Back Pain and Emotional Distress
Four out of five adults will experience an episode of significant back pain sometime during their life. Not surprisingly, back pain is one of the problems most often seen by health care providers. Fortunately, the majority of patients with back pain will successfully recover and return to normal social and work activities within 2-4 months, often without treatment.

In 1979, the major professional organization specializing in pain—the International Association for the Study of Pain—introduced the most widely used definition of pain: “an unpleasant sensory and emotional experience associated with actual or potential damage, or described in terms of such damage.” This pain is a complex experience that includes both physical and psychological factors.

It is quite normal to have emotional reactions to acute back pain. These reactions can include fear, anxiety and worry about what the pain means, how long it will last and how much it will interfere with activities of daily living. Though it’s normal to avoid activity that causes pain, complete inactivity is ill-advised. Rather, it is important to take an active role in managing pain by participating in physician-guided activities.
There are now accepted clinical guidelines for management of acute back pain (by definition, within the first 10 weeks of pain) and its associated stress. These guidelines emphasize:

- Addressing patients’ fears and misconceptions about back pain

- Providing a reasonable explanation for the pain as well as an expected outcome

- Empowering the patient to resume/restore normal activities of daily living through simple prescribed exercises and graded activity.

- This should be supplemented, when necessary, by complementary treatments such as analgesic medications, manual therapy and/or physical therapy for symptomatic relief.
In order to minimize emotional distress, it is important to ask your health care provider questions about your back pain so you do not leave the office uncertain or anxious. Understanding your pain will help decrease your anxiety. Keep in mind that, if your pain lasts more than 2-4 months (which is usually considered a normal healing time for most back problems), your condition may become chronic. Chronic pain can be associated with even greater psychological distress.

During the acute period, feelings of helplessness, stress and even anger towards your health care provider (for not relieving your pain) may occur. In order to help allay this distress, you need to be sure that your health care provider is attending to all of your important physical and psychological needs. You and your health care provider should do the following:

- You should express your concerns about your pain symptoms. It is normal for patients to fear serious disease or disability. Be certain that your health care provider addresses your fears through appropriate medical evaluation and explanation.

- Be certain that your health care provider fully explains what is being looked for or ruled out during these evaluations and tests, and make sure you get the results in terms you can understand.

- If your health care provider recommends staying active, be certain that he or she discusses with you how to stay active safely.
Inform your health care provider of any functional difficulties your pain is causing (eg, problems with bending, lifting, etc.) and identify with him or her ways to overcome these difficulties. Also have your health care provider address any problems you have performing your normal work activities.

The information you receive about your diagnosis and prognosis should be clear to you. Make sure you understand the natural progression of back pain, what “improvement” can be expected and when it is likely to occur.

Whenever any recommendations are made, be sure that you or your health care provider writes them down so you can review them after leaving the office.

All of these recommendations are intended to reduce the emotional concerns and stress most patients experience with pain. If you are not satisfied with the treatment and explanations you receive, consider getting a second opinion from another health care provider. Anxiety and stress can actually increase your pain and reduce your pain coping skills.
It is important to remember that there is a dynamic relationship between your state of mind (e.g., stress level) and your physical condition (e.g., pain). Pain can cause stress, which causes more pain, which causes more stress, and so on. The more chronic this vicious cycle becomes, the more likely your emotional distress will increase. This cycle can be very difficult to break.

Emotional suffering can lead to loss of sleep, inability to work as well as feeling irritable and helpless about what can be done. You may feel desperate and attempt to relieve the pain at any cost including the use of invasive medical procedures. Although invasive approaches may be beneficial for some conditions (such as a herniated disc), often they can be avoided if stress and pain are managed at an early point in time.

Education and reassurance from your health care provider goes a long way in preventing or relieving a great deal of stress and anxiety. You also need to be proactive about your condition and treatment. These naturally occurring feelings of anxiety and stress may cloud your judgment. Your goal is to avoid getting into a chronic pain cycle. Reassurance from your health care provider that the pain is only temporary can go a long way to help you avoid becoming preoccupied with pain, and prevent unnecessary worry about the symptoms.
Fortunately, there are a number of psychological therapies that have been successfully used in the management of pain and anxiety. These include stress management, relaxation training, biofeedback, hypnosis and cognitive-behavioral therapy (a method to reduce feelings of doom and helplessness). There are also medications available to help with sleep problems, anxiety and depression. Such comprehensive pain management programs, when integrated with your medical care, have proven to be quite successful.

Your health care provider can refer you to a psychological management program if it is appropriate. Participation in such a program does not mean the pain is “all in your head” – it is meant to teach you methods to cope with and control the pain. Remember, pain is a complex experience that includes a close interaction of physical and psychological factors! But together, you and your health care provider can help you manage and overcome your pain.