effective treatments and health professionals, including your psychologist, psychiatrists, specialist addiction counsellors and social workers, who can help people on the road to recovery. Your doctor will be able to make the appropriate referral and enable you to claim some of the fee through Medicare.

Treatment options for back pain

Along with staying active and exercising, there are many other treatment options to assist in back pain recovery such as the use of medication for pain reduction, and physiotherapy.

RESTING IN BED MAY DELAY RECOVERY. STAYING ACTIVE AND USING SIMPLE PAIN MEDICINES OR A HOT PACK CAN HELP EASE PAIN⁹

The main treatment goals are reducing pain, restoring function and preventing further episodes of back pain.

Consult your doctor before commencing any treatment. Your doctor can also guide you on other treatments that may be available.

Medication

For the majority of people their back pain has no clear cause; because of this, doctors look at which drugs are best to treat short or long-term back problems. Talk to your doctor about suitable pain relief.

- It is important that if you are already taking medication for something else or have other health problems you check with your doctor or pharmacist before taking painkillers for your back problem
- Always follow the advice of your doctor or pharmacist as well as the instructions on the packet regarding recommended use and dosage
- Remember to go back to your doctor at reasonable intervals to have your medication reviewed.
- Talk to your doctor if you are unsure.

Hot and cold packs

Using a hot water bottle or an ice pack may help ease pain and promote muscle relaxation. Ice packs initially can help reduce the pain and muscle tightness. A bag of frozen peas wrapped in a damp towel makes an effective ice pack. Hold it for 15–20 minutes against the part of your back that hurts. You can do this every two to three hours (be careful, ice can burn).

After two days you may find heat is more effective to reduce pain and relax tight muscles, for example a warm shower, wheat bag or hot water bottle in a cover placed on your back. Make sure the hot water bottle is not too hot and does not burn you. You should do this for 15–20 minutes, three to four times a day.

Physiotherapy

If your back pain is affecting your daily activity and is persisting, it may be a good idea to see a physiotherapist to help you understand your problem and get you back to your normal activities. You do not need a doctor's referral to see a physiotherapist. Physiotherapy can help to reduce and manage your pain and improve your strength and flexibility. A physiotherapist will assess your back pain and provide you with some effective treatment options. For example, they may use hands-on spinal mobilisation and/or exercise therapy.

Your physiotherapist may provide you with specific back exercises that target the strengthening of core muscles (deep abdominals, obliques, erector spinae, and pelvic floor muscles), as well as give you advice on aerobic conditioning, resistance exercise and return to previous sporting activities. They can also give advice on how you can prevent symptoms returning in the future, for example by teaching you to use the correct muscles during everyday tasks.

WHAT ABOUT ACUPUNCTURE?

Acupuncture involves inserting thin needles at certain points on the body. There is moderate evidence for benefits of acupuncture in the treatment of chronic back pain, but its benefits in acute back pain are less clear¹³.

If you are considering acupuncture, discuss with your doctor first. Be sure to let your doctor know any other medications you are taking. Also tell your doctor if you are pregnant, wear a pacemaker, or have any type of implant.



Take your medicines as prescribed by your doctor. Discuss any possible side effects, and how to reduce them. To do this, establish good routines and plan ahead with any disruptions in your normal routine.



BACK TIP

Choose the aisle seat when travelling on a plane so you can get up more easily.



Manual Therapy

Manual therapy can help improve spinal function by decreasing pain and inflammation to increase range of motion and physical function. There are a wide variety of spinal manual therapy techniques that can be performed, all involving the manual movement of the spine to achieve a therapeutic effect of reducing pain and restoring function. This can be done by Practitioners such as physicians, chiropractors, and physiotherapists.

Massage

Massage therapy can provide early pain relief when back pain is caused by muscle tension and strain, if the correct muscles are targeted. Massage for chronic back pain has not been shown to be effective.

Epidural Steroid Injections

Deliver steroids directly into the painful area of the lower back to reduce inflammation and pain. The steroids do not heal the components of the back, but may provide enough pain relief to allow more movement and participation in exercise.

Surgery

In most cases of back pain, surgery is not required. Surgery may be an option if other treatment options have not been successful and a back specialist has identified a specific structural problem that can be corrected with surgery. For example, nerve root compression.



BACK FACT

Surgery is only suitable for a very small group of individuals with back pain⁹.

CHRONIC BACK PAIN

If your pain lasts more than 12 weeks you may find it harder to recover. You may need additional treatments, such as a talking treatment called cognitive behaviour therapy (CBT), other medicines, and possibly surgery.

You should see your doctor if your back pain isn't getting better. Your doctor may refer you to a specialist in back problems.

Where to find more information and support

You can see your doctor, who will ask about your symptoms, examine your back, and discuss possible treatments. They may refer you to a specialist doctor or a physiotherapist for further help.

You may want to consider approaching a physiotherapist directly by contacting the **Australian Physiotherapy Association** on 1300 306 622 or use the 'Find a Physio' feature on their website.

→ physiotherapy.asn.au

Australian Psychological Society

→ 1800 333 497

→ Find a psychologist: psychology.org.au

healthdirect

Trusted health information and advice online and over the phone, available 24 hours a day, 7 days a week. Funded by the governments of Australia.

→ 1800 022 222

→ healthdirect.gov.au

Arthritis Australia

Arthritis Australia is the peak body and works on behalf of the nearly four million Australian living with arthritis. Learn more about arthritis and how to manage it by contacting Arthritis Australia.

→ 1800 011 041

→ arthritisaustralia.com.au

Eat for Health

An Australian government website providing information, resources and tools about the Australian Dietary Guidelines and advice about the amount and kinds of foods that we need to eat for health and wellbeing.

→ eatforhealth.gov.au

About TAL

TAL is Australia's leading life insurance specialist, protecting people – not things – for over 150 years. Today, we insure more than 5 million Australians and in 2022, reached a new milestone paying \$3.5 billion in claims.

At the heart of the claims experience is you. Our goal is to help you lead as healthy and full a life as possible and help you get back to health as quickly as possible, taking into account all of your circumstances: your physical health, your mental wellbeing and your social support.

TAL's focused on your health

Health and wellbeing is at the heart of what we do. From your physical and mental health, to your social and financial wellbeing – helping you be the best you can be is our number one priority.

We want all Australians to live a life as healthy and full as possible, because that's what living this Australian life is all about. Our focus on your health begins when your cover does. Working with you to keep you well and supporting your return to health, with a personalised plan should the unfortunate happen and you suffer an illness or injury.

Because your health and wellbeing is as important to us as it is to you.

References

1 Australian Institute of Health and Welfare. Australia's Health 2016. Canberra: AIHW, 2016 **2** The Royal Australasian College of Physicians, Australasian Faculty of Occupational and Environmental Medicine. Position Statement on Realising the Health Benefits Work, Sydney 2011 **3** Rubin DI. Epidemiology and risk factors for spine pain. *Neurol Clin.* 2007;25:353-371 **4** Videman T, Battie MC, Ripatti S, et al. Determinants of the progression in lumbar degeneration: a 5-year follow-up study of adult male monozygotic twins. *Spine.* 2006; 31:671-678 **5** Hurwitz EL, Morgenstern H. Correlates of back problems and back-related disability in the United States. *J Clin Epidemiol.* 1997;50:669-681 **6** Goldberg MS, Scott SC, Mayo NE. *A review of the association between cigarette smoking and the development of nonspecific back pain and related outcomes.* *Spine (Phila Pa 1976).* 2000 Apr 15;25(8):995-1014. **7** Macfarlane GJ, Thomas E, Papageorgiou AC, et al. Employment and physical work activities as predictors of future low back pain. *Spine.* 1997;22:1143-1149 **8** Power C, Frank J, Hertzman C, et al. Predictors of low back pain onset in a prospective British study. *Am J Public Health.* 2001;91:1671-1678 **9** Australian Physiotherapy Associations. Back Pain: https://www.physiotherapy.asn.au/APAWCM/Physio_and_You/APAWCM/Physio_and_You/Back_Pain.aspx (Last accessed: 20 April 2017) **10** Waddell G. A new clinical model for the treatment of low-back pain. *Spine* 1987;12:632-644 **11** The Department of Health. Australia's Physical Activity and Sedentary Behaviour Guidelines (2014): <http://www.health.gov.au/internet/main/publishing.nsf/Content/health-pubhlth-strateg-phys-act-guidelines> (Last accessed: 28 April 2017) **12** National Health and medical Research Council. Australian Dietary Guidelines (2013): <https://www.nhmrc.gov.au/guidelines-publications/n55> (Last accessed: 28 April 2017) **13** Lam M, Curry P. *Effectiveness of acupuncture for nonspecific chronic low back pain: a systematic review and meta-analysis.* *Spine* 2013;38:2124-38

TAL Life Limited

GPO Box 5380 Sydney NSW 2001

Customer Service Centre:

1300 209 088 | customerservice@tal.com.au

tal.com.au

The TAL logo consists of the letters 'TAL' in a bold, green, sans-serif font. The 'T' and 'A' are connected at the top, and the 'L' is separate. The logo is positioned in the bottom right corner of the page.