'The Back Tracker' for health professionals

These data come from many studies and the curve is the mean and standard deviation of all those studies. There were 33 different cohorts studied and a total of over 11,000 individuals.[1,2]

Most of the study populations are considered in the review to be representative of a normal population.

The authors of the meta analysis conclude, for people with acute back pain, that 'most were fully recovered at 12 weeks'.[1]

People with acute pain tend to have improved more than people with persistent pain at 12 months. Persistent pain is where the individual experiences pain for greater than three months and the persistent pain curve represents the natural recovery of an episode of aggravation during the ongoing low grade pain state of an individual with persistent

pain. It might be relevant to note that persistent back pain is USUALLY treated according to outdated models etc., so the person in front of you would expect to have a better long-term outcome.[3]

If patients are concerned that the tail wanders off, it might be helpful to explain that this represents an average – so there will be many in this cohort who are recovered at 12 months, but there will be some with severe pain, which pulls the average up.[3]

With inclusion of modern pain education in usual treatment and management, the average patient results should improve in years to come.

How do I use this tool?

You use this tool by talking to your patient about where they are at a particular point in time in their recovery and track this on the graph. The patient can then see the natural recovery pathway that they can expect.

There is a graph for acute pain and another graph for persistent pain.

The Back Tracker will:

- support your conversations with patients about natural recovery pathways

- be particularly helpful when the patient doesn't think they're going to get better

- help the patient to see where they sit along the recovery pathway

- collaboratively plan management tailored to the patient at a specific point in time

- act as a review resource at various points in time.

What happens if my patient is not improving and I get stuck?

If your patient is scoring higher than the standard deviations, these are a few ideas to consider.

- Reflect on clinical data and reassure
- Have a deeper analysis of danger in me (DIM) and safety in me (SIM) networks[4]
- Alter DIMs (usually by education) and increase SIM activities
- Keep encouraging movement and general exercise and alter grading and context
- Facilitate patient directed problem solving

- Explore and inform that pain may be above the usual band because of physical and/or emotional events
- Have a red flag review
- Reflect on whether recent medication changes or sleep patterns may contribute
- Have they been taking opioid medication for more than three months?[5]
- Consider possible multidisciplinary assessments and treatment contributions

Other long-term strategies to promote health and wellbeing.

- Be aware of good and bad days and modify activity accordingly
- Encourage problem solving to develop injury prevention and risk management skills
- Establish ongoing exercise routine
- Tap into this free personal coaching service for help with healthy eating, getting active and losing weight: www.gethealthy.sa.gov.au

1. Menezes Costa LC, Maher CG, Hancock MJ, McAuley JH, Herbert RD and Costa LOP (2012) The prognosis of acute and persistent low-back pain: a meta-analysis. CMAJ 184(11):E613-E624. DOI:10.1503/cmaj111271
2. Travers MJ, Bagg MK, Gibson W, O'Sullivan K, Palsson TS (2017) Better than what? Comparisons in low back pain clinical trials. Br J Sports Med 2017;0:1–2. doi:10.1136/bjsports-2017-098130
3. Pers. Comm. Lorimer Moseley, Body In Mind, UniSA City East, Adelaide, June 2019
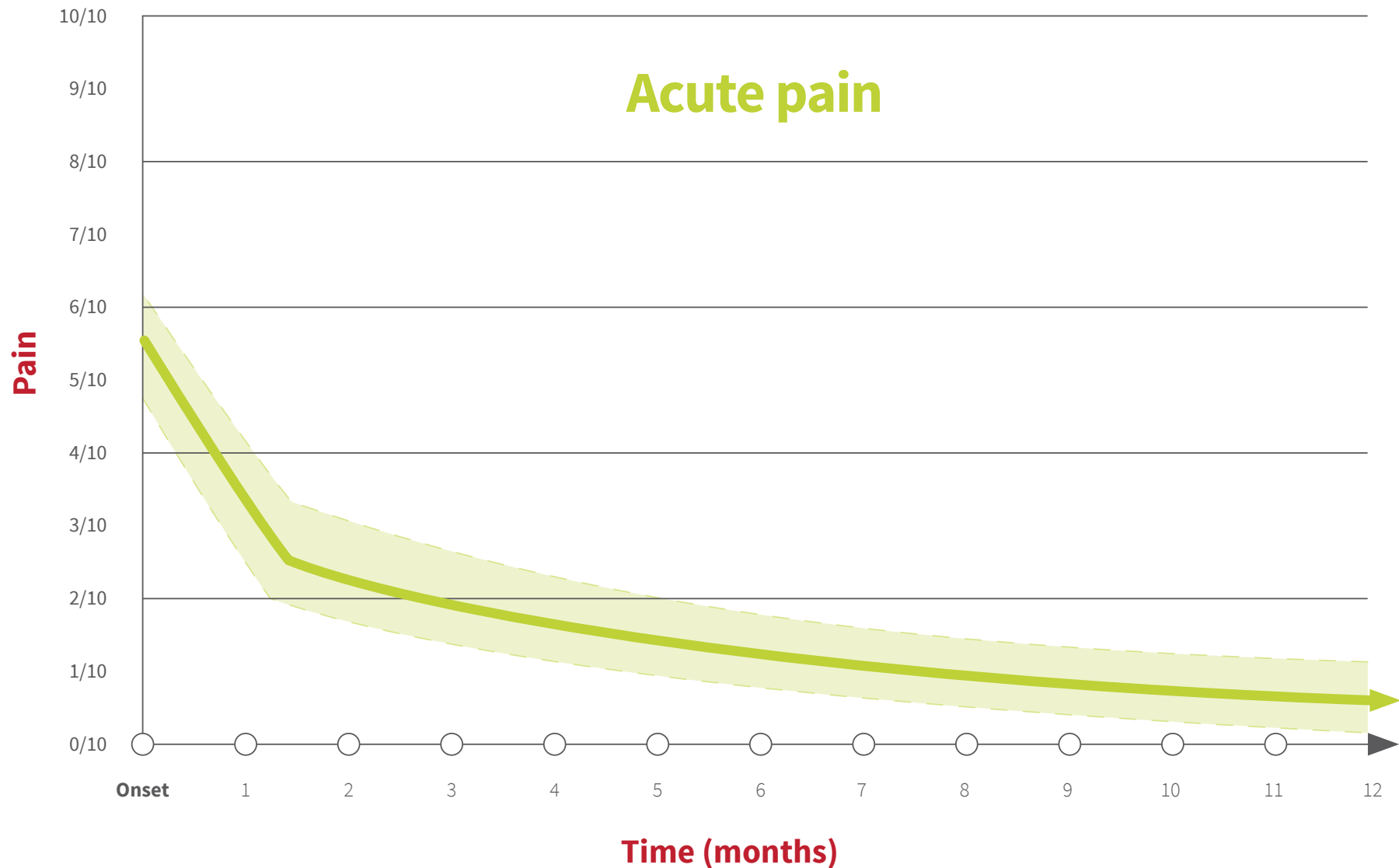4. Protectometer – GL Moseley and DS Butler (2015) The Explain Pain Handbook. Noigroup Publications, NOI Australasia Pty Ltd, p16
5. Reach for the facts on prescription opioids: www.reachforthefacts.com.au

The Back Tracker Part A

The mean and standard deviation of reported pain levels in patients with acute low back pain over time. [1,2]

This represents the normal variance in the natural progression of recovery from an episode of acute back pain.

Acute pain

Pain

10/10
9/10
8/10
7/10
6/10
5/10
4/10
3/10
2/10
1/10
0/10

Onset   1   2   3   4   5   6   7   8   9   10   11   12

Time (months)

The Back Tracker Part B

This represents the normal variance in the natural progression of recovery from an episode of aggravation of back pain within an underlying persistent pain presentation.

Persistent pain

Pain (y-axis): 0/10 to 10/10

Time (months) (x-axis): Onset, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12