What do patients with low back pain want when they seek care?

Stefano Negrini, Stefano Giovannoni, Silvia Minozzi, Roberta Carabalona, Alessandro Bussotti, Loretta Polenzani Società Italiana di Medicina Generale (SIMG), Florence -

ISICO (Italian Scientific Spine Institute), Milan - Care & Research Institute Don Gnocchi Foundation, Milan -Cochrane Center, Milan (Italy)

Introduction

The patients' perspective, that is their viewpoint, today is considered a critical element in the approach to many health-related problems; in case of a disorder so common and of a bio-psycho-social type as low back pain, the patients' opinion could be even more important than for other health-related problems. On the other hand, this aspect has until now been studied with respect to specific treatments. The aim of this study is to verify what patients want when they require help for a low back pain problem.

Epidemiological results

Lifetime prevalence of low back pain: 83.7%; last year prevalence: 74.3%.

Classification of low back pain: acute (less than 30 days) in 83.7%, subacute (from 1 to 3 months) in 6.3%, subchronic (from 3 to 6 months) in 1.9%, chronic (more than 6 months) in 8.0%.

Reported pain intensity was: the worst pain they ever felt in 13.7%, a strong but bearable pain in 45.0%, a pain manageable without problems in 41.3%.

Methods

The study has been conducted in a family medicine setting, in order to analyse a general population. We studied 592 patients, selected by "Health Search" general practitioners, that constitute a research group of the Società Italiana di Medicina Generale (SIMG), formed by a standardized sample which is epidemiologically representative of Italian population. The questionnaire included 11 questions that required about 5 minutes to be answered to. Each doctor that took part to the study selected 20 consecutive patients who had been proposed the questionnaire at the doctor's office. The response rate was 98%.

Study results (1)

Main results are listed in the table.

Study results (2)

In 34.5% of the cases, some exams were performed (20.7% requested by the patient, 13.8% prescribed by the doctor), but after these exams only 34.5% has felt totally relieved and 13.9% partially, while 12.2% has worried more and for 39.5% nothing had changed. There were no differences according to the classification of low back pain.

Question	General results	Acute LBP	Subacute and Subchronic LBP	Chronic LBP
The patients asked for help to				
Family doctor	65.8%	67.1%	56.5%	62.1%
Specialists	17.2%	17.9%	26.5%	20.9%
(orthopaedist: 65.6% -	7 %	-11-3		- 4
physiatrists 12.5%)				
	Chi square		P < 0.001	
Patient's requests (multiple cho	ice answer)			
Help in eliminating pain	58.2%	59.2%	49.7%	54.2%
Knowing the cause of pain	32.1%	32.5%	29.9%	37.2%
Help in order to be able to do	19.5%	16.3%	40.4%	28.2%
everyday tasks (work and		4 6		
family)				
Be reassured about the	12.9%	14.6%	2.2%	2.2%
severity of the situation				
Be given treatment	10.4%	10.4%	10.9%	11.4%
	Chi square		P < 0.001	
Satisfaction of request				
Complete	56.8%	57.7%	59.0%	48.6%
Partial	37.6%.	36.7%	40.0%	40.5%
No	5.6%	5.7%	1.0%	10.8%
	Chi square		P < 0.001	

Discussion

Patients' requests varied greatly according to the duration of pain. Anyway, first of all it must be noticed that, since the question included multiple choice answers, as much as 38.8% did not ask to be relieved from pain. Interestingly this request was higher in acute and chronic patients, i.e. in cases in which the pain is just arrived or in which is more oppressive. In sub-acute patients more than half of the patients were not interested in relieving pain; the main topic for this population, much higher than in the others, was to receive help in taking care of everyday activity of life and profession, while the cause of pain seems to be much less important. The retrieved differences are really highly interesting, because it seems that when the pain is just arrived and there is no worry (acute), the situation is closer to that when the hope of solving the situation is almost lost (chronic) than to that when you begin to worrying (sub-acute). In this line there is the highest request of specialists' intervention in the last population than in the others, while the discouragement of chronic low back pain people is apparent when satisfaction with patient's request is asked. Also the results on the low satisfaction after the prescription of exams are significant, because radiographs are often prescribed by GPs just with the idea of answering to a patient's request (however formulated in about 20% of the cases). Finally, to our knowledge, this is the first study that analyses, with an adequate methodology, the epidemiology of low back pain in Italy, and that proves that data do not diverge much from international ones.

Charles C, Gafni A, Whelan T. Decision-making in the physician-patient encounter: revisiting the shared treatment decision-making model. Soc Sci Med 1999;49(5):651-61. Ford S, Schofield T, Hope T. What are the ingredients for a successful evidence-based patient choice consultation?: A qualitative study. Soc Sci Med 2003;56(3):589-602. Guadagnoli E, Ward P. Patient participation in decision-making. Soc Sci Med 1998;47(3):329-39.

O'Connor AM. Rostom A. Fiset V. Tetroe J. Entwistle V. Llewellyn-Thomas H. et al. Decision aids for patients facing health treatment or screening decisions: systematic revi

O'Connor AM, Rostom A, Fiset V, Tetroe J, Entwistle V, Llewellyn-Thomas H, et al. Decision aids for patients facing health treatment or screening decisions: systematic review. *Bmj* 1999;319(7212):731-4.

Phelan EA, Deyo RA, Cherkin DC, Weinstein JN, Ciol MA, Kreuter W, Howe JF. Helping patients decide about back surgery: a randomized trial of an interactive video program. Spine. 2001 Jan 15;26(2):206-11

Verbeek J, Sengers MJ, Riemens L, Haafkens J. Patient expectations of treatment for back pain: a systematic review of qualitative and quantitative studies. Spine. 2004 Oct 15;29(20):2309-18.