

# Chronic back pain in young man

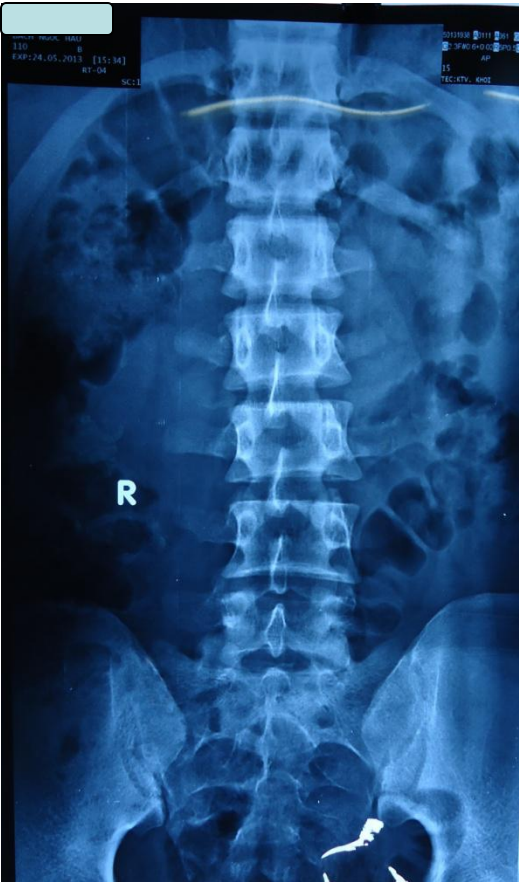
Q: Hồ Quang Hưng

A: TOM

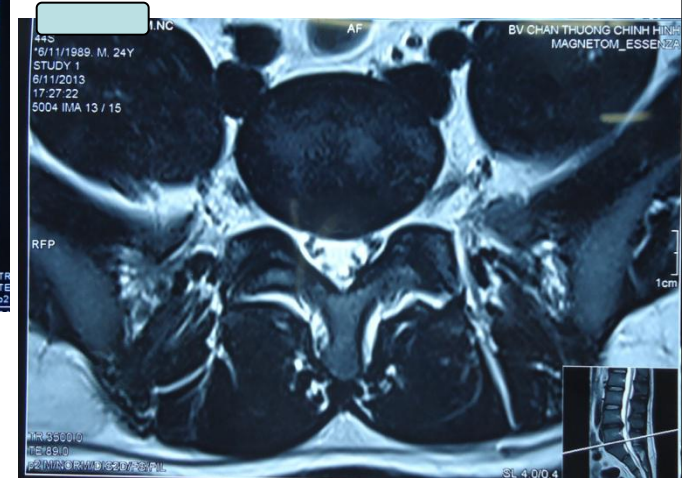
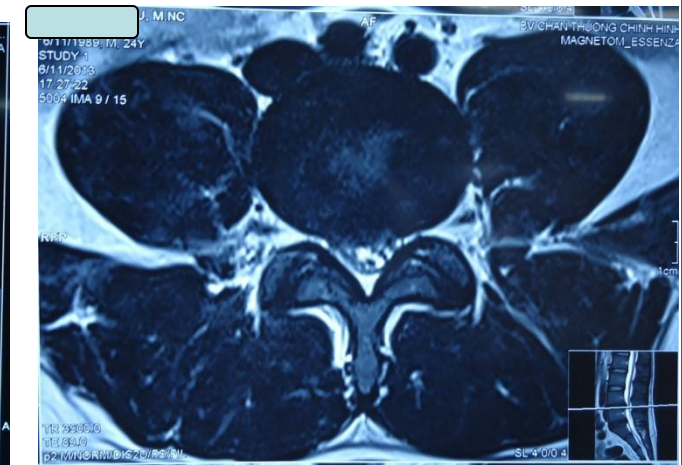
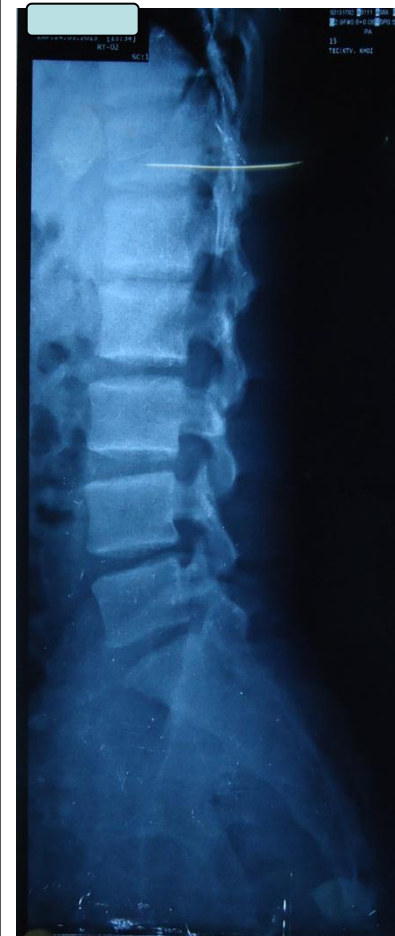
28/6/2013

- B.N.H, male, 1982, student
- One-year- history of low back pain (LBP) and pain on right waist, aggravated while squatting at the early morning or on extension
- On examination at 1<sup>st</sup> visit, no specific signs, NRPS 6/10 → 4 exercises: rotation, push-up, arching, superman
- 2<sup>nd</sup> visit (1w after), NRPS 4/10
- 3<sup>rd</sup> visit (1w after), NRPS 0/10

# Radiograph (1<sup>st</sup> visit): suspected discopathy at L4-L5, L5-S1



# MRI (2<sup>nd</sup> visit): dehydrated, herniated disc at L4-L5, L5-S1



## Q1: What are the common causes of chronic LBP in young patients?

The most common causes of chronic LBP in young patients are participation in specific sports (gymnastics, power lifting), heavy occupational stress (manual laborer, PT's) and more recently the adoption of poor postures while watching television or playing video games. Common presentations include spondylolisthesis, lumbar instability and disc protrusion syndromes.

## Q2: Why would you search for specific postures that cause pain?

Searching for a particular posture that aggravates pain can tell you a lot about the origin of the pain and aid in diagnosis. For example, in disc protrusion syndromes flexion activities often aggravate pain, but in patients with facet joint syndrome, extension activities aggravate the pain. Therefore, knowing which postures aggravate pain can aid in diagnostic processes.

## Q3: How would you explain the pain in his waist?

A pain radiating to one side of the back may be caused by a herniation of the disc on that side, causing irritation of the nerve roots and giving the sensation of pain throughout the waist. It could be caused by any process that irritates the nerves on that side – slip of the vertebrae, degeneration of the vertebral body, osteophyte formation.

**Q4: At first visit, the diagnosis is non-specific LBP. After having an MRI at second visit, does the attitude of treatment change?**

It depends on the findings of the MRI scan. If the results reveal something previously unaccounted for (e.g. cancer), or perhaps reveal nothing at all (yellow flag – court case, biopsychosocial) then treatment attitudes will change. However, the principles of core strengthening to relieve pain remain the same, and they are used to treat many lower back conditions.

Q5: At 1<sup>st</sup> visit, NRPS is 6/10, at 2<sup>nd</sup> is 4/10, at 3<sup>rd</sup> is 0/10. Should we increase the amount of exercise?

The decrease in pain suggests that our program of core strengthening has succeeded in relieving this patient's pain. My opinion would be that we do not increase the frequency or intensity of his exercise, but rather ask him to maintain it through regular moderate exercise. We should all exercise our core muscles – regardless of whether we have experienced back pain before!

## Q5: What sports should the patient avoid, and what sports are appropriate?

This largely depends on the patient's history, condition and previous activity levels. It also depends on the resolution of symptoms and irritability of the pain.

Different conditions may have different 'contraindications' (e.g. lumbar instability and high impact sports). As a general rule, I would advise on the continuation of any sports previously played, unless pain and symptoms persist.

# Thank You.

- My email address is [spillat@tcd.ie](mailto:spillat@tcd.ie)
- Email me with any questions you may have, and I will do my best to answer them!