

PHYSIO TIPS

IN SEPTEMBER

BUSTING THE MYTHS ABOUT BACK PAIN



Physio Tips is a monthly newsletter aimed at educating the public regarding the latest's evidence in injury management, without all the medical jargon. We will keep it simple and concise, but full of knowledge gems in order to empower and equip you.

REACH OUT TO US

Low back pain is one of the most common symptoms seen by doctors and physiotherapists - 20% of people suffer from low back pain every year and 80% in their lifetime - **BACK PAIN** is like the **COMMON FLU**

In the light of Back Week in September, we look to bust the myths about back pain based on latest research - in order to equip you with knowledge and practical tools to address this common complaint



Myth 1: The best thing for my back pain is bed rest

Fact: It is now well known that bed rest increases back pain. Initially after an injury you should stay away from aggressive movements, but there is strong evidence that staying active and modifying activities are important to optimize recovery.

Motion is lotion

Myth 2: Moving will make my back pain worse

Fact: People are afraid of bending and twisting but it is essential to keep moving. Gradually increase how much you are doing and stay on the go. Our backs were designed to move and graded movement can have a pain relieving effect by stimulating different nerve pathways. If you are unsure or want guidance about how to do this, your physiotherapist can help.

Exercise is medicine



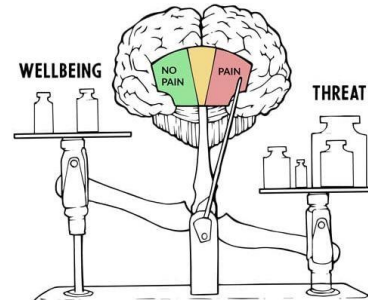
Myth 3: An X-Ray or MRI can tell me the exact cause of my pain

Fact: While scans and tests inform us about the condition of bones and soft tissues, they do not reflect how much pain someone is experiencing. Pain is much more complex and multiple factors are involved - not just the biological condition of the spine. Studies have shown that even people with no pain/symptoms have scans that show degenerative discs, bulging discs, arthritic changes and herniated discs.

Wrinkles on the inside

Myth 4: Pain = damage

Fact: Historically this was the established view, however recent research has changed our thinking. Research based physiotherapists should take a holistic approach to help people understand why they are in pain. Our nervous system can become sensitized by various factors that increase 'threat' to the system. PAIN = PROTECTION = SENSITIVE NERVOUS SYSTEM

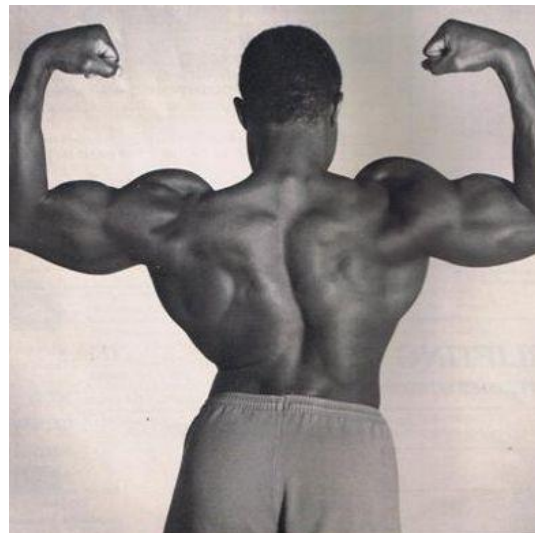


Myth 5: I have back pain because I'm older

Fact: Contrary to popular belief, ageing does not cause back pain. We start ageing when we're born. Many studies have shown that age and back pain do not go hand-in-hand. Degenerative changes happen with age, but we prefer to call these changes wrinkles on the inside - it is a normal process that does not always result in pain. Interestingly people report the highest incidence of back pain between the ages of 30-50 and up to 50% of school children complain of back pain.

Myth 6: I have back pain because I have bad posture or my spine is "out of alignment"

Fact: Your spine is very strong and held together by a large number of strong ligaments, allowing us to lift heavy loads, walk long distances, drive cars and have babies. Your bones will not simply move out of and back into place with movement or manipulation. As for posture - our spines enjoy variety and there is no perfect posture that will prevent back pain. In fact, the first weightlifter to lift 5x their body weight had pronounced scoliosis in his spine!





Myth 7: The only thing that will cure my back pain is surgery

Fact: There is a lot of controversy about back surgery. More and more people are having back surgery, but unfortunately even after back surgery at least one in three people still experience pain and struggle to do their daily tasks. In cases where there was severe trauma, back surgery may be needed. However, in most cases surgery should only be considered if the condition did not respond to conservative management - including physiotherapy, exercise, lifestyle changes and medication

Myth 8: It is all in my head

Fact: Pain is always real, even if no biological cause can be identified. Since pain is an output from the brain, it means that multiple different inputs to the brain can contribute to a painful experience. These inputs can be biological (inflammation from tissue damage), but can also be psychological (stress, fear, anxiety). Just because psychological inputs are the main contributors, does not mean the pain is less real - it just means the treatment focus needs to be different.

"Pain is an opinion of the organism's state of health rather than a mere reflexive response to injury" Norman Doidge



"We will have pain, when our brain weighs our world - everything going on inside and outside - and makes a credible judgement that there is more danger than safety"

David Butler

GET BACK IN ACTION

WATCH THIS SPACE FOR PHYSIO TIPS IN OCTOBER:

Useful tools to tackle back pain

If you can't wait until October -
our physiotherapists would be more than willing to set you on the right track.

READ MORE ABOUT US

Where You Can Find Us



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HAVE ANY QUESTIONS?



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