

A New Look at Combating Back Pain

Back pain can be utterly debilitating while painkilling drugs can be a problem in themselves. There is light at the end of the tunnel, though: with the right blend of physical therapies, psychology and natural remedies you can get back where you want to be.

BY SOPHIA AULD
PHOTOGRAPHY GETTY IMAGES





Use local heat, such as a hot pack or warm bath, to ease pain and muscle spasm.

If you've never had a back problem, count yourself lucky. For Amy McPherson, having a sore back made her feel "old and miserable", although she was only 21 at the time. Now 37, the writer and business analyst first developed a problem while working in a Sydney office. It was only annoying at first but became increasingly severe over the next five years. McPherson, who now lives in London, has always believed in taking a natural approach to her health. With regular yoga, chiropractic treatments and exercise, she has managed her pain successfully.

McPherson's experience is very common. It's estimated that 70–90 per cent of people

will suffer from lower back pain at some time in their lives. About 3.7 million Australians currently have back problems, estimates from the Australian Bureau of Statistics (ABS) 2014–15 National Health Survey show. Around \$1.2 billion of annual Australian healthcare

expenditure can be attributed to back problems, according to ABS figures.

Fortunately, back pain is rarely serious — less than 10 per cent of people will have a problem that requires medical intervention, according to Dr Tim

Mitchell, a back pain researcher and specialist musculoskeletal physiotherapist (as conferred by the Australian College of Physiotherapists). Only about 1 per cent will have "red flag"

This means 90–95 per cent of people have non-specific pain that is not associated with a specific pathology (disease).

WellBeing

special report BACK PAIN

pathology, indicating a serious issue that requires urgent treatment, he says.

Nonetheless, for many people, back pain can be distressing to the point where it interferes with daily activities and negatively impacts on quality of life. It can also affect those caring for the sufferer — usually family and friends.

Nor are spine problems limited to pain in the lower back. They can manifest as pain in the middle and upper back; pain, tingling, numbness or weakness in the legs; stiffness and reduced mobility; even changes to bladder and bowel function.

Help is available, fortunately, and research is constantly providing fresh insights into why our backs get sore and how best to treat them. Most back problems can be successfully managed without the need for strong drugs or invasive procedures.

Back pain basics

Back problems stem from a wide range of causes, including poor posture, injuries and certain diseases. Some common causes include osteoarthritis, osteoporosis, disc disease and certain conditions.

Back pain is classed as either specific or non-specific. Specific back pain includes the rare variety accounting for less than 1 per cent of cases related to cancer, infection, fracture or an inflammatory process. Specific back pain can also be caused by nerve compression in the spine, resulting in pain and loss of power and sensation in the legs. This accounts for about 5 per cent of cases.

This means that 90–95 per cent of people have non-specific pain that is not associated with a specific pathology (disease). While this type of pain can still cause back muscles to seize up and movements to hurt, it usually settles within a week or two.

Back pain is further classified according to how long symptoms have lasted. Acute pain lasts up to 12 weeks, or the time it takes for

tissues to heal. Sometimes, there will be an identifiable cause of acute pain such as an injury or increased load on the spine — as in the cases of the “binge gardener” and “weekend warrior”. However, according to Dr Mitchell, in at least 50 per cent of cases, pain onset will be “insidious”, meaning there has been no specific injury or event.

“If someone presents with that story around the cause of their back pain, then we have to think more broadly about what’s contributed to trigger that off,” he explains. “And there’s now more thinking around this concept of tissues in our spines being pre-sensitised, so effectively with the same amount of activity or doing our usual daily routines, that can trigger off an episode of back pain.”

These pre-sensitising factors include a person’s general health, a prolonged period of reduced sleep, increased stress, low mood and abdominal obesity. Any one or a combination of these can have a sensitising effect, leading to a pain episode, Dr Mitchell says. Other factors that increase the risk of developing back pain include age, physical fitness, smoking, being overweight and the type of work a person does.

Once pain goes on longer than 12 weeks it’s classed as chronic. In some cases, there’s still an explanation, as in some spinal conditions. When no reason for the pain can be identified it’s termed “chronic (or persistent) non-specific back pain”. Chronic back problems are common in Australia, affecting 16 per cent of the population, and are a leading cause of disability (28 per cent of the total population with disability). Chronic back pain can have a profoundly negative effect on your ability to work and participate in family, leisure and social activities.

Back pain myths busted

As you talk to people, you’ll likely hear many unhelpful myths about back pain; even some medical professionals use terms that sound alarming. These include things like: back pain

is caused by wear and tear; a joint in your spine is "out"; it's dangerous to exercise, bend or lift with back pain; back pain gets worse as you get older; and back pain can put you in a wheelchair.

In fact, the opposite is true. As Dr Mitchell explains, "Spines are really strong and robust." Backs love to be moved, exercised and trusted to do their job; they don't go "out"; and people with back pain don't end up in wheelchairs.

Scans are not recommended for most people with back pain unless specific pathology is suspected. This is because scan results correlate poorly with what people are feeling. Dr Mitchell explains, "There's an overwhelming amount of research now showing that lack of link between someone's degree of pain and what actually shows on a scan."

Imaging is needed only if there is something in your history or examination that makes one of these investigations appropriate, say Tim Austin and Dr Will Howard from the Australian Pain Society. "If you do have one of these investigations, it's very important to recognise that often variations of normal anatomy are seen that have no significance," they say. "Many people have abnormal MRIs but no pain at all! And you can have a painful back but no abnormality is seen on the MRI."

The truth is most people without back pain have age-related changes to discs. Disc bulges will be evident in 50 per cent of people over the age of 40 who don't have any back symptoms. They have been described as "wrinkles on the inside". Sometimes getting scans can even make things worse, as reading findings causes us to worry unnecessarily about our backs.

Austin and Howard agree that back pain can

usually be managed conservatively. "Most back pain does not need surgery," they say.

Nor is treatment with strong opioids (morphine-like drugs) advised. "These powerful drugs are also associated with poorer outcomes. They have problematic side-effects such as constipation (something you definitely don't want when you have back pain), nausea, poor concentration and clouded thinking. Becoming dependent on opioids is always a risk when they are taken."

What to do in an episode of back pain

If you suffer an episode of back pain, Howard and Austin advise that self-management is key. Staying active is crucial for the best chance of recovery. "Absolutely the best thing to do is to stay mobile but cut back on your usual

physical activities," they say. "Although the pain is sometimes severe, the level of pain does not indicate that there has been a significant structural problem in your back; the intensity of the pain is usually because a small amount of very irritant chemicals has been released in your spine. Staying active does not slow the healing process.

And staying active may lessen pain by limiting the amount of muscle spasm that develops in association with the pain — the muscle spasm can add to the back pain."

They also recommend using local heat, such as a hot pack or warm bath, to ease pain and muscle spasm. "Heat can soothe the pain by activating the body's innate mechanisms that lessen transmission of pain signals. This is called the gate effect: pleasant signals conveying the heat message close gates in the spinal cord so the pain signals don't travel onwards up to your brain."

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WellBeing

special report BACK PAIN

When to see a medical practitioner

While most back pain isn't serious, there are warning signs that you shouldn't ignore. Howard and Austin advise seeing your doctor immediately if you can't feel that your bladder is full or you are experiencing incontinence of urine or faeces: "This is because these symptoms may be caused by a disc protrusion pushing on the nerves that serve these functions: if the pressure on the nerves is not relieved promptly, there may be permanent nerve damage and permanent loss of control."

They also recommend seeing your doctor without delay if the pain follows significant trauma — or minor trauma if you have known osteoporosis or risk factors for osteoporosis (such as being older than 70 or on steroid medication for a long time).

You should also see your doctor if your back pain is associated with new signs of nerve problems in your legs, such as weakness or a tendency to trip. Check in with your GP if the pain isn't definitely improving after a week. "Most back pain improves within a few days, but it may take longer; the important thing is that the severity of pain should be lessening," say Howard and Austin.

Biopsychosocial approach

Although most back pain settles quickly, some people will suffer with ongoing or recurring pain. There's a huge array of management options, but whichever approach you choose should take a holistic view of your problem.

While the spine is an incredible entity, it's only one part of a whole person — a person who lives, loves, works, plays, eats and sleeps. Therefore, the best approach to any problem involves looking at the whole package.

The past few decades have seen an explosion in pain research. While pain was once thought to be a simple stimulus-response reaction (touch the hot plate and it hurts), it's now recognised as a complex interplay between

the body and the mind. Many body systems are involved in the pain experience, including the nervous, immune and endocrine systems.

Pain can go on long after tissues have healed and even be experienced where there is no tissue (as in phantom limb pain after amputation). Conversely, people who've suffered horrific injuries may not feel pain.

Dianne Wilson, a physiotherapist with more than 40 years' experience and a PhD candidate at the University of South Australia, explains that pain is a protective mechanism. In persistent pain, it seems that the system becomes overprotective.

"It is as if the body's alarm system has increased its sensitivity and pain is triggered with even the slightest threat, even when there is no actual risk of damaging tissue," she says. "It could be said that the body's protection system is working too well but it is not working very purposefully. Importantly, this can also occur in ongoing conditions that don't follow normal healing timeframes, like osteoarthritis."

These unhelpful adaptations leave the nervous system "primed" or "sensitised" to create pain, Wilson says. "We know some of the factors that can 'prime' the nervous and immune systems. For example, we know if we are anxious or stressed, we release a lot of chemicals into our bodies that can contribute to increasing pain intensity," she explains. "These multiple factors require an extensive assessment and treatment approach."

This is called a biopsychosocial approach, which acknowledges that we are thinking, feeling beings who interact with one another and with our environment. We use our backs in a wide variety of contexts — at home, at work, playing sport, at dinner with friends — and the way we think and feel about these things has an impact on our pain experience.

This understanding of pain has come from research into neuroplasticity. The nervous system is increasingly understood to be a



A yoga practice can decrease pain and increase functional ability in the short term for patients with spinal pain. And drink plenty of water, too!

mobile and changeable organ and how we use it has a profound effect on our experience of pain. Knowledge is power; an understanding of the neuroscience of pain is a potent tool for its management.

The Neuro Orthopaedic Institute is a leading group of worldwide researchers who are promoting the biopsychosocial approach to managing pain. According to their website, there are five key neuroscience messages that are essential for understanding and managing pain:

1. Injury or disease does not mean you feel pain.
2. The nervous system moves and stretches as we move.
3. Pain, stress and performance are outputs of the brain.
4. Knowledge and movement are the greatest pain and stress liberators.
5. Nervous system plasticity gives new hope and technique. This is great news for back pain sufferers.

Dr Howard and Tim Austin emphasise the importance of a multidisciplinary approach to

treating back pain, especially if the problem is long-standing. While individual therapists can take a holistic view, a team approach gives you the best chance of a successful outcome. The members of your healthcare team should be working together to help you manage different things that are contributing to your pain and help you achieve the goals that are important to you.

For the sake of clarity, the following therapies have been divided into categories according to the predominant mode of treatment.

Physical therapies

Physiotherapy

Physiotherapists are primary contact practitioners, meaning you don't need a doctor's referral to see them (unless you're making a claim under workers compensation or the like).

Physiotherapists are highly trained professionals who can assess your condition, diagnose the problem and help you understand what's wrong.

WellBeing

special report BACK PAIN

Dr Mitchell explains that the first job of a physiotherapist is to screen people for any red flags or specific pathology and refer them for medical care if needed. Then they'll conduct an examination to see what is going on with your back, but also "listen to that person's story around what's potentially contributing to that episode of back pain".

They will provide treatment to assist with pain management, and exercises and advice about what a person should and shouldn't be doing to help their back recover as quickly as possible.

"It's really important to understand that in the vast majority of cases people need to stay active and keep moving as much as possible rather than try to rest and wait until their pain goes away," Dr Mitchell explains.

Most people will be better within six weeks, he says. If you're not clearly recovering by then, you need to start asking questions. Such questions won't necessarily be about pathology but about whether other contributing factors need to be addressed.

While there is poor evidence for any single treatment, whether manipulation, massage, needling or a specific type of exercise, this isn't surprising given that many factors contribute to pain, says Dr Mitchell.

"The overarching guidelines support that it's really about giving people the right information, having people take control of their problem and taking an active approach is what helps people get better quickly.

"It should be an individualised approach based on what's assessed and found to be most relevant for that person," he says.

• *To find a physio, or for more information, visit physiotherapy.asn.au.*

Osteopathy

Osteopaths are also primary contact practitioners, with at least a Masters-level qualification. They use manual therapies to promote health and treat a range of

musculoskeletal conditions. Back pain is the most common reason people seek osteopathy, says Dr Sandra Grace, an Australian Traditional Medicine Society (ATMS) board member and osteopath with more than 30 years experience.

An osteopath will perform a thorough assessment of the patient's overall health, screen for red flags and look for the primary cause of low back pain. Once they have established a working diagnosis and deemed the patient suitable for osteopathic care, a treatment plan will be devised to help resolve or manage their back pain.

Dr Grace says the osteopath will negotiate treatment options with the patient, considering the best available evidence, the practitioner's clinical experience and the patient's preferences. Treatment may include manual therapies, advice about lifestyle, ergonomics, exercise rehabilitation and referral for co-management with other health practitioners.

Osteopathy treatments are effective in most cases, Dr Grace says, with many patients continuing treatment because "they find it promotes their health and prevents recurrence of problems". She explains, "The risk of major adverse reactions to manual therapy is very low, although about half of patients may report minor short-lived reactions like muscle soreness."

According to Dr Grace, osteopaths also advocate healthy lifestyle choices. "There are growing numbers of people who have a strong focus on healthy living and on taking responsibility for their own health," she explains. "A particular focus of osteopaths is on active health promotion, which makes their discipline a good fit with this movement."

• *Go to osteopathy.org.au for information and to locate a practitioner.*

Chiropractic

Chiropractors are another type of primary contact practitioner whose help is sought

WellBeing

special report
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There are more than 500 studies showing the effectiveness of tai chi for managing back pain.

for problems with back pain, neck pain and headaches, says Dr Andrew Lawrence, the chairman of the Chiropractors Association of Australia.

Lawrence, who has been practising chiropractic for 36 years, says a consultation will usually involve taking a case history and a comprehensive examination relevant to the presenting complaint. Imaging is considered if the practitioner thinks it is warranted. The chiropractor will then discuss treatment options and a care plan with their patient. Once a plan is agreed upon, treatment can proceed.

Lawrence explains, "Treatment results vary from person to person, but usually people having chiropractic care respond reasonably quickly, especially if treatment is sought early. The more chronic problems can take a longer time but some improvement is usually achieved in the short term." He says cases

of uncomplicated back pain usually resolve completely but "with the more complex cases it depends on the severity and the damage done to the tissue as to the level of recovery".

He also debunks the idea that chiropractic is all about "cracking bones". "Nothing could be further from the truth," he says. "Chiropractors work with the neuromusculoskeletal system to bring movement, function and harmony to the body. There's a variety of techniques that chiropractors use to achieve relief of back pain, neck pain and headaches. Most are very light and gentle and some are more dynamic and result in some noise coming from the joint.

"People who are concerned about the noise should ask the chiropractor to use one of the lighter techniques they will be more comfortable with."

• See chiropractors.asn.au for more information and where to find a chiropractor.

WellBeing

special report BACK PAIN

Tai chi

From its martial arts roots, tai chi has evolved into a form of exercise involving slow, flowing movements, controlled breathing and mindfulness. The health benefits of this ancient Chinese practice are increasingly borne out by contemporary research.

Dr Paul Lam, a GP and founder of the Tai Chi for Health Institute, says there are more than 500 studies showing the effectiveness of tai chi for managing back pain. The largest of these, a randomised controlled trial reported in 2011, found that a 10-week tai chi program improved pain and disability measures in people with persistent lower-back pain and was a safe and effective intervention.

Dr Lam explains that tai chi is beneficial for back pain sufferers on a number of levels. Physically, it strengthens the deep stabiliser muscles, which are “a major factor associated with almost any form of back pain”, he says. The other physical benefit is for posture. “Tai chi trains people to have a really upright posture and that protects you from getting back pain and reduces recurrence,” Dr Lam says.

It helps people develop healthy movement patterns, gently opens the joints, stretches muscles and ligaments, and encourages mindful weight transference. People are encouraged to incorporate these movement patterns into everyday life. “We teach people how to do the tai chi poses when they’re ironing, when they’re vacuum cleaning. The pattern of healthy movements in tai chi is consistent with physiotherapy principles.”

At a deeper level, tai chi helps people to be more relaxed and mindful, which is particularly beneficial for back pain. “All the tai chi movements train us to be in almost like a meditative state. It’s called a moving meditation,” he says. “Tai chi is a comprehensive tool for wellness in every aspect. I’d encourage people to give it a try and take time to find a teacher they’re comfortable with.”

Dr Lam offers a free *Tai Chi for Rehabilitation* lesson on YouTube, which he says is ideal for back pain sufferers. See youtube.com/watch?v=6nCaiM9yd9w.

• Visit taichiforhealthinstitute.org for more information.

Acupuncture

Like tai chi, acupuncture can be traced back to ancient China. Its 2000-year history makes it one of the oldest healthcare systems. Acupuncture takes a holistic approach to understanding health and disease and focuses on prevention as well as treatment.

An acupuncturist will first make an assessment based on traditional Chinese medicine principles. Treatment involves the insertion of very fine, disposable, sterile needles into specific sites along the body’s meridians (energy channels) to encourage the healthy flow of *qi* (energy). The practitioner may also stimulate the acupuncture points using moxibustion, cupping, laser therapy, electro-stimulation or massage.

Acupuncture can be one of the best modalities for managing back pain, says Daniel Zhang, an Australian Traditional Medicine Society board member and registered acupuncturist with 25 years’ experience. He explains that acupuncture helps relieve back pain by harnessing the body’s own pharmacy —it releases endorphins (natural painkillers) and anti-inflammatory agents into the bloodstream, helping relieve pain and fight chronic inflammation.

During a treatment, numbness and a distending sensation will be felt, Zhang explains. Bleeding is very rare and is stopped quickly without causing any harm. Zhang says that pain relief is usually immediate and that regular followups are essential to achieve the best outcome. “For long term, it can be the most reliable natural way of managing back pain without [causing] any adverse effects,” he says.

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• See acupuncture.org.au or atms.com.au/ acupuncture to find an acupuncturist.

Yoga

Yoga is another ancient practice that is recognised for its holistic health benefits. Originating in India some 2000 years ago, yoga typically combines physical postures, breathing techniques and meditation or relaxation.

Research also shows some promising benefits of yoga for people with back pain. A review conducted in 2015 analysed the results of six studies, comprising 570 participants, looking at Iyengar yoga for back and neck pain. Their findings suggested that yoga practice can decrease pain and increase functional ability in

the short term for patients with spinal pain.

A 2017 study compared the effectiveness of physical therapy, yoga and education in 320 people with chronic low-back pain. Study participants were randomly assigned to one of three groups: yoga classes every week for three months; 15 visits with a physical therapist over three months; or education (which involved getting a back pain self-help book and mailed newsletters). The interventions were continued for a further nine months.

The researchers found that the yoga and physical therapy groups showed similar improvements in pain and activity limitation over time, with improvements still similar at

one year. Participants in both the yoga and physical therapy groups were less likely to use pain medications at three months compared with the education group.

Kaye Tribe has been practising yoga for 28 years and is the director of the Academy of Yoga Learning. She says yoga is helpful for back pain sufferers on many levels. Physically, it improves body awareness. "Learning to distinguish the natural curves of the vertebral column in practice of *Samasthiti* (neutral standing pose) will assist with finding the best pelvic position in a comfortable standing position," Tribe says. It also brings awareness to areas of stiffness. "Often students comment that they weren't even aware of the restriction to the movements until they come to a yoga class."

Yoga helps to gently stretch muscles and shortened connective tissue, while anti-gravity movements develop strength. "Well-designed yoga practices such as a series of *asanas* usually encourage a strengthening of the muscles that support the core of the body: slow controlled forward, backward, rotational and lateral movements from a standing or kneeling position will encourage development of strength in the muscles that support movements of the vertebral column," Tribe explains.

Yoga also encourages natural breathing through correct use of the diaphragm and balances the sympathetic and parasympathetic nervous systems. "Often students describe feeling less stressed at the end of a practice."

Tribe notes the important distinction between attending a group class and a session with a yoga therapist. A one-on-one yoga therapy session will evaluate and address any imbalances or movement patterns that are causing or adding to a person's problems and introduce personalised asana and breathing practices to help with daily activities that have been limited by pain.

- Find a yoga therapist at yogatherapy.org.au or yogatherapyaustralia.com.

Psychological strategies

People's experience of pain is varied and staying positive can be difficult, especially if you've had pain for a long time. Low mood, anxiety, fear and distress are common reactions to chronic pain. The Australian Pain Management Association's website describes how long-standing pain puts stress on the brain and cognitive issues such as difficulty with memory or concentration can result.

They say the psychological effects of chronic pain can reduce quality of life for the pain sufferer and their family. Sometimes, the psychological effects can outlast the pain and become the major problem. Chronic pain that is poorly managed can lead to less sleep, exhaustion, work and relationship difficulties and psychological distress. In turn, this can aggravate pain. Breaking this cycle is essential for maintaining wellbeing.

One way to achieve this is with healthy lifestyle changes, including healthy eating, regular physical activity and maintaining regular sleep patterns. Other effective strategies for managing pain are deep diaphragmatic breathing (DDB) and guided imagery (GI), says Dr Judy Lovas, a presenter on evidence-based relaxation and the director of Art & Science of Relaxation.

"DDB and GI provide people simple self-care strategies and practical skills to reduce pain and offer greater control," Lovas says. "Today, there is plenty of sound scientific evidence that these two relaxation techniques can reduce perception of pain in a range of conditions and patient populations."

One study examined whether slow breathing reduces pain in a group of chronic pain patients compared to a control group. "Results of this study showed that women with fibromyalgia syndrome who slowly breathed at half their usual rate reported reduced rates of perceived pain intensity and unpleasantness compared to breathing at a

WellBeing

special report BACK PAIN

normal rate," Dr Lovas says.

"Slow breathing also significantly decreased negative affect [mood] compared to breathing at normal rate for both the pain group and the control group. While these results are subjective [self-reported], they demonstrate that a simple, easy skill such as regularly taking slow, deep breaths can reduce pain perception and negative mental states."

Guided imagery (GI) uses the "mind's eye" to visualise something for a therapeutic benefit. The regular practice of positive, achievable imagery has psychological and physical benefits that have been well researched, Lovas says. They include relaxation, reduced pain, improved concentration and better sleep. "One study of GI in a medical oncology inpatient unit showed decreased pain perception in patients immediately after the GI session," Lovas says.

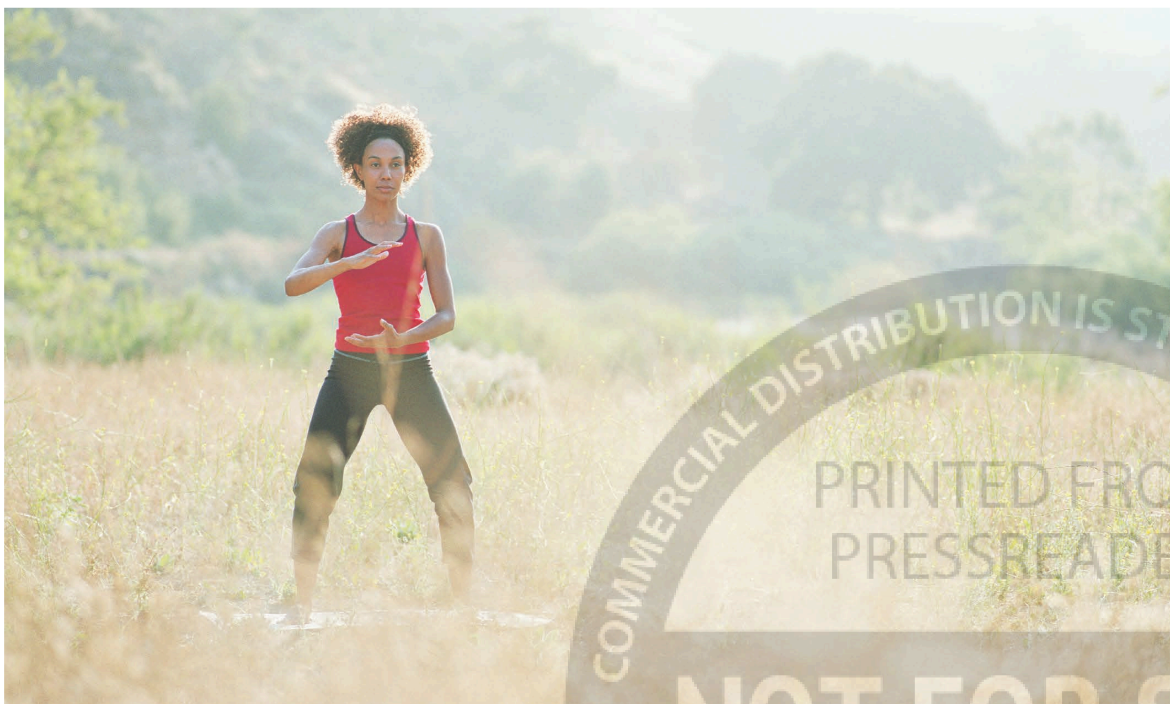
Brain imaging studies suggest GI may work because imagined movements share similar neural activity to actual movements, explains Lovas. GI involves using a script that

reflects each patient's experience of pain. "For example, someone may describe or visualise their pain as a red-hot ball. A GI script for them to practise daily would include visualising or imagining a reduction of the redness, the intensity and the size of the ball of pain. The GI script may describe their pain as a smaller, softer, more opaque circle."

Meditation and mindfulness techniques help to reduce muscle tension. Recognising unhelpful thoughts and replacing them with positive ones will help with mood, as will spending time doing things you enjoy. Schedule your relaxation and pleasurable activities so they become part of your daily routine.

If you're struggling to do this on your own or feel depressed, anxious or overwhelmed, seek help from a qualified psychologist or counsellor. They can offer specialised assessment and treatment to suit your needs.

•See psychology.org.au/FindaPsychologist or australiacounselling.com.au to locate a psychologist or counsellor. See also artandscienceofrelaxation.com.



Zucchini and pinenut



Nutrition

Given that abdominal obesity (fat in the belly area) is associated with back pain and inflammation, a healthy diet is very important. Losing weight can be difficult, so seek help for the best chance of success. The Dietitians Association of Australia website advises, "Keeping at your most comfortable weight means focusing on a healthy lifestyle, combining healthy foods with plenty of regular exercise."

It recommends eating a variety of foods from these five groups every day:

- Vegetables, including various types and colours, and legumes/beans
- Fruit
- Whole grains such as breads, cereals, rice, pasta, noodles, polenta, couscous, oats, quinoa and barley

- Lean meats and poultry, fish, eggs, tofu, nuts and seeds and legumes/beans
- Milk, yoghurt, cheese and/or their alternatives, mostly reduced-fat

It also recommends drinking plenty of water and limiting foods with saturated fat, added sugars, added salt and alcohol.

Accredited practising dietitians are qualified to provide tailored advice on weight management, based on the most up-to-date evidence. Nutritionists are also tertiary-qualified professionals who can advise on dietary strategies.

- Dietitians can be found at daa.asn.au and nutritionists at atms.com.au/nutrition.

Naturopathy

Christine Pope is a nutritionist, naturopath and homoeopath and a board member of the

WellBeing

special report
BACK PAIN

ATMS. She says a naturopathic consultation will look at your overall health and what physical triggers might be contributing to your pain. "At a minimum, they're always going to talk about bowels, because it's like the pipeline. Food coming in and food going out tells you a lot about how everything's working."

Based on their findings, a naturopath will devise an appropriate diet to reduce inflammation and promote healing (such as a Mediterranean or modified paleo diet). Pope says wheat and dairy are the major inflammatory suspects and eliminating them for four to six weeks will help most people. "You're including more natural sources of omega-3s like fish, avocado, nuts and seeds; cutting down on grains; and [including] lots of vegetables. Even though you can give supplements, most nutritionists prefer people to be eating real food."

Nutritional strategies also require an individual approach, Pope says. Someone who has back pain from an acute injury would be managed differently from someone who sits at a desk all day and is stressed and irritable, for example.

This would involve looking for gut symptoms indicating something in the diet is to blame: bloating, flatulence, abdominal pain, fatigue after eating, not feeling energised by food. These symptoms can indicate an allergy, such as soy, is causing inflammation. Pope uses food intolerance testing and sometimes the elimination diet or FODMAPs diet.

She advises against alcohol, which "may help self-medicate pain but it's not actually very good for your body. You're putting a lot of pressure on the liver to deal with the alcohol and that makes it less available to deal with the other things you need, like making anti-inflammatory mediators," she says.

Herbal remedies for pain often include anti-inflammatory turmeric, devil's claw and Californian poppy: "With herbal medicine,

what's really critical is putting together a combination of herbs that are appropriate to that person. You do need to look at what other medications they're on and what other contraindications there are."

Pope often recommends a European product called Traumeel, a synergistic combination of 14 natural ingredients with known benefits for inflammation and healing. It's available as a gel, ointment, tablets and drops. Herb teas can also help and Pope sometimes uses a product that contains celery seed, guaiacum, ginger, cat's claw, licorice, lemon myrtle and blue cornflowers.

Another element in managing inflammation is speeding up lymphatic clearance. Pope recommends celery seed, cleavers and plenty of water.

For best results, see a qualified practitioner rather than attempting to self-medicate with herbs. This will save you time and money by starting you on the right formulation, as well as avoiding potential harm from inappropriate products.

Smoking is another predictor for persistent back pain, so getting help to quit is a great idea. Talk to your doctor or visit quitnow.gov.au.
•For more information or to find a qualified naturopath, see atms.com.au/naturopathy or australiannaturaltherapistsassociation.com.au/therapies/naturopathy.php. 🌱