

Study recommends new ways to treat musculoskeletal pain

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A new study led by The University of Western Australia has identified 11 recommendations to help health professionals and patients better manage musculoskeletal problems. The study comes after the team found many musculoskeletal problems were not being managed effectively.

Musculoskeletal [conditions](#) - including back and [neck pain](#), osteoarthritis and [shoulder pain](#) - affect nearly 7 million Australians with around one in five visits to the doctor due to a musculoskeletal pain condition. Musculoskeletal pain is very common, and results in disability at a greater rate than any other condition.

The study, published in the *British Journal of Sports Medicine* examined clinical practice guidelines for musculoskeletal pain conditions.

Lead researcher Dr Ivan Lin from UWA's Western Australian Centre for Rural Health said the challenge was understanding the best way to manage conditions which could be complex.

"It's important that [patients](#) are provided with information about the cause of their pain and what they can do to self-manage it. Although this may sound obvious in a lot of cases people do not manage their condition effectively due to lack of information and understanding," Dr Lin said.

"We also found imaging such as x-rays and scans are overused when they

should really only be used selectively when there is a suspicion of a serious condition or the need for further investigation."

Dr Lin said it was also important for clinicians to assess patients' emotions and beliefs about their condition which could have a big impact on recovery. "For example if a person has the perception that their condition is caused by severe and [permanent damage](#) to a part of their body then they might over-protect it and avoid all [physical activity](#) which could worsen the problem."

UWA Clinical Associate Professor and specialist pain physician Dr Roger Goucke, also involved in the study, said the recommendations would improve outcomes for patients.

"If these recommendations are followed when patients first seek care, we will see less patients in trouble later on in the pain clinic," Dr Goucke said.

The study led by UWA researchers was also made possible by the work of researchers and clinicians from Curtin University, University of South Australia, University of Sydney, Harry Perkins Institute of Medical Research, Sir Charles Gardner Hospital, and Geraldton Hospital.

11 recommendations outlined in the study:

- Care should be patient-focused and involve the patient in the decision making.
- Health professionals should screen for serious conditions such as fractures, cancer or conditions manifesting as musculoskeletal pain.
- Assessment of psychosocial factors should be part of treatment such as depression, anxiety or unhelpful beliefs about [pain](#) that require special care.

- Radiological imaging should only be used when there is a suspicion of a serious condition.
- A physical examination should be used to assess physical capacity and if there are neurological problems.
- Professionals should monitor patient progress.
- Education and information should be provided to patients including a management plan for their condition.
- Advice should be provided to patients about what activity or exercise might help improve their condition.
- Manual therapies, such as joint manipulation or massage, should only be used in conjunction with treatments such as exercise, rather than on their own.
- High quality non-surgical care, such as rehabilitation, should be administered prior to surgery.
- Patients should be encouraged to continue work if they are employed.

More information: Ivan Lin et al. What does best practice care for musculoskeletal pain look like? Eleven consistent recommendations from high-quality clinical practice guidelines: systematic review, *British Journal of Sports Medicine* (2019). [DOI: 10.1136/bjsports-2018-099878](https://doi.org/10.1136/bjsports-2018-099878)

Provided by University of Western Australia

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