

Joint Pain Advisory Clinic (JPAC)

Spine Pain (Back and Neck)





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Joint Pain Advisory Clinic for Back and Neck Pain

The Joint Pain Advisory Clinic, or JPAC for short, is our way of getting you to the right clinician, at the right time, first time. For more information we recommend you watch our JPAC video on our website.

The JPAC makes use of the latest research for you to learn about your injury, explore self-care techniques and discuss the problems which may be contributing to your pain.

This booklet is designed specifically for those people suffering from back or neck pain.

Pain is unique and individual to you. During the JPAC you will meet with others who are experiencing similar problems which can help in supporting you during your ongoing treatment. For us to understand your experience to date we suggest you work through this booklet before you come to the JPAC.

Your Back and Neck Pain

Status on back or neck pain (Circle, tick or write)	
Typical age range	Less than 18 18-40 and over
Location of pain	Lower back neck arm leg groin head
Type of pain	Sharp shooting stabbing aching throbbing
Frequency of pain	Under 1 hour 1-4 hours a day 4-12 hours constant
Daily pain pattern	Morning pain Y/N Pain in day Y/N Pain in evening Y/N Pain through night Y/N
Pain	No pain 0 1 2 3 4 5 6 7 8 9 10 Worst pain
Associated symptoms	Stiffness weakness
What makes it feel worse?	Sitting in a chair bending walking lifting
What makes it feel better?	Rest ice heat paracetamol ibuprofen sitting lying walking

In our experience patients are better equipped to fully answer questions regarding their problem during their second or third session. The time between sessions is thought to help clarify the answers to our questions.

To guide your treatment at the time of your JPAC, it is important that you are able to answer some questions. The following section will allow you to work through some of these questions at your own pace, prior to your JPAC.

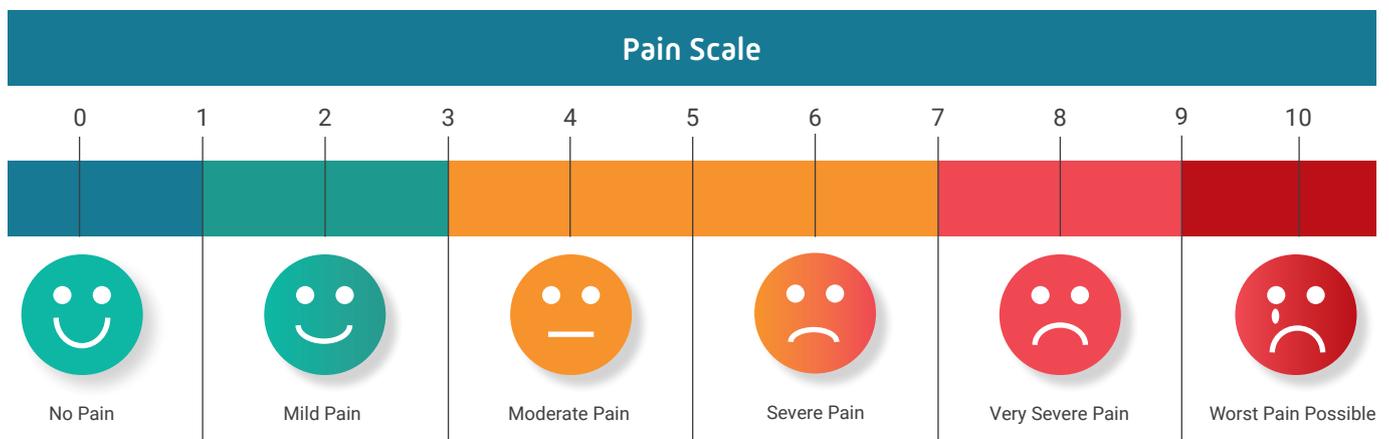
What brings on your pain or makes your back or neck feel worse?

It is understandable to be cautious or avoid certain movements, positions and activities when you are in pain. Understanding what irritates your back or neck enables you to modify your day to day activities.

Write down in the box all the things which aggravate your back or neck.

What hurts	For how long	Pain Scale (Use scale below)	Does the pain stop if you stop
i.e. Sitting	30 minutes	4/10	Yes

This list is a great way to measure recovery as you review it in the coming weeks.



What makes your back and neck feel better?

The obvious advice from this question is 'do more'. If you know of something which makes your back or neck feel better, then we encourage you to continue with this. Write down what does make your back or neck feel better.

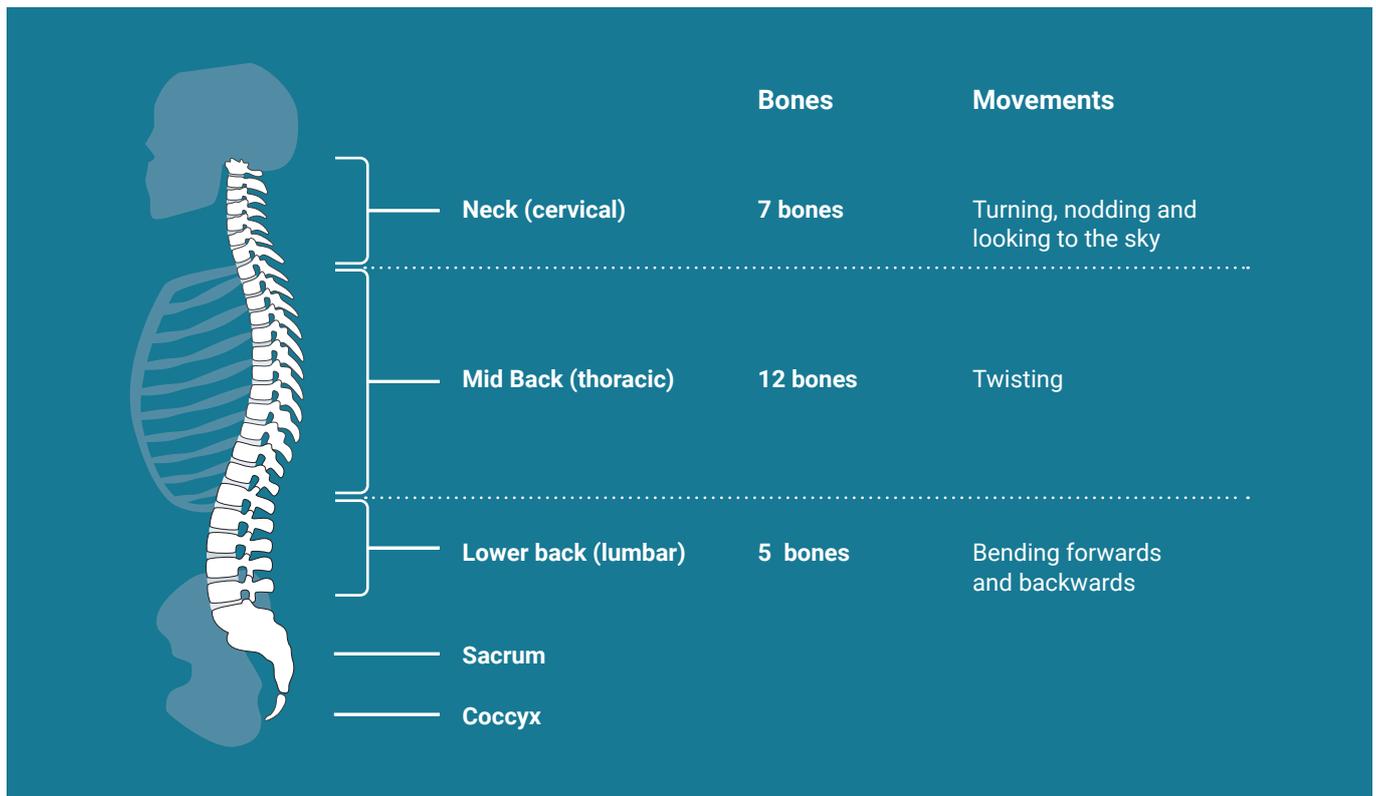
What helps?	For how long?	How often can you do this?
i.e. Swimming	Helps for 4 hours	Once a day

Next time you are in pain you could use this as a reference to make sure you are doing everything you can to reduce your pain.

Understanding the Back and Neck

At Healthshare we encourage you to be curious about your back or neck pain and what structures within your back or neck might be involved. The first part in exploring your back or neck complaint is to understand the basic workings of the spine.

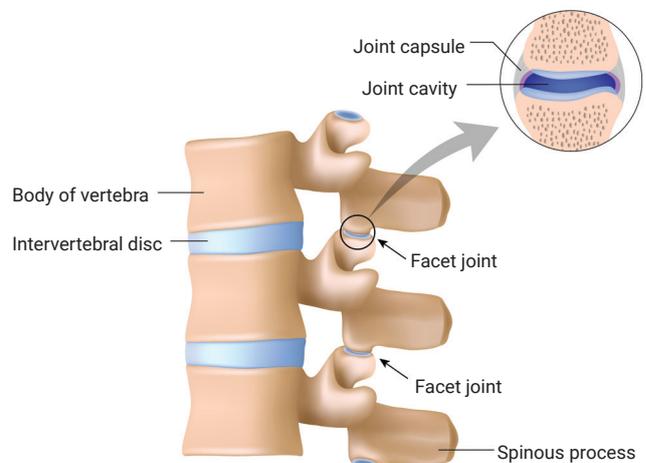
Bones



Joints and Discs

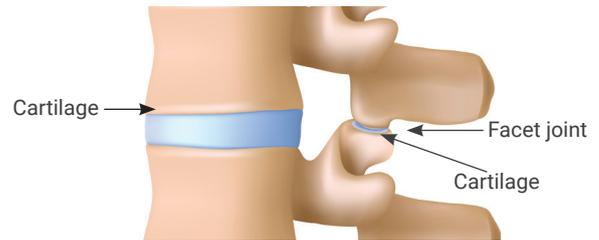
The bones (vertebrae) of the back and neck stack on top of each other to form the spinal column.

Between the vertebrae sits a shock absorbing disc and the vertebrae are joined together via 2 facet joints.



Cartilage

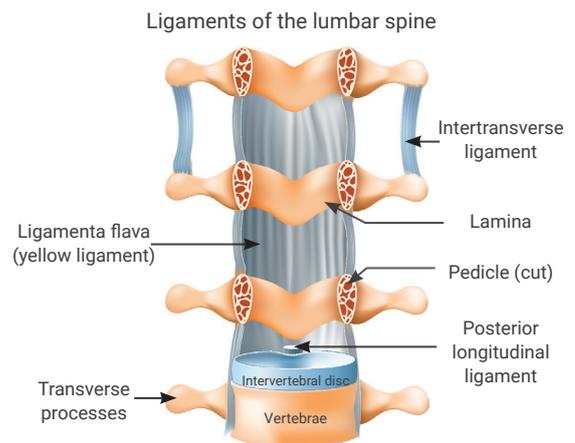
The surface of the joints are covered with a smooth, hard coating called cartilage. This allows the two surfaces to glide on top of each other with very little friction and create movement.



Ligaments

Ligaments join bone to bone and act as 'guide-ropes' for our joints. They stretch enough to allow movement to occur within a joint but excessive movement is prevented as the ligaments stretches further and further.

The picture (to the side) shows the how the ligaments cover the joints of the spine.



Muscle and Tendons

The structures mentioned above should be thought of as the mechanical parts that allow movement within your back and neck. In order to actively produce movement, we require the help of muscles and tendons.

Tendons are the strong, white rope-like structures that anchor each end of a muscle to a bone. Movement is created at a joint when a muscle pulls the bones of the joint closer together.

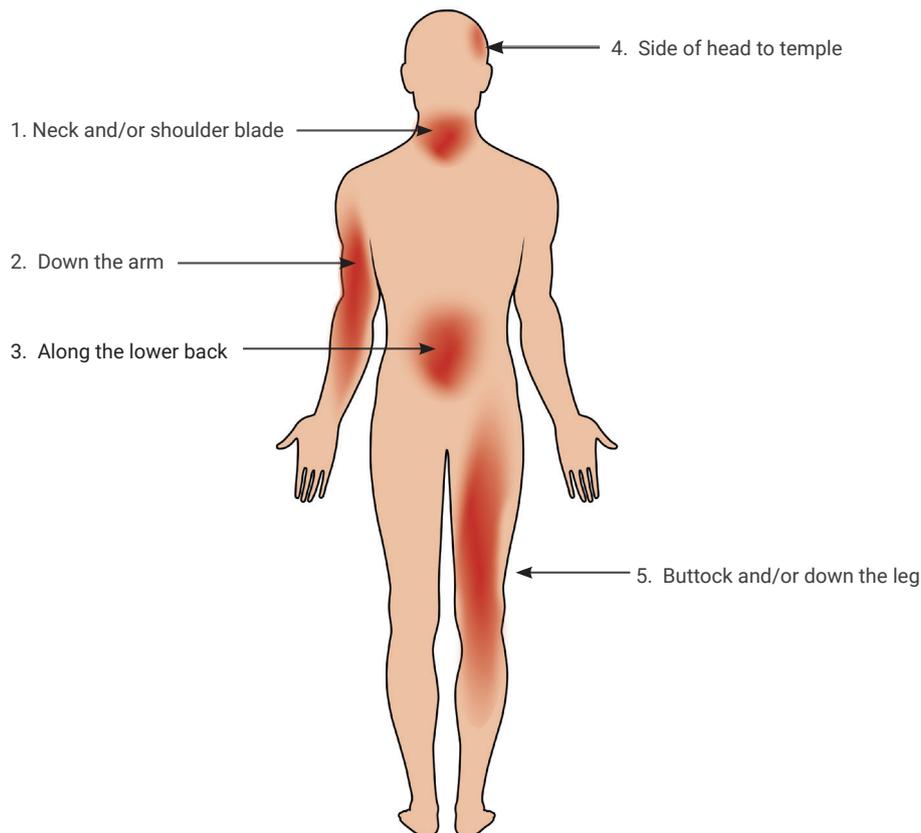
The back and neck has many layers of muscles that work together to create movement and support. It is important that these muscles have the adequate strength and endurance needed for your daily activities and exercise.



Pain

Pain is complex and different for every person. Your back and neck pain is likely caused by an issue with the bone, cartilage, ligament, muscles, tendon or a combination of these structures.

Where do you get your back or neck pain?



Understanding these pain patterns allows us to start building a picture of what your back or neck problem is and what structures could be affected.

Take home message



1. Back and neck pain is a very common problem.
2. Most back and neck pain will improve with time, if it is managed appropriately.
3. In the meantime it may help to modify your activities and take pain relief.
4. Exercises will also help your back or neck pain get better.
5. It is good to remain active while you wait for your back or neck to improve.



If your back or neck does not improve as expected we will be able to discuss other treatment options with you at the 8 week follow up appointment.

Acute Back and Neck Pain

Acute back pain is very common and normally improves within a few weeks to months.

Most back pain is known as ‘non-specific’ or ‘mechanical’ as there is no obvious cause or is associated with pain from spinal joints, bones or soft tissues.

Back pain can be caused by many factors, but it is rarely anything serious and as a result responds well to physiotherapy and keeping active.

Typical age range	18-40
Location of pain	Across lower back or neck
Type of pain	Ache, intense, sharp
Daily pain pattern	Activity dependent
Pain levels	Medium
Associated symptoms	Stiffness, headaches
What makes it feel worse?	Bending, standing, walking, desk work
What makes it feel better?	Gentle movement, heat, ice, exercise



Back and Neck (osteo) arthritis

From the moment we are born our bones, ligaments, muscles, tendons and cartilage adapt in a response to what we ask of our bodies. This process can simply be thought of as one of “wear and repair”.

The process of ‘wear and repair’ allows the cartilage within our joints to adapt to our activity levels, which change throughout our lifetime. This process is imperative for our development and for much of our life will cause no pain.

Osteoarthritis occurs when the rate of cartilage ‘repair’ is surpassed by the irreversible rate of ‘wear’, over a prolonged period. This results in the loss of some of the qualities that make cartilage smooth and hard, which affect how the back and neck functions.

Nevertheless, osteoarthritis only describes the process of prolonged ‘wear and repair’. It is not always associated with pain or symptoms such as aching, swelling and stiffness.

If you are suffering from pain associated with osteoarthritis there are many options available to you to break the cycle of pain.

Typical age range	40+
Location of pain	Across lower back or neck
Type of pain	Dull, aching, catching
Daily pain pattern	Worst first 30 minutes
Pain levels	Low-medium
Associated symptoms	Stiffness, headaches
What makes it feel worse?	Bending, standing, walking, desk work
What makes it feel better?	Gentle movement, heat, ice, exercise

Nerve related Back and Neck Pain

Back related leg pain

Pain down the back of the leg is often called sciatica. For many reasons the sciatic nerve can become irritated and sends pain from the back of your hip towards your foot.

As well as a shooting or burning pain you may experience tingling, pins and needles, numbness or weakness. Your pain may be worse when coughing, sneezing or straining.

Reassuringly, this pain usually gets better in a few weeks but in some cases will last longer.

Neck and arm pain

This is the upper body equivalent to sciatica and involves the nerves in your arm.

As well as a shooting or burning pain you may experience tingling, pins and needles, numbness or weakness. Your pain may be worse when moving, coughing, sneezing or taking a deep breath.

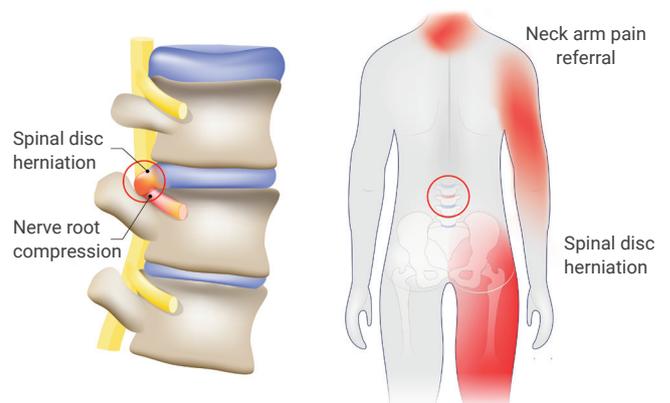
You must tell us if you lose strength in your foot or hand. For example your foot may start to flap onto the ground while walking or you start to drop things.

Spinal Stenosis

At each level of our spine we have openings to allow nerves to exit the spine. It is quite normal for these holes to narrow as we age. This problem is most commonly seen in people over the age of 60 years and can cause pain in both legs, numbness, pins and needles or weakness.

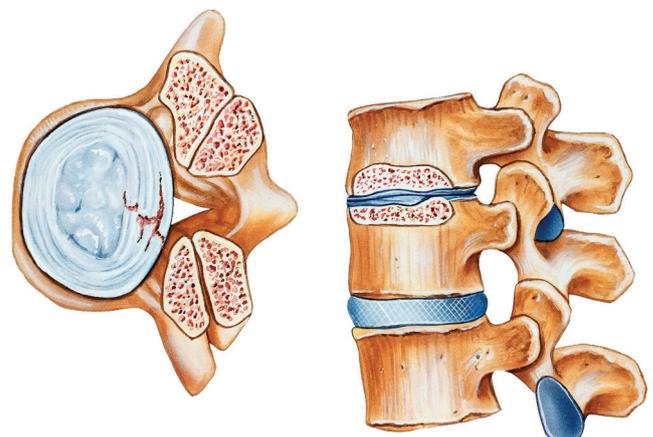
These symptoms are intermittent and worse when walking or standing still for a period of time. The symptoms tend to build the longer you are upright and are typically relieved by sitting or bending forwards

Typical age range	18-40
Location of pain	Across lower back or neck, arm and leg
Type of pain	Sharp, intense, shooting, burning
Daily pain pattern	Activity dependent
Pain levels	Medium-high
Associated symptoms	Changes in walking or moving
What makes it feel worse?	Bending, standing, walking, desk work
What makes it feel better?	Gentle movement, heat, ice, exercise



Herniated disc in the lumbar spine cause nerve pain in the lower extremity

Typical age range	60+
Location of pain	Across lower back or neck and into arms or legs
Type of pain	Ache, burning
Daily pain pattern	Activity dependent
Pain levels	Low-medium
Associated symptoms	Heaviness of legs, pins and needles, numbness, changes in walking, brief episodes of weakness
What makes it feel worse?	Standing, walking
What makes it feel better?	Bending, gentle movement, heat, exercise



Persistent Back and Neck Pain

Sometimes back and neck pain can last longer than expected or become recurrent in nature. In this situation it is likely you will continue to get pain even though there is no longer any problem with your back or neck. This happens when other issues start to block your route to recovery. Some of these are discussed below:

Reduced physical activity

People stop their physical activity secondary to pain and due to the fear of making things worse. But keeping active is important to improve back pain. Physical activity is the miracle cure we've always had, but for too long we've neglected to take our recommended dose.



Poor mental health

Sometimes people also become concerned about the cause of the pain and worry about damaging things more. This causes the nerves to become even more sensitive and the pain spreads to other body parts.



Social interaction

How you interact and the frequency you meet with other people has an effect on your mood, outlook and your pain. Maintaining healthy relationships and building a supportive network will provide you with the best environment to manage your pain.



Work related issues

Increased work strain, physical demand from work, lack of social support at work and work related disputes can also increase the level of pain experienced by people.



Sleep

People with persistent spinal pain often find that they have problems sleeping. You might find it difficult to get off to sleep, or find that you wake up during the night because of your pain. Lack of sleep can increase your stress levels, which can make the pain worse, which in turn, makes it more difficult to sleep.



Do I need a scan?

Within the NHS, scans and diagnostic images are rarely used in the diagnosis and treatment of your back or neck pain. X-ray, ultrasound and MRI scans have been shown to be poor at diagnosing many problems including osteoarthritis, cartilage issues, strains or tendon problems. What you tell us is more important for guiding your treatment.

Physiotherapists at Healthshare use questions, movements and face-to-face tests to understand what is causing your back or neck pain and the vast majority of pain improves with exercise and changes to activity and lifestyle.

What if my pain doesn't improve?

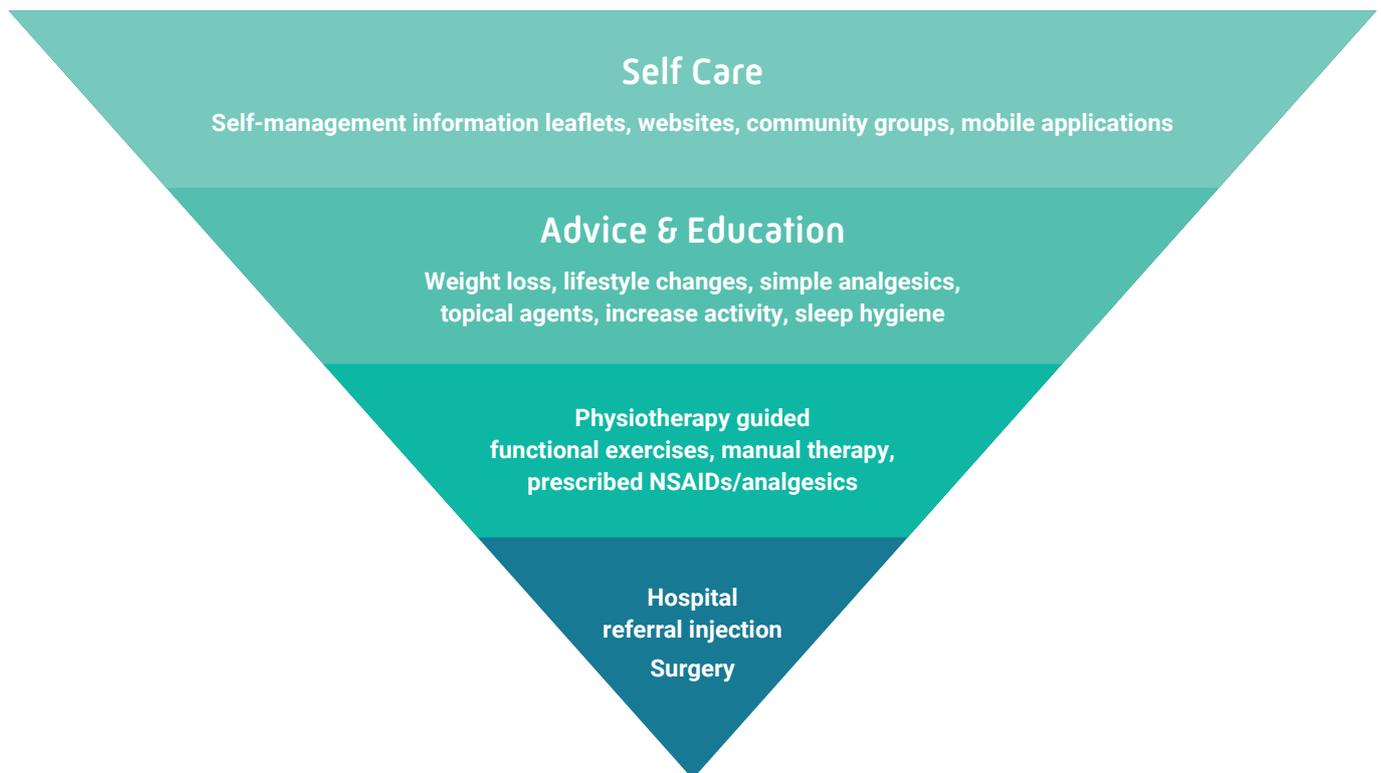
If you have not benefited from treatment at Healthshare you may be referred to a specialist to discuss your options. They will assess whether the information from a scan outweighs the associated risks of having a scan, such as exposure to radiation.

Therefore, a scan will only be requested if it is believed the results of the scan would alter the treatment offered to you. For the majority of patients it will not - which is why they tend to be offered once all conservative treatment options are exhausted.



Start to feel better with these options

When it comes to your pain, you are in control. The image below shows the options available to you in the recommended order you should follow. In order to find the right treatment, you must progress from top bottom.



Where shall I start?

Initial management includes:

1. **Education** - Understanding your pain is key.
2. **Taking appropriate pain relief** will help to keep you active which is key to achieving relief from pain.
3. **Physiotherapy** (Exercises, self help advice and psychological therapy).
4. **Changing habits** - alter the pain provoking activities to reduce pain.
5. **Maximising physical activity, fitness, maintain healthy body weight, addressing smoking and alcohol consumption, improving sleep hygiene and ensuring emotion well being.**

For most people this is all that is needed to reduce their pain.

Exercise Advice

Exercise is an important part of the management of pain, whether it is to improve your joints range of movement or how your muscles control your joint.

- If your problem is associated with stiffness your exercise programme will target improving your mobility.
- If your problem is associated with weakness your programme will focus on improving your strength and control.
- Often we see both stiffness and poor muscle control of a joint so your clinician may prescribe exercises to combat both.

How do I monitor my exercises?

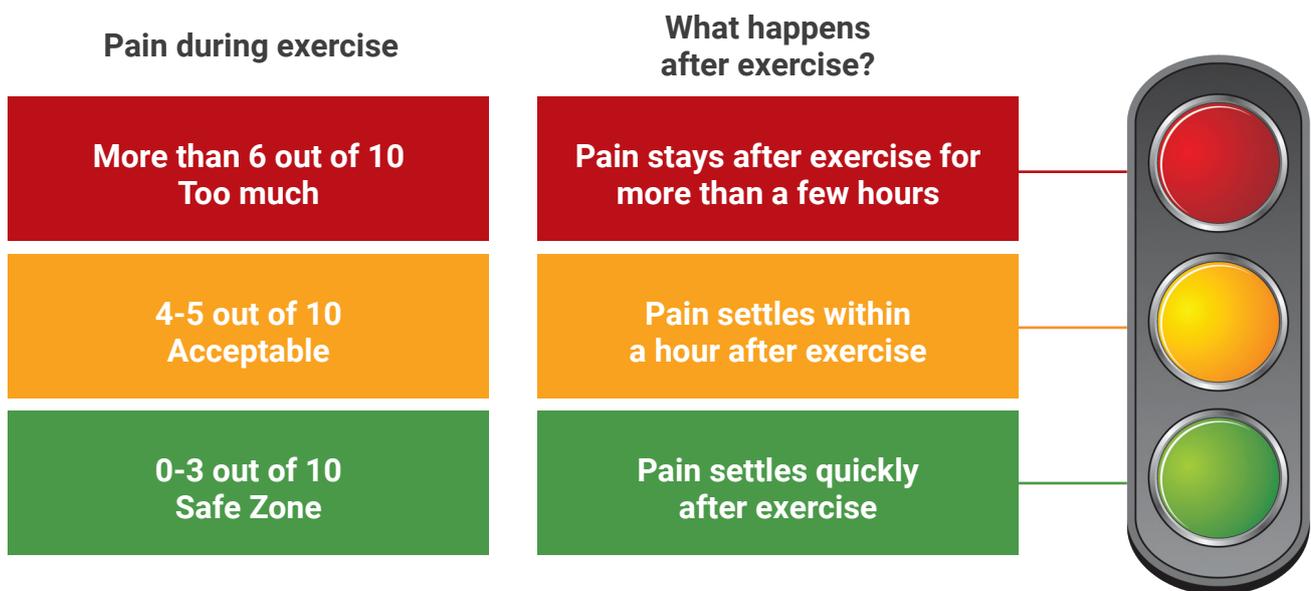
The amount of exercise you can do may well depend on the amount of pain you're in. It's okay to exercise, even when you have pain it's likely to decrease your symptoms.

However, you should be mindful if you're in more pain after finishing exercise.

How hard to push?

- Everybody is different and some exercise will work for you whilst others might not. Do more of what feels good.
- Find a level that you can currently do gradually and try and do more.
- Little and often is often better in the early stages, especially if you're very sore.
- As the exercises get harder you may wish to do them less often to allow your body time to recover (e.g. from two times a day to 3 to 4 times a week).

Use a traffic light to guide the intensity and frequency of your exercise.



Back and Neck Exercises

Deep Neck Flexion in Supine



Description

1. Relax the neck in crook lying
2. Draw the chin down to flex the head and squash the ball
3. Hold for the prescribed time then relax the neck

Sets: 1-3 Reps: 10-15 Hold: 5 seconds

Low Row with Band in Standing



Description

1. Raise one arm forward to reach for a cable
2. Pull the cable into your ribs
3. Slowly release the cable forward keeping good posture

Sets: 1-3 Reps: 10-15 Hold: 5 seconds

Thoracic Rotation and Flexion in 4 Point Kneeling



Description

1. Relax the spine on your hands and knees
2. Reach one hand across the chest on the floor
3. Return top the middle and repeat with the other arm

Sets: 1-3 Reps: 10-15

Pelvic Roll in Crook Laying



Description

1. Lay on your back with knees bent
2. Rotate the pelvis back then forward without tensing or moving the spine and abdomen

Sets: 1-3 Reps: 20 Hold: 2-5 seconds

Bridge



Description

1. Lay on your back with knees bent and inhale to prepare
2. Exhale and raise the hips off the floor then peel the spine off the floor
3. Inhale and hold this position on the shoulder blades
4. Exhale and lower the spine fluidly until the hips reach the floor

Sets: 1-3 Reps: 20 Hold: 2-5 seconds

Childs Pose



Description

1. Rest on hands and knees
2. Push the hips back towards the feet
3. Raise the hips up to the start position

Sets: 1-3 Reps: 5-10 Hold: 5-10 seconds

What else can help your pain



1. Activity Modification and Pacing

- Modify tasks to help reduce factors that aggravate your pain. E.g. step towards something as opposed to reaching for it.
- Break activities into smaller chunks and if you need to plan your day to day activities.

2. Relative Rest

- In some cases we need relative rests to reduce the load on the body. However try to avoid complete rest or avoiding moving the painful joint completely.

3. Sleeping Positions

- Try lying with pillows supporting the area of pain.
- Pillows between the knees and under the arm can be useful if you sleep on your side.
- If you lie on your back try placing pillows underneath your knees.

4. Ice and Heat

- Applying ice or heat to the area can help alleviate some of your symptoms.
- Do not apply for more than 15 minutes at a time.
- Protect the skin by applying through a protective barrier such as a small towel.

5. Pain Relief

- Take pain relief regular advised by your GP rather than as and when required.
- If you're not taking pain relief and feel you need it, in the 1st instance you should discuss over-the-counter medication with your pharmacist.
- If your pain is not helped by over-the-counter medication discuss other options with your GP.
- Always check with your GP/pharmacist before taking any medication.

6. Other Factors

- Stress, anxiety, mood, depression, fatigue/sleep disturbance.
- Routine – if something works keep doing it.

Healthier lifestyles

Our bodies are designed to be active. Physical activity not only enables you to manage daily tasks, it also helps your body function in other ways.

Physical activity can: –

- Decrease stress
- Decrease anxiety
- Increase sleep quality
- Increase energy levels
- Increase the release of pain reducing hormones, such as endorphins

The NHS recommends that adults do at least 2 1/2 hours of moderate exercise a week to manage problems with the joints and muscles. This might include: -

- Brisk walking
- Cycling
- Dancing
- Hiking
- Mowing lawn
- Riding a bike
- Rollerblading
- Tennis
- Water aerobics
- Swimming

If you struggle with exercise then you're not alone. Understanding the barriers to leading a healthier lifestyle is the first part in making a positive change.



Stop Smoking

Smoking slows down the healing process and leads to the deterioration of your bodies systems. Stopping smoking will help your body recover quicker and decrease your pain, leading to you being able to enjoy an active lifestyle again.



For further information about stopping smoking or support in the area please talk to one of our team or visit the quit smoking page on the link at the end of this booklet.

Weight Loss

There are many reasons why maintaining a healthy weight is good for you. Besides reducing the pressure on the joints, having extra fat can increase inflammation in the joints and as a result increase your pain and recovery times.



I can't do it



I want to do it



How do I do it?



I can do it

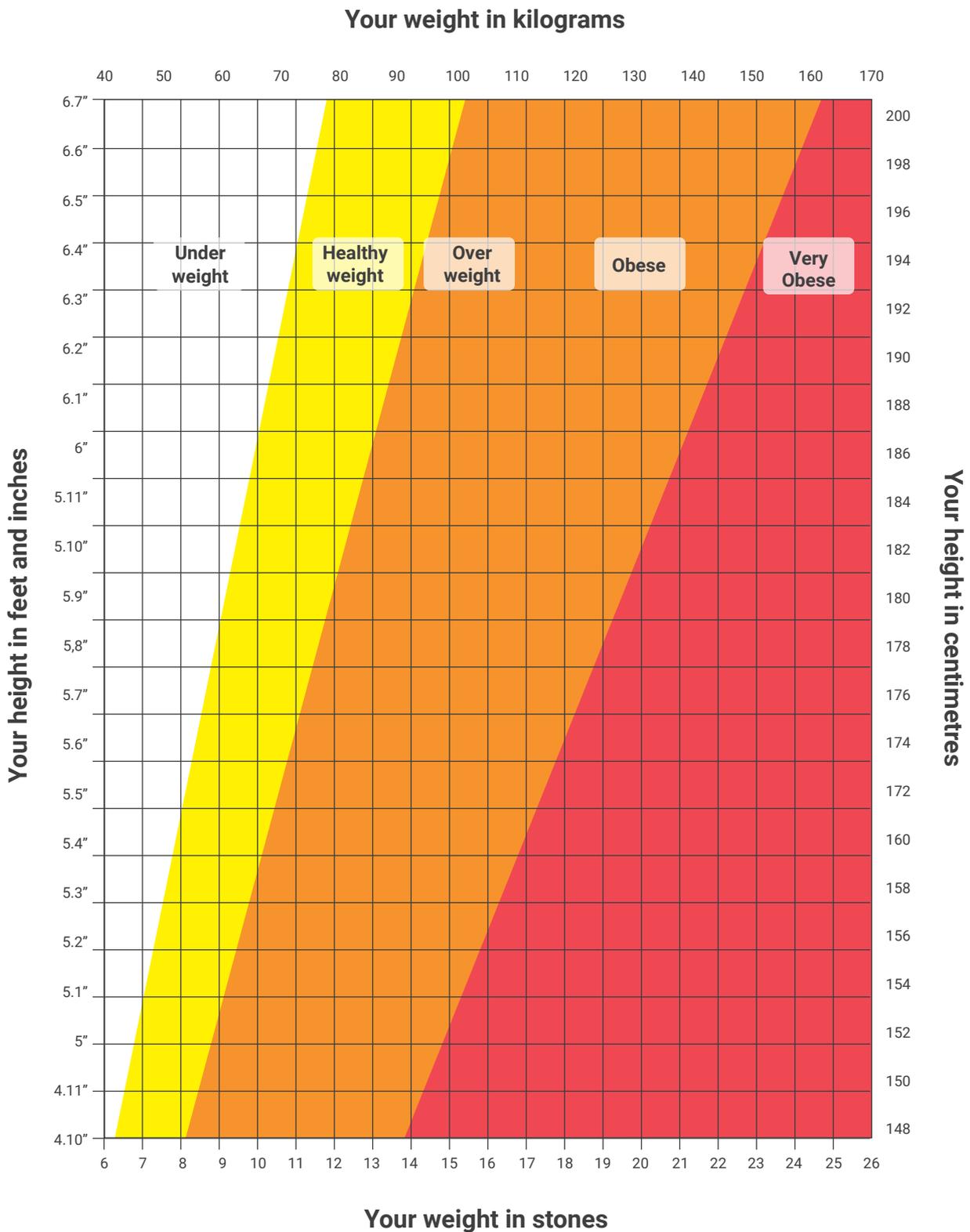


I did it!



Body Mass Index (BMI)

The body mass index is a measure that uses your height and weight to work out if your weight is healthy. Use the chart to the right to work out if you are a healthy weight. The chart is only to be used by those older than 18 years of age.



Making changes

You may be wondering how you can make some of the changes that we've talked about. Adding regular exercise into your life when moving hurts can be a big challenge.

Thinking about adding something else into a busy life can also seem like too much. However, you can get over these hurdles and make positive changes.

Before making a plan

It's useful for you to explore your reasons for change prior to making a plan. Try answering some of these questions:

Question

What change do you want to make? Keep it simple!

Why?

What small steps can you take?

What would help you?

What obstacles might get in the way?

How might you overcome obstacles?

Goal setting

Now that you might have a better understanding of the change that you are about to make, let's set some GOALS.

Goals are an important way of deciding what we want to achieve, and by when. They let us know when we have been successful.

When a change seems too big, having goals that break the change up a bit, help us feel good about the changes we are making, even if we have a way to go until we've got to our final destination.

Goals should be manageable. There is no point in setting yourself up to fail. They should follow the SMART rule:

WARNING - Do not be too ambitious, we want you to succeed.

Have a look at the example below (this is not something you need to do though!).



S Go for a 30 minute walk

M 30 minutes every day for 1 week

A Yes

R Yes. I need to walk more as I enjoy walking

T Complete by next week

EXAMPLE

Now why don't you have a go at setting some SMART goals. Try to make them relevant to the problem with your back or neck or simply things that will lead to you making one of the changes we have discussed earlier in this brochure.

S	
M	
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T	

S	
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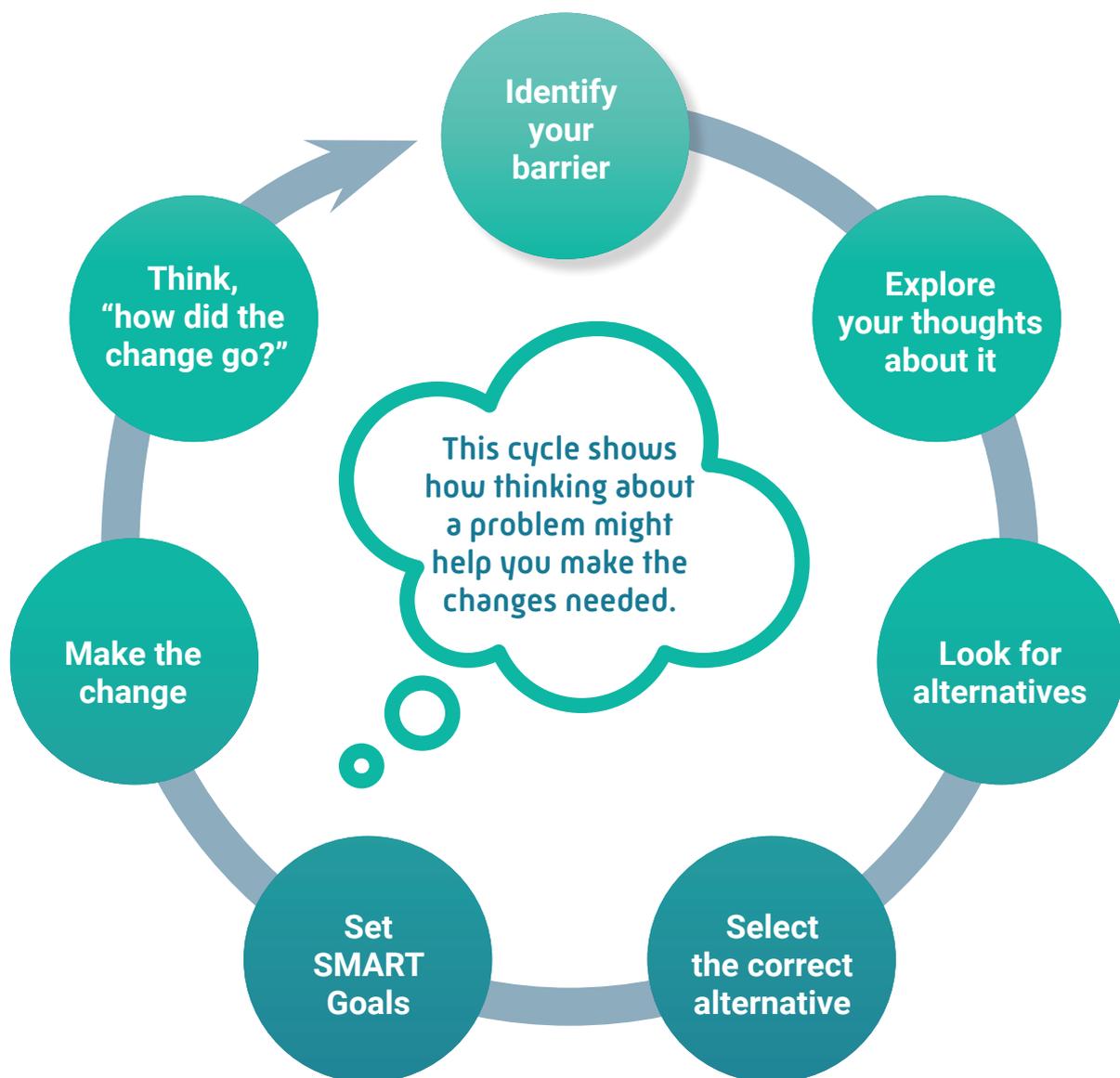
S	
M	
A	
R	
T	

Barriers to change

There are many barriers to change and so it's a good idea to think about what these might be for you and how you plan to get over them.

Remember a barrier isn't always physical. They can often be our own thoughts and beliefs that affect our ability to overcome the barrier.

Think about your own personal barriers to change.



Breaking Barriers

Below you will find a problem-solving tool to help you explore your barriers for success. We encourage you to use the tool to help improve your physical health.

STEP 1	Identify your barrier.
STEP 2	Think of as many ideas as you can that might solve the problem. Include all the possible solutions.
STEP 3	Think of the advantages and disadvantages of each possible solution, writing them all down.
STEP 4	Choose the solution that looks most likely to work. This should be based on your thoughts in step 3.
STEP 5	Plan how you will carry out the solution with SMART goal setting. Consider what may go wrong and how to stop this.
STEP 6	Carry out your plans!
STEP 7	Review what has gone well and what could have been better.
STEP 8	If it was successful, move to your next problem. If not, try thinking again starting at step 3.

Injections and Surgery

Injections

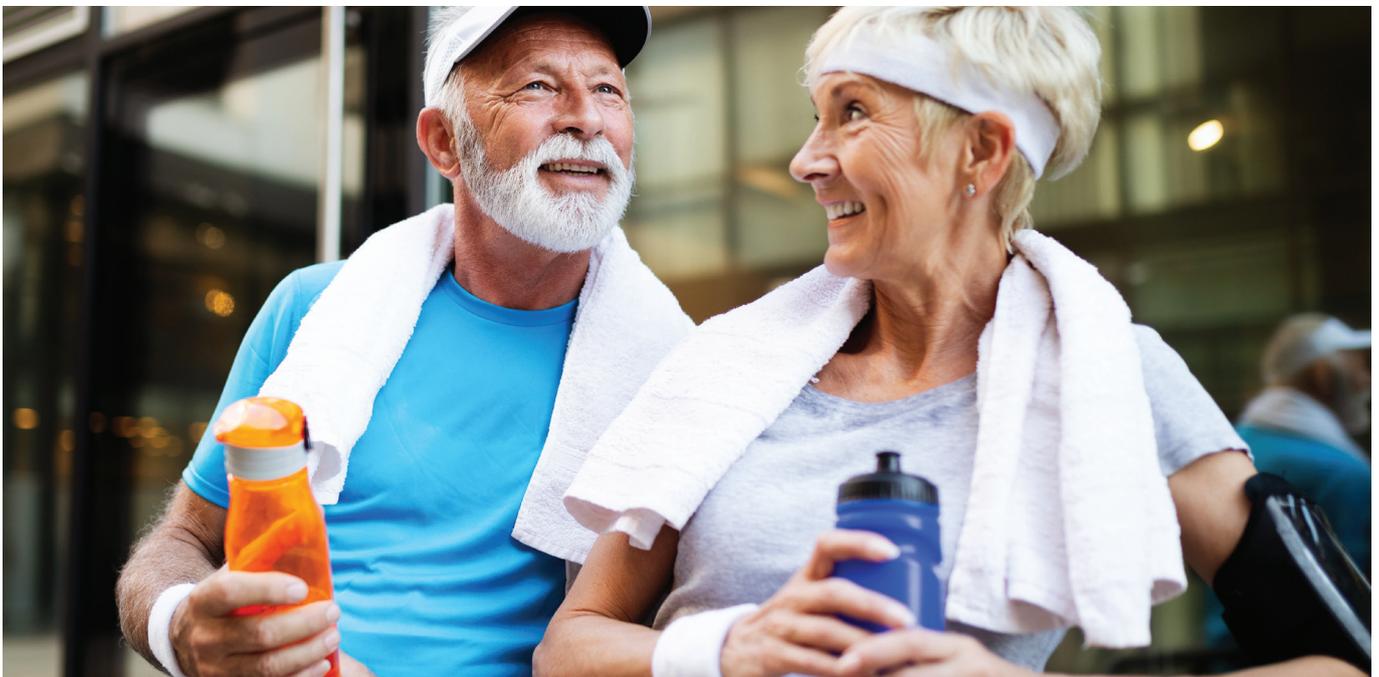
Injections are not recommended by the NHS for the majority of back and neck problems. Some back or neck problems do benefit from a steroid injection, however they are rarely a long-term solution and do have risks associated with them.

If you are struggling to engage with your rehabilitation you should discuss your options with your clinician.

Surgery

Surgery is indicated for very few back or neck problems. To be considered for surgery you will have experienced very little benefit from exercise and lifestyle changes.

If routine treatments have not worked for you and you are ready to consider surgery you should speak to one of our clinicians at your JPAC.



Take home message



1. Back or neck pain is a very common problem.
2. Most back or neck pain will improve with time, if it is managed appropriately.
3. In the meantime it may help to modify your activities and take pain relief.
4. Exercises will also help your back or neck pain get better.
5. It is good to remain active while you wait for your back or neck to improve.



If your back or neck does not improve as expected we will be able to discuss other treatment options with you at the 8 week follow up appointment.



Useful websites & your local information

healthshare.org.uk

Local resources in your area

Weight loss	https://www.nhs.uk/oneyou/for-your-body/lose-weight/
Smoking	https://www.nhs.uk/oneyou/for-your-body/quit-smoking/
Mental health	www.mind.org.uk
Age UK	https://www.ageuk.org.uk

