



Back problems

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Citation

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Back problems are a range of conditions related to the bones, joints, connective tissue, muscles and nerves of the back. Back problems are a significant cause of disability and lost productivity.

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Findings from this report:

- In 2017-18, there were 181,000 hospitalisations for back problems
- About 4.0 million people or 1 in 6 Australians (16%) had back problems in 2017-18
- Pain at least "moderately" interfered with daily activities for almost 2 in 5 (38%) people with back problems in 2017-18
- In 2015, back pain was the 2nd leading cause of disease burden, accounting for 4.1% of Australia's total disease burden

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What are back problems?

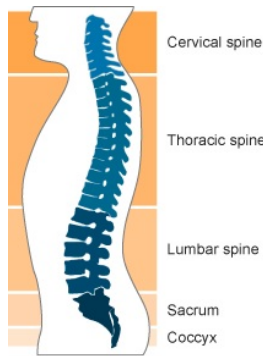
'Back problems' describes a range of conditions related to the bones, joints, connective tissue, muscles and nerves of the back. These conditions can affect the neck (cervical spine), upper back (thoracic spine) and lower back (lumbar spine) as well as the sacrum and tailbone (coccyx).

Back problems reported on these web pages include:

- Disc disorders (such as herniated discs or disc degeneration)
- Sciatica and curvature of the spine
- Back pain/problems not elsewhere classified.

Note back problems associated with another condition, such as osteoporosis are not included. For this reason, the total prevalence of back problems is likely to be underestimated.

Figure 1: Lateral view of spine



Back problems include:

- episodes of 'non-specific' pain in the lower, middle and upper back that are sometimes associated with injury but often may arise and settle for no apparent reason
- 'sciatica' a back problem with pain shooting down one leg often accompanied by tingling, numbness or weakness in that leg. A similar problem in the neck will cause arm symptoms
- narrowing in the canal of the lumbar spine through which the spinal cord passes. This is more common in older people and causes difficulty walking as well as symptoms in both legs
- less common conditions such as infection or fracture that are managed differently to the more common back problems
- 'whiplash' following a motor vehicle accident.

Back problems can have many causes, relating to work, sport and lifestyle issues, injuries, diseases such as arthritis, disc disease and osteoporosis. Sometimes back pain is the result of a health condition beyond the spine such as a kidney stone or shingles. Factors that may increase the risk of developing back problems include age, physical fitness, smoking, being overweight, and the type of work a person does (ABS 2019).

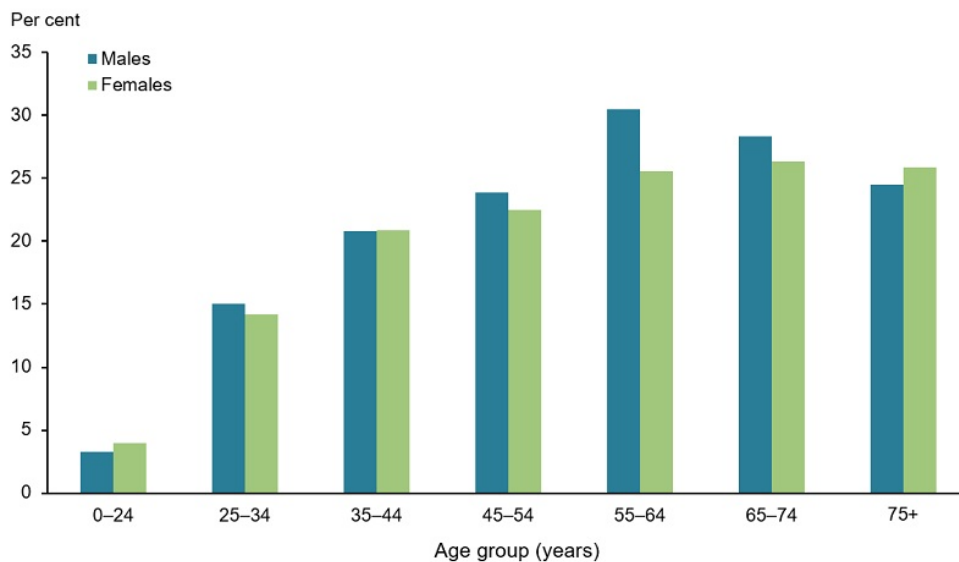
Pain is the main symptom in most back problems. Back problems are a common reason for pain among younger and middle-aged adults, but can start in childhood (Raspe et al. 2004). Back problems are often recurrent and may need to be managed as a long-term health condition.

How common are back problems?

About 4.0 million Australians (16% of the total population) have back problems, based on self-reported data from the Australian Bureau of Statistics (ABS) 2017-18 National Health Survey (NHS).

Back problems are least common among people from birth to age 24 (Figure 2). The overall prevalence of back problems, after accounting for differences in age, is similar for males (16%) and females (15%).

Figure 2: Prevalence of back problems, by age group and sex 2017-18



Note: refers to people who self-reported having back pain and problems (current and long term).

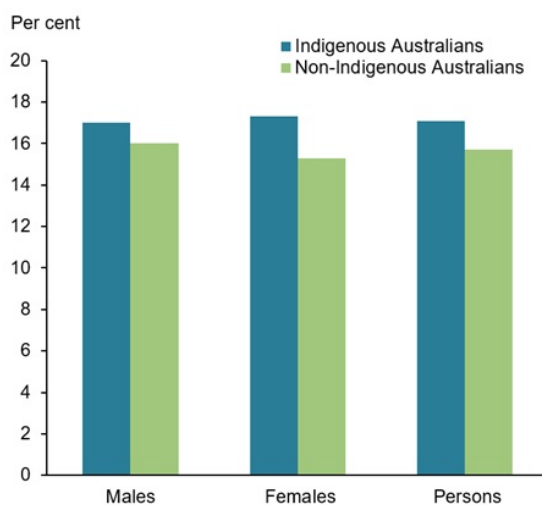
Source: AIHW analysis of ABS 2019a ([Data table](#)).

Aboriginal and Torres Strait Islander people

According to self-reported data from the ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS), the prevalence of back problems among Aboriginal and Torres Strait Islander people was 13%, affecting about 102,000 people –including about 14,000 who live in remote areas (9.4% of the remote Indigenous population).

After adjusting for age, males and females had similar rates of back pain and problems (17% each). The proportion of Indigenous Australians (17%) and non-Indigenous Australians (16%) affected was also similar (Figure 3).

Figure 3: Prevalence of back problems by Indigenous status, 2018-19



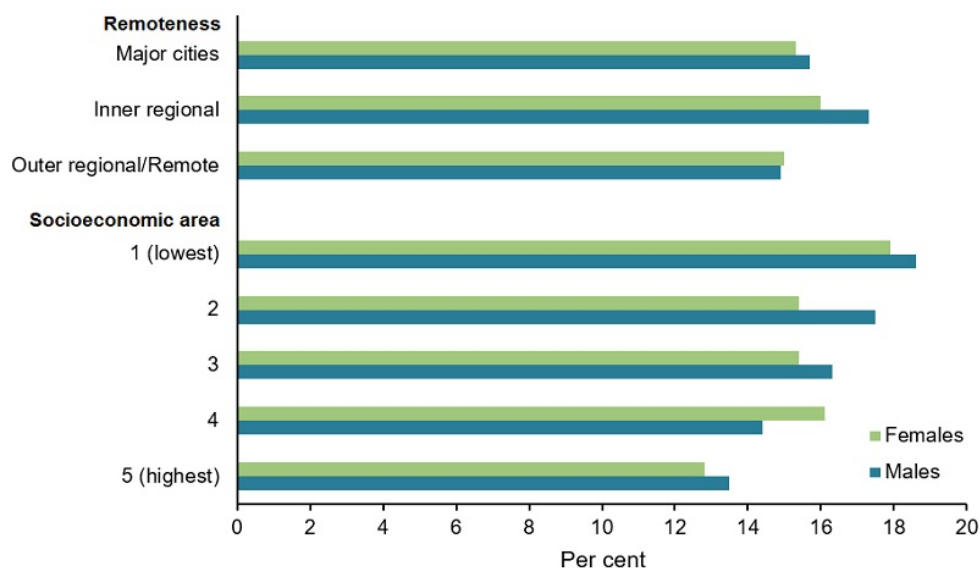
Note: Rates are age-standardised to the Australian population as at 30 June 2001.

Source: ABS 2019 ([Data table](#)).

Inequalities

According to self-reported data from the 2017-18 National Health Survey, prevalence of back problems was similar in *Major cities* (16%), *Inner regional* (17%) and *Outer regional and Remote* (15%) areas of Australia. Those living in the lowest socioeconomic areas were 1.4 times as likely to have back problems compared with those living in the highest socioeconomic areas (18% and 13%) (Figure 4).

Figure 4: Prevalence of back problems, by remoteness and socioeconomic area, 2017-18



Note: Rates are age-standardised to the Australian population as at 30 June 2001.

Source: AIHW analysis of ABS 2019b ([Data table](#)).

References

ABS (Australian Bureau of Statistics) 2019a. [National Aboriginal and Torres Strait Islander Health Survey: First Results, Australia, 2018-19](#). ABS cat. no. 4715.0. Canberra: ABS.

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Raspe H, Matthis C, Croft P & O'Neill T 2004. Variation in back pain between countries: the example of Britain and Germany. *Spine* 29:101-1021.

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Treatment and management of back problems

Pain is the main symptom of most back problems and treatment can be complex. This can be further complicated by comorbid conditions. Some general treatment strategies for chronic diseases, for example, lifestyle modifications such as diet, exercise, weight control, and reducing smoking, can benefit people with back problems (Bauer et al. 2014).

The most recent Australian clinical practice guidelines for management of non-specific low back pain encourages reassurance, self-management and physical therapy as first line care, supplemented by non-pharmacological therapies such as heat, massage, acupuncture and mindfulness where appropriate (Almeida et al. 2018). Medications are discouraged except where first and second-line non-pharmacological interventions are unsuccessful, and when they are prescribed, the lowest effective dose for the shortest amount of time possible is advised (Almeida et al. 2018).

Non-steroidal anti-inflammatory drugs (NSAIDs) should be the first-line medication when non-pharmacological management is inadequate (Almeida et al. 2018). Opioids should only be used when other treatments have failed after cautious assessment of risk versus benefits for the individual (Almeida et al. 2018). Paracetamol and surgery are no longer recommended (Almeida et al. 2018).

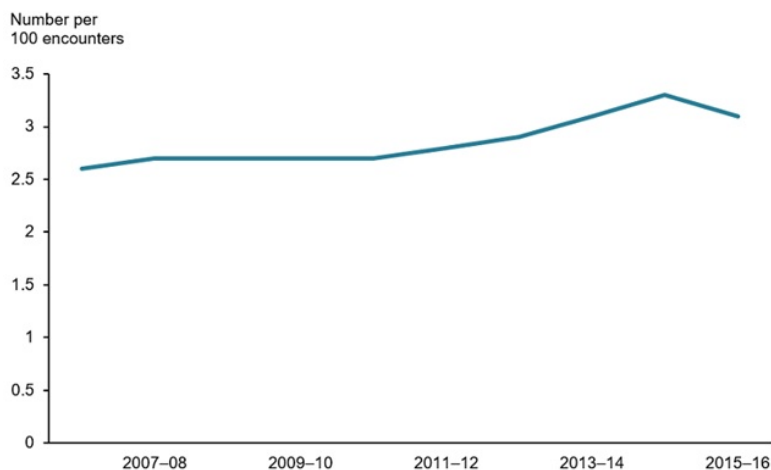
Reliable and up to date information on how to manage back pain is provided at mybackpain.org.au, a resource funded by Australia's National Health and Medical Research Council, and developed by Arthritis Australia, the University of Queensland and Cochrane Back and Neck.

General practitioners and back pain treatment

General practitioners (GPs) are usually the first point of contact with the health care system for people with back problems. Back problems are among the most commonly managed conditions in general practice (Almeida et al. 2018). In 2015-16, 3.1 of every 100 GP-patient encounters for chronic conditions were for the management of back problems. This has increased significantly from 2.6 of every 100 GP-patient encounters in 2006-07 (Figure 1).

There is currently no nationally consistent primary health care data collection monitoring provision of care by GPs. The statistics on general practice activities are based on Bettering the Evaluation and Care of Health (BEACH) data, which are derived from a sample survey of GPs and their encounters with patients and should be interpreted with caution.

Figure 1: Rate of back complaints managed by GPs, 2006-07 to 2015-16



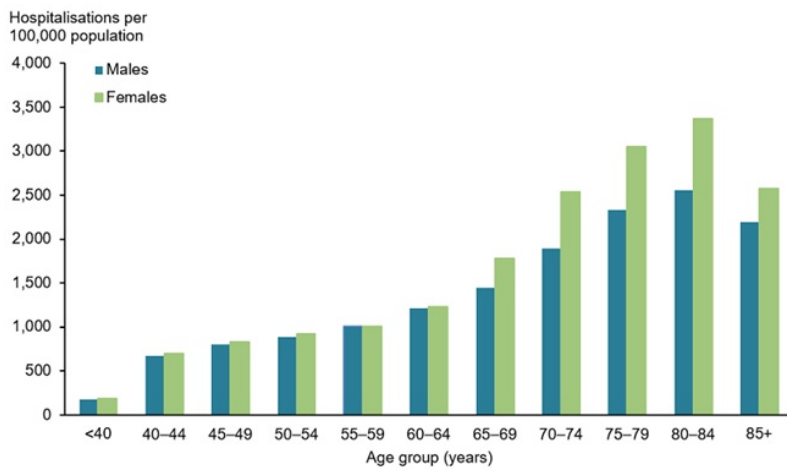
Source: Britt et al. 2016 ([Data table](#)).

Hospitalisation and the treatment of back problems

Data from the AIHW National Hospital Morbidity Database (NHMD) show that in 2017-18:

- there were 180,818 hospitalisations with a principal diagnosis of a back problem
- the rate of hospitalisations was greater for females than males (802 per 100,000 compared with 657 per 100,000)
- the rate of hospitalisation for back problems increased with age (Figure 2).

Figure 2: Rate of hospitalisation for back problems, by sex and age group, 2017-18



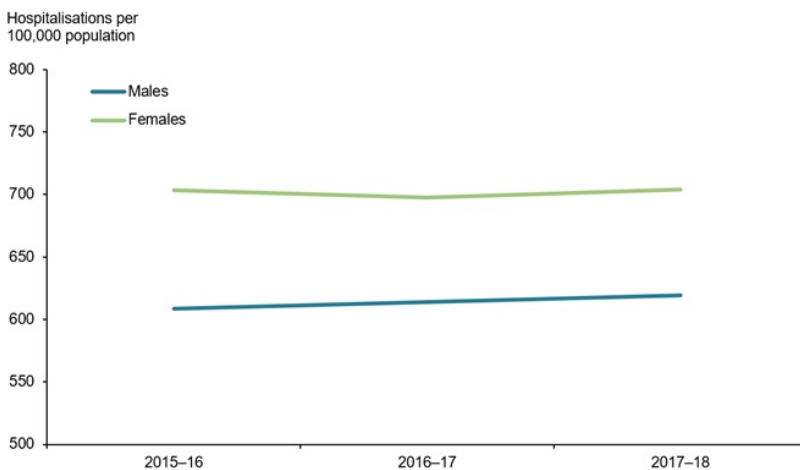
Source: AIHW National Hospital Morbidity Database ([Data table](#)).

The top 3 main reasons for back problem hospitalisations were:

- lower back pain (27% of hospitalisations for back problems)
- lumbar and other intervertebral disc disorders with radiculopathy (for example, when one or more nerve roots is affected and does not work properly) (10%)
- spinal stenosis (abnormal narrowing of the spinal canal that causes compression of the spinal cord) (8.6%).

From 2015-16 to 2017-18, the age-standardised hospitalisation rate for back problems among Australians remained relatively stable and was higher for females compared with males (Figure 3). Data prior to 2015-16 are not presented because rehabilitation hospitalisations were coded differently before this year.

Figure 3: Age-standardised rate of hospitalisations for back problems (principal diagnosis) by sex, 2015-16 to 2017-18



Note: Age-standardised to the 2001 Australian population.


Source: AIHW National Hospital Morbidity Database ([Data table](#)).

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Data

Data tables: [Back problems 2020](#)

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