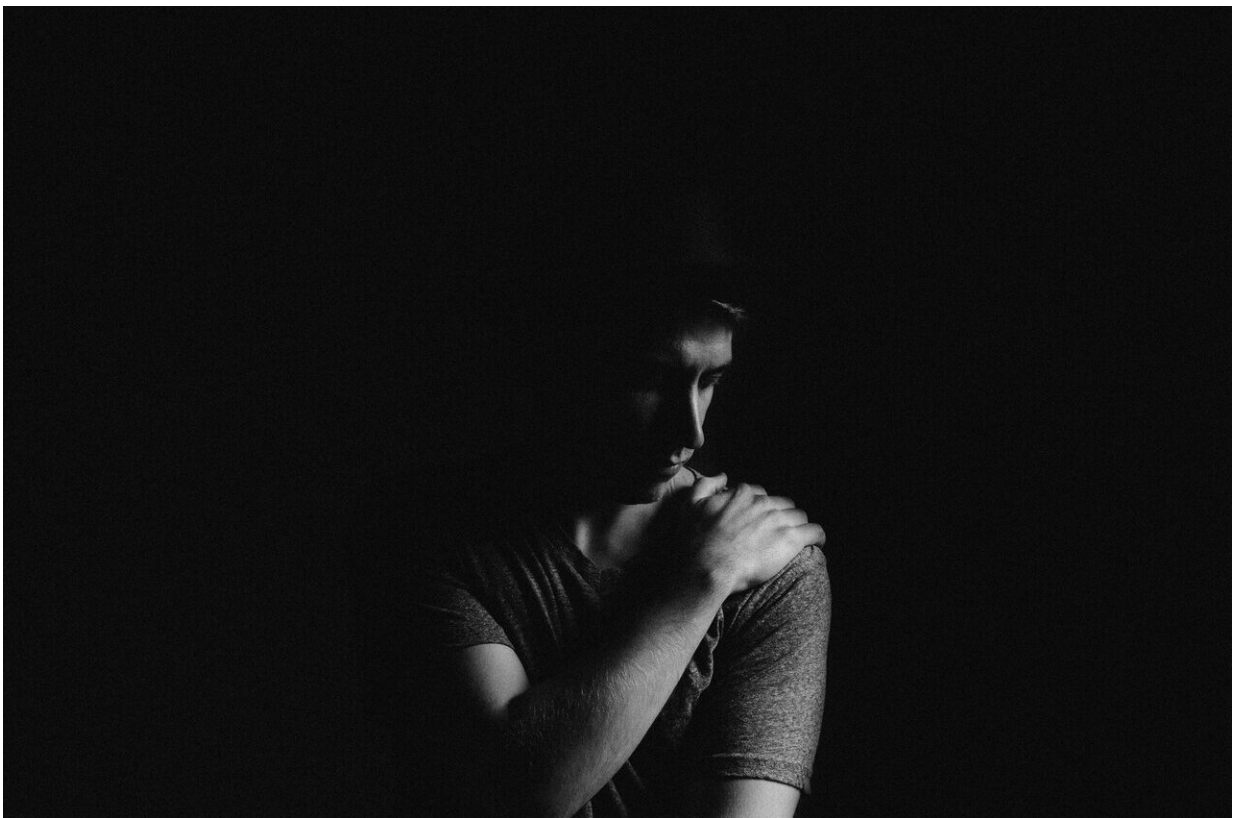


Black and Hispanic patients more likely to develop chronic lower back pain or high impact lower back pain

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New research from Boston Medical Center discovered that Black and Hispanic patients with acute low back pain were more likely to develop

high-impact chronic pain when compared to White patients. Published in *Pain Medicine*, researchers suggest experiences of discrimination, unmet social needs, and elevated levels of stress may explain the observed racial disparity in long-term outcomes for acute low back pain.

High-impact chronic pain or chronic pain that interferes with [daily life](#) or work impacts almost 20 million Americans, and chronic [lower back pain](#) is the leading cause of disability and healthcare cost in the United States.

Researchers discovered that the risk of developing high-impact chronic pain was highest among Black women. Their findings were partially explained when adjusting for socioeconomic situations, suggesting identifying upstream racial and [ethnic differences](#)—such as differences in [health insurance](#) or neighborhood resources—may impact long-term outcomes for patients with new episodes of low back pain.

The association of race and ethnicity with long term lower back pain has been understudied, and this is the largest prospective study to explore racial and ethnic differences in outcomes for acute back pain. Previous cross-sectional studies have demonstrated under treatment of acute and chronic pain among non-White patients. Researchers believe that considering discrimination and racism may be helpful in understanding and addressing racial and ethnic disparities in pain outcomes. Experiences of racism can impact mental health, and poor psychological health is strongly associated with poor pain outcomes.

"Our study has highlighted both a concern in the absolute number of patients with acute low back pain who develop [chronic low back pain](#) and concerns about racial and ethnic disparities in outcomes," said lead author Eric Roseen, DC, MSc, director of the Program for Integrative Medicine and Health Disparities at Boston Medical Center, and assistant professor of medicine at Boston University Chobanian & Avedisian

School of Medicine. "High-impact [chronic pain](#) has a negative impact on the lives of millions of Americans, particularly Black Americans, yet possible and significant causes of racial and ethnic disparities in long-term pain outcomes remain understudied and largely unaddressed. The disparities that emerged in this study shed light on the direct correlation among lived experiences, physical, and [mental health](#), which must be addressed in order to improve patient outcomes."

From May 2016 to June 2018, 9730 patients experiencing lower back pain were seen at one of 77 primary locations in four US-based geographic locations. Patients were monitored through March 2019, and their outcomes assessed at the 6 month point. Adults who already had chronic lower back pain at the initial visit were excluded, as well as patients with rare but serious underlying causes to their back pain such as cancer or fracture.

Future research should further explore the intersectionality of race, sex, and other social factors of health with lower back pain, and analyze whether policies that reduce biases can also improve lower back pain outcomes.

More information: Eric J Roseen et al, Racial and ethnic disparities in the incidence of high-impact chronic pain among primary care patients with acute low back pain: A cohort study, *Pain Medicine* (2022). [DOI: 10.1093/pm/pnac193](https://doi.org/10.1093/pm/pnac193)

Provided by Boston Medical Center

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