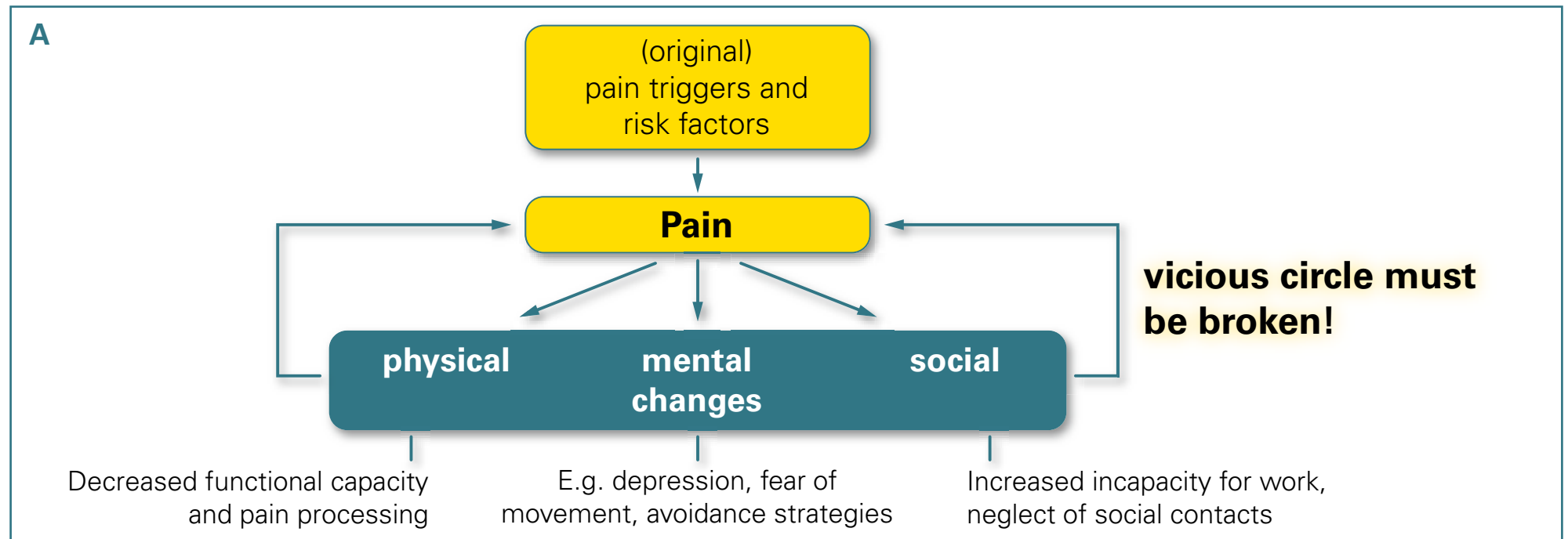
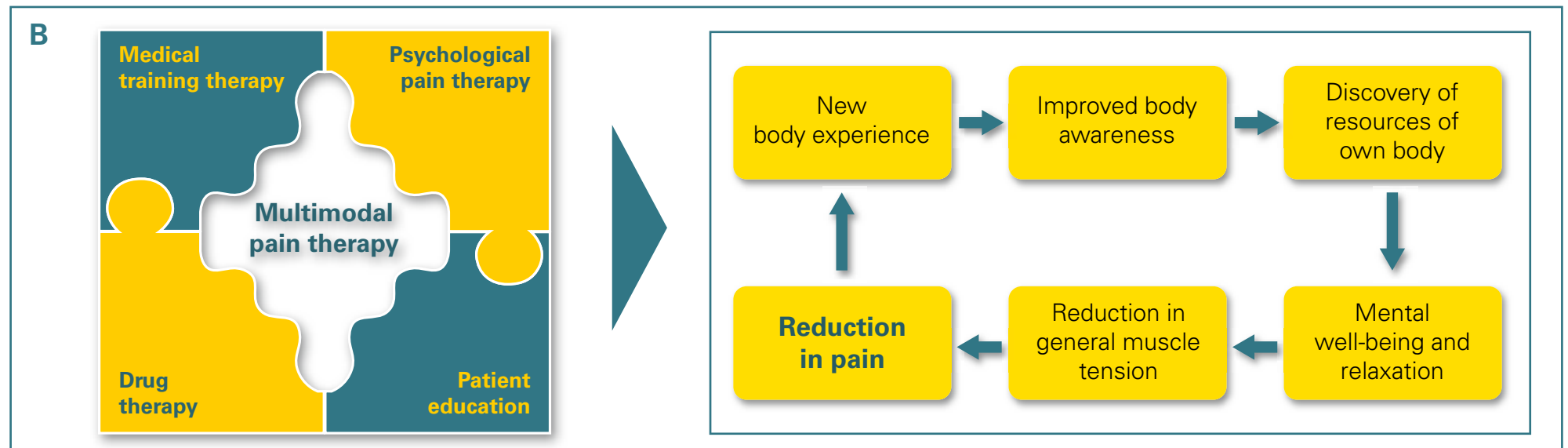


Chronic back pain – the vicious circle disease

Development [1]



Treatment [2]



Chronic back pain – the vicious circle disease

A Development [1]

Chronic pain is disconnected from the original pain trigger, i.e. a separate disease arises with a vicious circle in which the consequences of pain lead to new causes of pain.

Examples of the physical consequences of pain are declining functional capacity and central sensitisation (see Section 8), as a result of which the pain becomes independent of the original cause.

However, pain-related sleep disturbances and weight gain can themselves contribute to maintenance of the pain.

Pain also commonly leads to psychological changes (fear of movement, worrying about the future, decreased pleasure in life and self-esteem, depression). These changes can lead to social withdrawal and reinforce the perception of pain.

If incapacity for work occurs as a result of pain, the consequence is a further loss of contacts and independence, and often financial worries. The more activities and tasks that are given up because of the pain, the greater the focus on pain.

B Treatment [2, 3, 4]

The aim of treatment is to break this vicious circle.

Multimodal pain therapy is the most effective form of treatment in chronic back pain.

It consists of simultaneous, closely coordinated treatment by therapists of various specialties (medical treatment, provision of information and education based on a biopsychosocial pain model, physical activity, psychotherapeutic treatment measures and occupational therapy).

The aims of multimodal pain therapy are:

- pain reduction, not freedom from pain,
- change in pain experience,
- learning and adoption of active coping strategies,
- functional improvement,
- less demand on the healthcare system,
- return to work,
- improved quality of life.

[1] Wadell G. The Back Pain Revolution. (1998) Edinburgh: Churchill Livingstone.

[2] Airaksinen O et al. Eur Spine J (2006) 15(Suppl 2): S192- S300.

[3] Chou R, Hoyt Huffman L. Ann Intern Med (2007) 147: 505- 514.

[4] National Institute for Health and Clinical Excellence (NICE). NICE clinical guideline 88. Low back pain: Early management of persistent non-specific low back pain. 2009. Available at: <http://www.nice.org.uk/nicemedia/live/11887/44343/44343.pdf>. Accessed March 2013.