

Targeted therapies can help alleviate back pain, study finds

March 21 2013, by Carley Tonoli, Fron Jackson-Webb & Sunanda Creagh



Credit: AI-generated image ([disclaimer](#))

Changing the way people think and move can have a huge impact on their experience of unexplained lower back pain, a [study](#) has found.

The new findings, published in the *European Journal of Pain*, show that

a personalised and targeted approach aimed at changing a person's own beliefs, [behaviours](#) and [movement patterns](#) can significantly reduce their [pain](#) in the long term and their time off work.

Persistent back pain is one of the most disabling [health-care](#) disorders in Australia. But as few as 10% of patients receive a clear diagnosis.

The authors of the study analysed data on 121 participants who suffer from unexplained chronic lower back pain, aged between 18 and 65 years, for a period of 12 weeks with a follow up after 12 months. A control group was also studied.

The study, a [randomised trial](#), involved one group receiving cognitive functional therapy, which involves listening to people's experiences of back pain then working with them to change their understanding of back pain and retrain them to stop making protective movements.

The [control group](#) received traditional therapies such as manual manipulation and exercise.

The study found, by using cognitive and movement therapies it was possible to retrain people to think more positively about their back and to abandon the instinctive protective movements that were often the source of pain.

The study also showed a reduction in participants' depression, fear of pain, and time off work.

These findings were maintained at a follow up interview 12 months from the initial trial.

"By retraining people the way people move and changing the way they think about their back, we found much bigger reductions in pain and

much less fear of movement," said Professor Peter O'Sullivan, Professor of Musculoskeletal [Physiotherapy](#) at Curtin University and co-author of the study.

"What we understand from the literature, is that often the fear of pain causes people to make protective movements and as a result people's movement patterns become really abnormal and act as a mechanism for self harm," Professor O'Sullivan said.

"Often those habits are reinforced by well meaning health care practitioners, who do scans and give a diagnosis even though what is found on the scan may not be the cause of pain at all.

"It's like a thought virus that gets people into real trouble.

"Once you think you are vulnerable, you act vulnerable, that in itself creates abnormal stress on the structure and causes pain."

It is hoped the findings will bring about a change in the way health care practitioners think and act when managing patients with back pain.

"We want health care practitioners to tell a different story about back pain and encourage people not to worry about scans," Professor O'Sullivan said.

"We want to give them hope that these people can change and stop the approach of giving up on people with pain."

Dr Michael Vagg, clinical senior lecturer at Deakin University School of Medicine and pain specialist at Barwon Health, said the findings were not surprising to the pain medicine community, which had incorporated psychological approaches in pain management for more than a decade.

"It reinforces the concepts of education and cognitive skills training in addition to prescribed exercises as the best practice," said Dr Vagg, who was not involved in the study.

"Just changing your thinking, or doing exercise alone is not as effective as combining them into a structured program of activity and education," he said.

"The evidence is quite strong that combining psychological and physical approaches is the most effective way to improve quality of life in chronic [lower back pain](#)."

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Citation: Targeted therapies can help alleviate back pain, study finds (2013, March 21) retrieved 6 May 2024 from <https://medicalxpress.com/news/2013-03-therapies-alleviate-pain.html>

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