

LATEST NEWS ON LOW BACK PAIN

Approximately 80% of the UK adult population suffers with low back pain symptoms at some stage in their lives. Low back pain continues to be the most common symptom that people consult their General Practitioner with. Many patients and employers assume that there is a magical treatment or that every individual should proceed to x-rays and a scan and that this in every case will identify the problem.

Most low back pain is called 'mechanical low back pain' due to an imbalance between the muscles supporting the spine. These symptoms usually settle in approximately 6 weeks and often require no particular treatment other than continuing as well as possible with the normal day to day activities including attending work.

Many people feel that an x-ray will identify a problem. X-rays rarely are helpful in managing low back pain symptoms and it is worth noting that an x-ray of the spine involves a radiation dose that is 200 times that of a chest x-ray.

Specialists in the field of managing low back pain consider the MRI scan is the test of choice. Unfortunately, MRI scans are very expensive and their use is limited by cost. An added complication is that approximately 5% of people experience claustrophobia and therefore cannot undergo an MRI scan.

The problem with MRI scan reports is that they need careful interpretation. Many of the findings seen on an MRI scan are normal and due to an individual's age and the fact that the spine and the discs between the vertebrae wear and degenerate with time. Many MRI scans reveal a wearing process but do not reveal any significant problems that can be treated.

Degenerating intervertebral discs for example are a normal finding and are due to age. They are common in adults over the age of 40 and they are not an indication for any specific treatment or surgery. Bulging discs are also normal, unrelated to age and unless the disc is actually pressing on the nerve root there is no particular treatment available. Again, other findings need to be matched with the symptoms that a patient has and may not actually indicate that there is any significant problem or that any treatment is required.

Interesting recent research has confirmed what doctors have suspected for a significant length of time and that is there is a link between an individual's psychological health and their musculoskeletal symptoms, in particular symptoms of low back pain. This research attempted to link psychological and social factors with low back pain symptoms and in particular, psychological symptoms relating to the workplace.

The results of the study reveal that workers with high levels of perceived job stress were more likely to develop musculoskeletal complaints and in particular low back pain. The study went on to indicate that workers with a high exposure to both physical and psychological workplace factors were up to 4 times more likely to develop musculoskeletal symptoms including back pain.

It has been known for some time that mental stress can limit the body's defence mechanisms and the body's ability to deal with physical reactions. This can lead to muscle damage or tendon strain. If an individual is therefore exposed to physical stressors and they also are exposed to psychological stresses, any damage that occurs to muscles or tendons will therefore in theory take longer to recover. Psychological factors may increase an employee's exposure to other workplace risk factors, for example an employee who is required to undertake repetitive musculoskeletal movements such as manual handling movements, may work more rapidly due to his mental state and therefore this may place him at a risk of physical strain. The research interestingly went on to identify specific workplace risk factors both physical and psychological with specific musculoskeletal injuries, for example low back pain, neck pain, shoulder pain, elbow pain and hand and wrist pain. It is important, therefore that employers and managers have all the tools at their disposal both to measure and manage psychological and physical symptoms. A particular challenge is returning an individual to the workplace after they have been successfully treated for their low back symptoms.

Preventative Healthcare recommends the HSE's Manual Handling Assessment Charts (MAC charts). These were originally published approximately 2 years ago and are specifically designed to manage work related musculoskeletal disorders including manual handling injuries. They are designed to be used in conjunction with the risk assessments detailed in the Manual Handling Operations regulations 1992. The MAC charts help employers assess the common risk factors in the lifting and lowering tasks required in a particular employee's role. They also include the assessment of carrying and team handling operations. They can be used by safety officers, safety representatives and other employees after minimal training. MAC charts are very useful in identifying high risk manual handling operations and also in modifying operations to allow individuals to return to the workplace in a safe manner. The charts use colours, graphs, flow charts and numerical values and deal



Continued page 3

with load weight, hand distance from the lower back, vertical lift, grip, postural constraints, floor surface, etc.

The successful management of low back pain symptoms is a complex process that requires the complete awareness of all the factors involved, both physical and psychological. The use of the HSE's Manual Handling Assessment Charts allows employers to be confident that such complex issues can be managed within the workplace.

For further information with regards to occupational health services please contact Jane Puncher on 01622 775285 or email j.puncher@phcohealth.co.uk or visit our website at www.phcohealth.com

For further information with regards to the HSE's Manual Handling Assessment Charts, visit the HSE website at www.hse.gov.uk/msd

