Back Pain and Physical Activity

Back pain comes in various forms, but all back pain shares some common characteristics. For example, all back pain improves when you stay physically active, both when you feel back pain and when you are symptom-free.

However, back pain responds differently to activity at various times during recovery. With a significant acute strain or sprain, resting for two days is often best and is usually all that the patient can tolerate. As the following article points out, encouraging people to begin moving as quickly as they can helps the healing process.

With help from a health-care provider and, in some cases, a Workers’ Compensation Board (WCB) caseworker, people with back pain can literally take the first steps to recovery much more quickly than previously thought. Timing is critical in muscle, ligament, and joint injury because healing begins immediately after the damage. If activity is not started soon, usually between two and six weeks, then injured tissues may not recover their flexibility, strength, and ability to function (i.e., to do what they are designed to do). After losing flexibility and function, the healed tissues become weak. Even small movements can then lead to re-injury and to a chronic back problem.

Each person needs to be considered as an individual, with a unique history that requires a tailored rehabilitation program. The health-care provider can teach patients to take the most effective approach to recovery without fear that activity will worsen their condition. The health-care provider can also reassure patients that they do not need to be 100% pain-free before becoming active again.

Patients want to get back to where they were before the injury occurred, with as little pain, discomfort, or inconvenience as possible. The best approach for clients is to give their best effort and to trust the caregiver to guide them back to optimal function and stability.
Get Back@It—The Role of Physical Activity in Treating Lower Back Pain

Dana Kroetsch, Communications Assistant, Workers’ Compensation Board—Alberta.

Chances are that if you haven’t suffered from low back pain yourself, you know someone who has. The Institute for Work & Health (2005) estimates that up to 85% of the working population is affected by low back pain at least once in their lifetime.

Not long ago, bed rest was believed to be the correct treatment for low back pain. As recently as 1995, 72% of physicians considered strict bed rest of more than three days an appropriate therapy for low back pain (Cherkin, Deyo, Wheeler, & Ciol, 1995). Today, we recognize the benefits of staying active.

What the Research Says

Staying active is vital to a faster recovery from low back pain (Malmivaara, Hakkinen, Aro, Heinrichs, Koskenniemi, Kuosma et al., 1995). Two systematic reviews showed that patients who remained active recovered faster, returned to work earlier, and had lower health-care costs and reduced time off work in the following year. Bed rest, on the other hand, made the back pain worse in some instances (Koes & van den Hoogen, 1994; Waddell, Feder, & Lewis, 1997).

Many patients with low back pain fear that activity will aggravate their condition (Kleneman, Slade, Stanley, Pennie, Reilly, Atchison et al., 1995), but this is not the case. Backs are designed for movement, so patients should continue performing regular daily activities and, with a physician’s approval, may participate in low-impact exercise without strain (e.g., walking, swimming, riding an exercise bike, or social dancing).

Yoga is one suitable alternative. A recent pilot study (Galatino, Bzdewka, Eissler-Russo, Holbrook, Mogck, Geigle et al., 2004) examined the effects of a six-week modified hatha yoga protocol on patients with chronic low back pain. Merging activity with meditation in a motivational group led to positive results. Patients had both increased balance and flexibility and decreased disability and depression.

An important factor to recognize in this equation is that a patient’s beliefs about back pain directly affect self-efficacy. A study by Gross and Battie (2005) found that various factors influenced injured worker performance on functional capacity evaluations, including perceptions of disability. Patients will be more apt to take a constructive role in their recovery if they understand that despite some slight discomfort, they can remain active without harming their backs.

A public campaign in Australia showed that messages about activity as key to a successful recovery from back pain could significantly affect the number of back-pain claims and the duration of back pain. The Australian results

Staying active is vital to a faster recovery from low back pain.
showed considerable improvement in the attitudes to activity in both the community and health-care professionals, as well as a large reduction in workers’ compensation back-pain claims and the duration of back pain (Buchbinder & Jolley, 2005).

**Back Pain Initiatives at the Alberta WCB**

Building on these results, the Alberta Workers’ Compensation Board (WCB) has partnered with Alberta Human Resources and Employment (Workplace Health and Safety), the Alberta Construction Safety Association, Alberta Hotel Safety Association, and Manufacturers’ Health and Safety Association to kick-start a Back Education Project.

This project includes several initiatives (i.e., the Back Injury Model and Back@it campaign) that promote faster recoveries for workers with low back pain through early medical consultations and participation in their own care by remaining active. These initiatives promote cost-effective prevention and management and improve treatment and rehabilitation.

In 2004, claims for back pain made up more than 26% of all lost-time work claims reported to the Alberta WCB. This figure equates to almost 9,000 claims that required time off of work in 2004 at a staggering cost of almost $14 million (Workers’ Compensation Board, Alberta, 2005).

Knowing that each day away from the job reduces the likelihood of a successful return to work, the WCB piloted a Back Injury Model in 2003 to improve medical treatment through a one-on-one medical consultation. Based on the pilot’s success, the WCB implemented a complete rollout of the pilot. This early, targeted consultation has contributed to 5.8% more injured people returning to work within 84 days, compared to those with similar back claims who lacked this early support.

“The opportunity to see workers soon after they are injured greatly increases our chances of a quicker recovery,” says Dr. Lyle Davis, orthopaedic specialist and medical consultant for the WCB. “Using this type of approach is resulting in better outcomes.”

The WCB is urging injured workers to get Back@it when experiencing back pain. This new education campaign, involving television, radio, and posters, informs Albertans about how to treat low back pain.

“The goal of the campaign is to de-medicalize back pain—to make people realize back pain isn’t a crisis that requires quitting work,” says Dr. Doug Gross, a rehabilitation professor at the University of Alberta.

Low back pain disrupts the lives of those suffering from it. In addition, this condition places a huge burden on health-care and workers’ compensation systems. Education campaigns and programs such as those at the WCB are vital to changing the beliefs both of health-care practitioners and the public. People with low back pain should be encouraged to stay active.

Through the collaborative efforts of the health-care community, public, and organizations like the WCB, we can work to better the prevention, treatment, and management of low back pain and increase the quality of life of those who experience it.

For more information about Back@it, go to www.wcb.ab.ca/back@it.
References


WELLSPRING EDITORIAL ADVISORY COMMITTEE

Claudia Emes, University of Calgary
Greg Hart, Beyond Compliance, Inc.
John Valentine, Grant MacEwan College
Maria Tan, Canadian Health Network
Judy Newman and Kathy Garnsworthy, Alberta Centre for Active Living

The Alberta Centre for Active Living is the CHN Active Living Affiliate. www.canadian-health-network.ca

Mission Statement of the Alberta Centre for Active Living

Working with practitioners, organizations, and communities to improve the health and quality of life of Albertans through physical activity.

IF YOU HAVE ANY SUGGESTIONS OR QUESTIONS, WE’D LIKE TO HEAR FROM YOU.

Alberta Centre for Active Living
Percy Page Centre
3rd Floor, 11759 Groat Road
Edmonton, AB T5M 3K6
Phone: 780.427.6949 or 1.800.661.4551 (toll-free in Alberta)
Fax: 780.455.2092
Web site: www.centre4activeliving.ca
E-mail: active.living@ualberta.ca

STAFF

Director: Judith Moodie
Research: Ron Plotnikoff, PhD, Tanya Berry, PhD
Education Coordinator: Judy Newman
Older Adult Coordinator: Jennifer Dechaine
Communications and Marketing Coordinator: Kathy Garnsworthy
Centre Coordinator: Betty Lee
Resource Coordinator: Rosanne Prinsen
Financial Administrator: Carol Knull
Administrative Assistant: Margaret Burns
Office Assistant: Gilda LaGrange
Canadian Health Network: Pauline Poon, Maria Tan, Sally Press
Health in Action Project: Karena Apps Eccles, Gwen Farnsworth

WellSpring is published six times/year.
ISSN 1187-7472