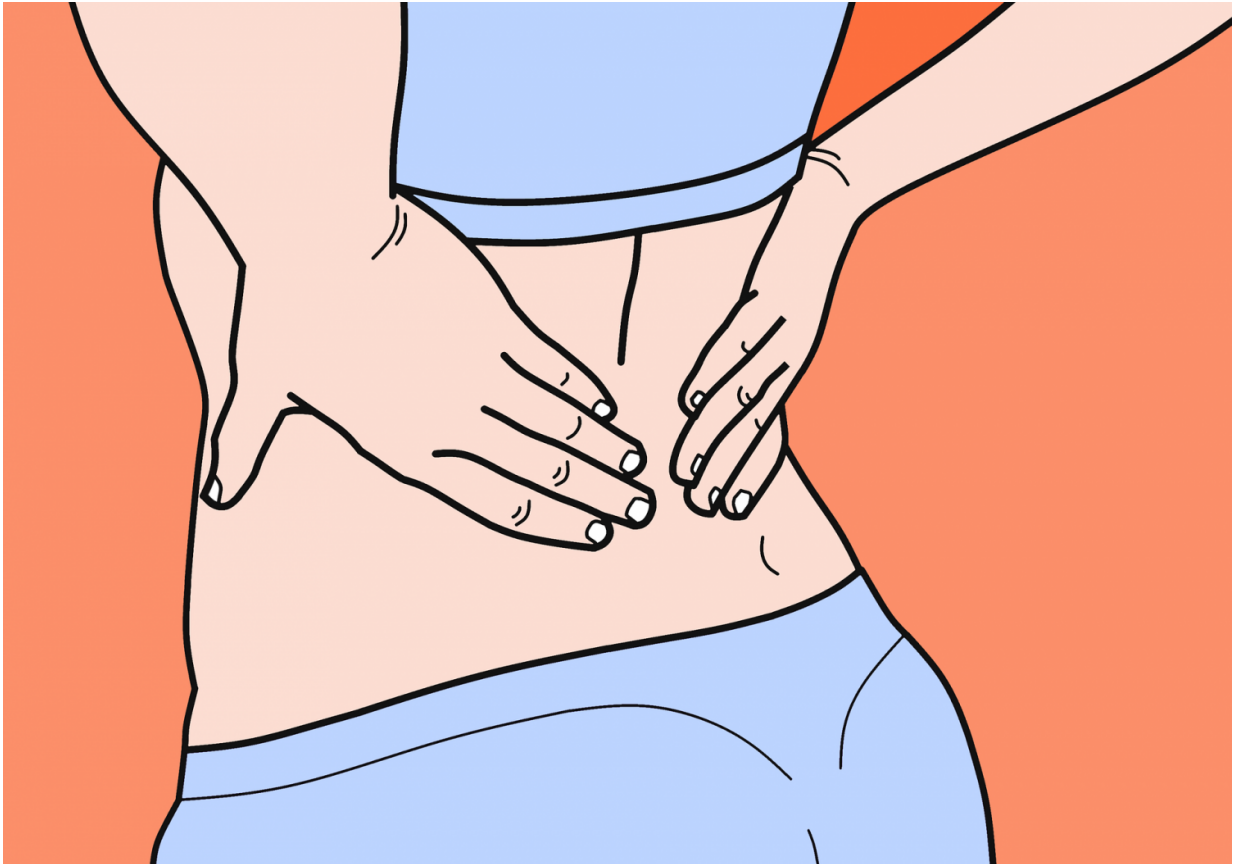


Study links diabetes and back pain

February 21 2019



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People with diabetes have a 35 percent higher risk of experiencing low back pain and 24 percent higher risk of having neck pain than those without diabetes, a review by University of Sydney researchers has found.

Their findings, based on meta-analyses of studies that assess the links between diabetes and back or neck pain outcomes, were published today in *PLOS ONE*.

Most adults experience [low back pain](#) during their lives and almost half suffer neck pain at some stage. Diabetes is an increasingly prevalent chronic condition; an estimated 382 million people live with type 2 diabetes, the most common form of this metabolic disease.

There was insufficient evidence in the review to establish a [causal relationship](#) between diabetes and back or neck pain, the paper's senior author Associate Professor Manuela Ferreira from the University's Institute of Bone and Joint Research said. But the findings warrant further investigation of the association.

"Diabetes and low back pain and neck pain seem to be somehow connected. We can't say how but these findings suggest further research into the link is warranted," Associate Professor Ferreira said.

"Type 2 diabetes and low back pain both have a strong relationship with obesity and [lack of physical activity](#), so a logical progression of this research might be to examine these factors in more detail. Our analysis adds to the evidence that weight control and physical activity play fundamental roles in health maintenance."

The paper also found diabetes medication could influence pain, possibly via its effect on blood glucose levels, and this connection should also be investigated. It also recommended [health care professionals](#) should consider screening for unknown diabetes in patients seeking care for [neck pain](#) or low back pain.

"Neck and back pain, and diabetes, are afflicting more and more people," said co-author and collaborator Associate Professor Paulo

Ferreira from the Faculty of Health Sciences. "It's worth committing more resources to investigate their interrelationship. It may be that altering treatment interventions for [diabetes](#) could reduce the incidence of back pain, and vice versa."

Provided by University of Sydney

Citation: Study links diabetes and back pain (2019, February 21) retrieved 9 April 2024 from <https://medicalxpress.com/news/2019-02-links-diabetes-pain.html>

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