

# Can your personality affect your back pain?

It's as common as a cold, but now experts say that, if doctors don't suss out your 'pain personality', your lower back pain could become a real problem

One-in-14 of us visit the GP every year complaining of lower back pain and 80% will experience back pain at some point in our lives. The pain can be a consequence of everything from wear and tear, poor posture or lifting a heavy load to wearing the wrong shoes or even performing an everyday movement. Most back pain sorts itself out in a short time but, for some of us, it can become an agonising long-term problem.

A recent survey by pharmaceutical giant Pfizer found that 45% of people with back pain said it made them feel low, while 19% admitted it had a negative effect on their sex lives.

## Personality counts

Now experts say that back pain needn't be so bad for thousands. Why? Because your 'pain personality' (or how you perceive your pain and how frightened you are of it) could be the biggest determining factor in how debilitating it becomes – or how quickly you recover.

'It's really important to keep moving your back as normally as possible while it heals itself,' says Dr Ollie Hart, a Sheffield GP with a special interest in chronic pain management. 'But if you're anxious, terrified of moving and you don't receive adequate support to help you conquer your fears, it can lead to long-term chronic pain. This is where pain appears to increase with time as the nervous system becomes more sensitive to it.'

'How you think and feel about your back pain can sometimes make it feel worse'

SUFFERING FROM BACK PAIN?



Check out our symptom sorter. Scan this code with your smartphone (go to page 3 to find out how).



FEATURE: KIM JONES. PHOTO: PLAIN PICTURE

## Getting the right treatment

'Sadly, back pain is often poorly treated by the medical profession,' says Tom Crisp, Consultant Sports Physician at The BUPA Centre in Barbican, London. 'I see patients who have struggled for years having simply been prescribed painkillers by their GP, then told to go away.'

Dr Hart agrees. 'Some GPs think there's not much they can do for many patients with lower back pain and so get disinterested.' He would like to see GPs use the 'bio-psycho-social' model for dealing with back pain. This recognises that as well as the biological causes (heavy lifting, for example) and social factors (how family and workplace pressures influence the problem), there are also psychological factors at play – how you think and feel about your back pain can sometimes make it feel worse.

## Flagging it up

'After ruling out the 1% of serious causes (cancer, infection or fracture, for example), I look for so-called "yellow flags",' says Dr Hart. 'These are early indicators that certain patients may not cope well psychologically and that it may therefore persist and get worse.'

'I'd like to see GPs look for these flags by using the Start Back tool, developed by Keele University. It's a simple questionnaire that asks patients about their pain, and from that we can determine whether they are at low, medium or high risk of coping badly and going on to develop chronic back pain.'

You can access the tool yourself at sheffieldbackpain.com, a site developed by Dr Hart to assist all patients with back pain. Patients at low risk of coping badly go away from their GP with suggested exercises and activity plans, together with pain relief to help to keep them moving.

'Some patients may think "masking" the pain is wrong, but it's actually important as it means you can keep moving as normally as possible,' says Dr Hart.

Those at medium risk may be prescribed physiotherapy, osteopathy or acupuncture if needed, while those at high risk will need extra help with physiotherapists who are trained not only to help patients keep mobile, but also to instil confidence in them that they can do this without further harming their backs.

## Keep on moving

'It's all about demystifying back pain,' says Dr Hart. 'Letting patients know that it really is a common occurrence and that, by moving around and keeping active, they are helping their back as it heals, rather than hindering it.'

A study at Warwick University bears out this belief. Back-pain patients who were given cognitive behavioural therapy (CBT) – which helps overcome negative thoughts – showed twice as much improvement in their pain as those who received a treatment such as physiotherapy, acupuncture or osteopathy alone.

## Preventative measures

The other piece of good news is that you can do a lot to prevent getting back pain in the first place, says Karen Ford, Musculoskeletal Physiotherapist at the Holy Cross Hospital, Surrey (holycross.org.uk). 'Moving helps to lubricate your joints, so try to keep fit – the more you exercise, the fitter your muscles are and the better they'll be at supporting you and your spine,' she says.

'Avoid twisting and bending movements – if you need to get something out of the washing machine it's better to be kneeling directly in front of it. Don't smoke, as there's evidence to link smoking and back pain, as it

affects the hydration of the spinal discs. And eat well nutritionally, drink lots of water and get plenty of sleep – they all help to keep the discs healthy and help them repair quickly when damaged.

'If you work in a sedentary job, it's important that your desk is set up appropriately so you can work in a comfortable position, and take adequate breaks to get up, to move and to change your position.'

Lastly, try to curb your stress, too. 'It can increase the tension in muscles, which may put you at risk of injury,' says Karen. 'Try to find moments to relax or stretch out the tensions of the day. Regular Pilates classes are an ideal way to do this.'

## Expert tip

A lot of back troubles are caused by poor posture when sitting at a desk for long periods. To prevent back pain at the computer, sit on your bum not on your spine,' says Sarah Chatwin, an Alexander Technique practitioner. 'First, sit on your hands and find your sit bones – they are bony rockers at the base of your pelvis. Make sure you sit up on these and don't slump back onto your tailbone.'

## Women like you

### 'I lost confidence in my body'



**Nikki Evans, 49, from High Wycombe says, 'I hurt my back over 20 years ago when reaching out to move a box. I coped with mild pain for years, even doing exercise regularly, but**

**it got much worse in 2009 and I underwent a lumbar discectomy to remove part of a disc that was aggravating the pain. I had six months of physiotherapy, but after that I lost all confidence in myself. I was reluctant to exercise and things like washing the car and housework became a frightening challenge – I'd either think I simply couldn't do things**

**or gave up half way through. Stress at work didn't help, either; I felt like a stiff old woman most of the time. A friend recommended I try Back4Good Pilates – special classes designed to strengthen the back. My GP was all for it so, nervously, I signed up with a local practitioner. She gave me special, gentle, targeted exercises to do and, inspired with a new-found confidence, I began to move more freely. After a month, I had my first pain-free day in years. I still get niggles, but I have got my life back thanks to exercising again. I'd tell anyone with back pain to try to keep moving.**

♦ Visit [www.back4good.eu](http://www.back4good.eu) for details.