

A CROSS-SECTIONAL STUDY TO FIND THE KNOWLEDGE, ATTITUDE AND PRACTICE OF LOW BACK PAIN AMONG FEMALES IN AND AROUND ANAND DISTRICT

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Abstract: A Cross Sectional study was done on Females suffering from Low Back Pain. Total 50 subjects were selected fulfilling the Selection Criteria. They were interviewed by a Questionnaire which was designed self-reported information on Knowledge, Attitude and Practice of LBP According to the Knowledge among Females, The Occurrence of low back pain is 54% very common and the common age group is 31 to 45 years. The Results of Attitude shows that, Affection on lifestyle and work performance is reduced by 76.3% and 95.15% respectively. The Practice of low back pain among females shows that, they try home remedies (70.45%) before taking medical advice or treatment. There is a lack of knowledge about low back pain regarding the age of affection, causes and treatment option. There are misconceptions in the community regarding attitude towards low back pain as most people prefer rest whilst suffering from low back pain. Most of the people opted for home remedies as a treatment for low back pain. A study to find the Knowledge, Attitude and Practice of Low Back Pain among Females in and around Anand District.

Key words: Low back Pain, Prevalence, Treatment of LBP, Approaches, Acute and Chronic Low Back Pain.

Introduction:

Low back pain is defined a pain, muscle tension, or stiffness localised below the costal margin and above the inferior gluteal fold with or without referred or radicular leg pain (1). Back pain can be caused by a wide variety of factors. This includes structural problems of the back, inflammation, muscle and soft tissue injury, secondary response to other diseases or conditions, imbalances in body mechanics and psychological /social factors (2). Over 70 % of people in resource-rich countries will experience low back pain at some time in their lives(1). Considering the life time prevalence of 60% to 85%, it will eventually affect almost everyone during working life-men and women equally (3). In western countries life time prevalence of low back pain ranges from 15% to 45%(4).

In India the occurrence of low back pain is also alarming; nearly 60 % of people in India have significant low back pain at some time or other in their lives (5). There is evidence that 12% to 26% of children and adolescents experience low back pain although most cases of low back pain occur in persons between that ages of 25 and 60 year, peaking at about 40 year (6). Disability is obviously related to low back pain. It includes many personal, social and economic factors; examples of which include job dissatisfaction, personality differences, supervisor conflicts, domestic problems, compensation laws, management policies and practices, unemployment rates and litigation (7). Low back pain is now the first cause of work loss and absenteeism. Patients suffering from chronic LBP only represent 2–7% of all LBP patients, but they are responsible for 75–85% of total workers absenteeism and for 80% of LBP costs (4).

It has long been recognized that the patient's attitudes and beliefs about their low back pain can play a big part in how well their pain is managed. Now new research confirms, a patient's level of knowledge about the condition is also critical as well as their willingness and ability to use that knowledge (8). Treatment for low back pain may last from a few weeks to several months and usually takes a multimodal approach, in which several different therapies such as drug, physical, interventional, complementary, psychological are used in combination with one another (9).

- Drug therapy includes NSAIDs, analgesics and opioids.
- Physical therapy includes strengthening of weakened muscles while minimizing the stress on the spine along with walking, swimming or cycling on a stationary bike. It is tailored to the patient, with gradual increase in duration.
- Interventional therapy alleviates low back pain through a variety of invasive treatments including epidural steroids, injections, joint and nerve blocks and analgesic pump devices.
- Complementary therapy includes acupuncture, massage, meditation and yoga, herbal remedies, chiropractics, and hot and cold packs.
- Psychological therapy includes counselling (single or group).

There are very few studies that state about the awareness of treatment for low back pain in general population in India. Low back pain is a leading cause for ill health and being neglected due to lack of awareness regarding treatment, by the community. Thus we have taken up this survey to know about the knowledge, attitude and practices in low back pain in the community for the same.

Materials and methods:

Research Design: Cross Sectional study

Sampling method: Convenient sampling

Population: In and around Anand district.

Subject Recruitment Procedure: Every consecutive subjects suffering from low back pain and satisfying inclusion and exclusion criteria will be recruited for the study.

Inclusion Criteria:

1. Subjects over 30 years of age.
2. Subjects currently suffering from low back pain.
3. Subjects who have suffered from low back pain within the last one month.

Exclusion Criteria:

1. Subjects who are mentally unstable.
2. Subjects with any infectious and other autoimmune disorders.

Materials

1. Questionnaire
2. Pen
3. Paper

Methods:

A convenient sampling from the general population of in and around Anand was taken. Subjects were selected fulfilling the selection criteria and they were interviewed by a questionnaire which was designed to ascertain self reported information on knowledge, attitude and practices of low back pain amongst the patients in the community.

Prior detailed explanation about the study was given to the subjects. They had also been explained about the study and the questionnaire required for the study. Both were provided in the vernacular language whenever needed.

The answers given by the subjects were collected, recorded in questionnaire and based on that analysis was done of the collected data.

Results:

50 Females with low back pain participated in the study. Demographic characteristics and baseline measures of all data are presented in Table 1. The average age of all subjects was 46±11.30. Figure 1 show the Profession of subjects, which is categorized in Working and Non working.

DEMOGRAPHIC CHARACTERISTICS AND BASELINE MEASURES (All data are presented as MEAN ± SD)	
Characteristics	
Age in Years	46±11.30
Profession Working/Not working	23/27

Table 1 Demographic Characteristics

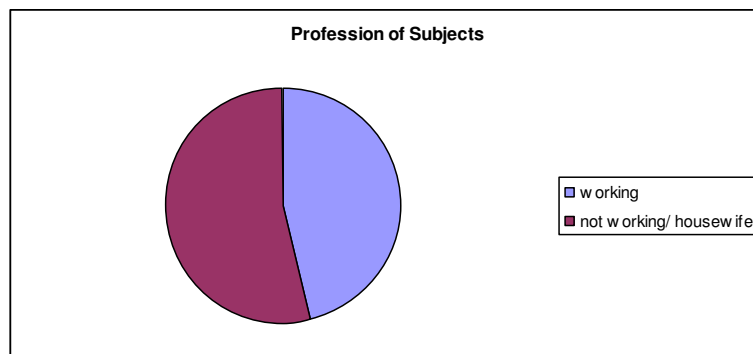


Figure 1 Profession of subjects

The following three aspects were focused upon:

1. Knowledge in the community about low back pain.
2. Attitude of the community towards low back pain.
3. Practices of the people suffering from low back pain.

Table 2 shows the knowledge among females suffering from low back pain in and around Anand district. According to that, the Occurrence of low back pain which about 54% is very common and the common age of low back pain among females is 31 to 45 years(Figure 2 and 3).

KNOWLEDGE ABOUT LBP		PERCENTAGE
Occurrence	Very common	54.37
	Common	35.62
	Not common	7.50
	Don't know	2.51
Common Age in years	1-15	0.64
	16-30	31.87
	31-45	55.62
	46-60	3.75
	>60	8.12
Common Causes	Prolonged	41.87
	Sitting/standing/walking	29.37
	Excessive work load	11.87
	Heavy weight lifting	8.12
	obesity/ Pregnancy	8.75
	Others	

Table 2 Knowledge of low back pain among females.

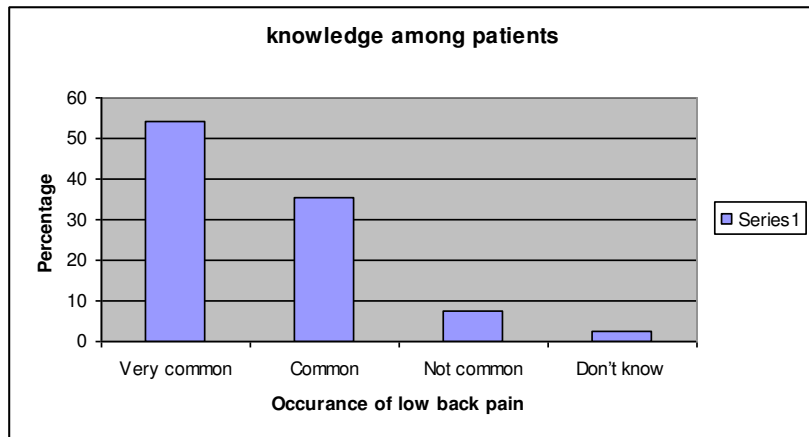


Figure 2 Knowledge of the occurrence of low back pain.

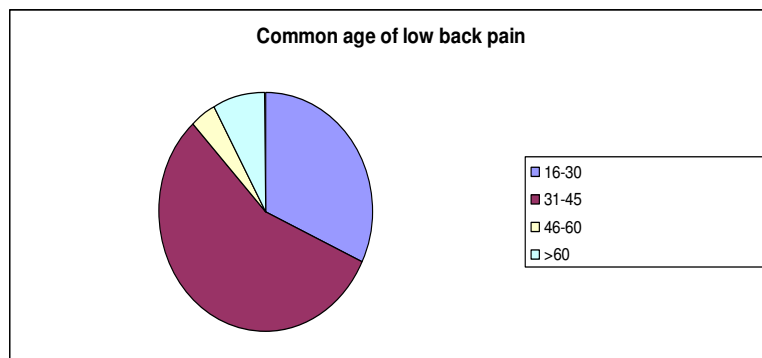


Figure 3 Knowledge among patients about the common age of low back pain.

Figure 4 and 5 shows the Aggravating and Relieving factors respectively. According to that, Prolonged Sitting/ Standing or Walking aggravates Low Back Pain (68%) and 95% Subjects believe that Rest is the cure (Relieving factor) of LBP.

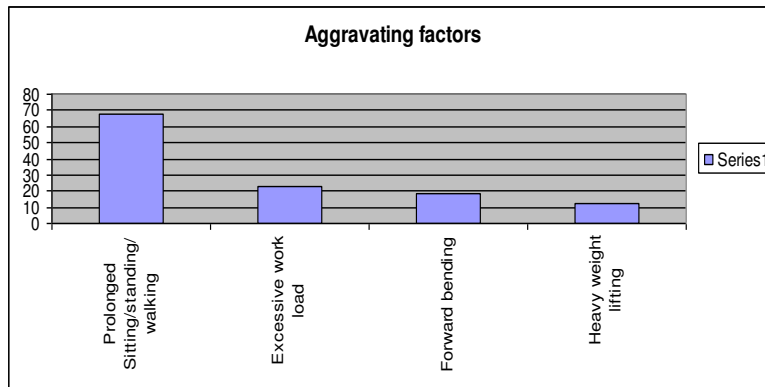


Figure 4 Aggravating factors of low back pain.

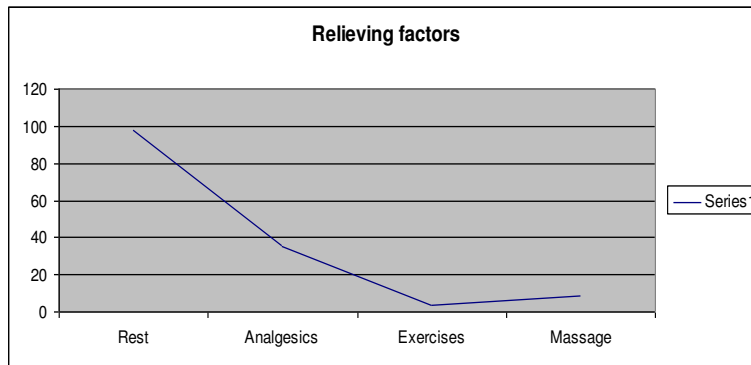


Figure 5 Relieving factors.

The results of Attitude towards low back pain among females shows that, Affection on lifestyle and work performance is reduced by 76.30% and 95.15 % respectively. There are different approaches towards low back pain which is shown in Figure 6. According to that 61.2% of low back pain Patients prefer rest and ignore the medical care for the same.

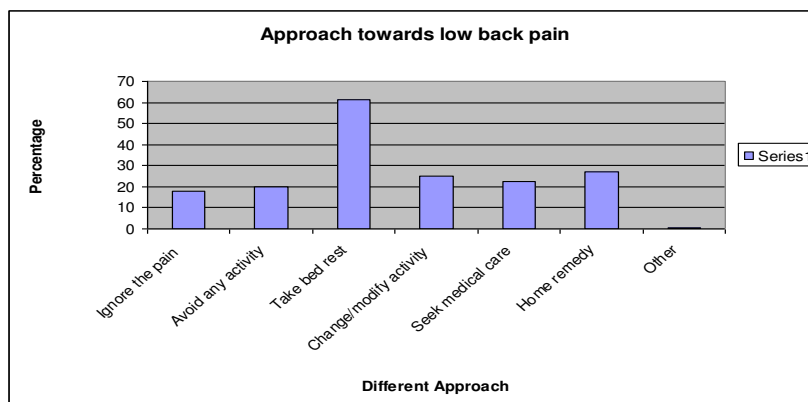


Figure 6 Approach towards low back pain.

Figure 7 and 8 shows the results of Practice of low back pain among females in and around Anand district. According to that 70.45 % of individuals try home remedies before taking any treatment and 48.49% of individuals discontinued the treatment due to complete relief.

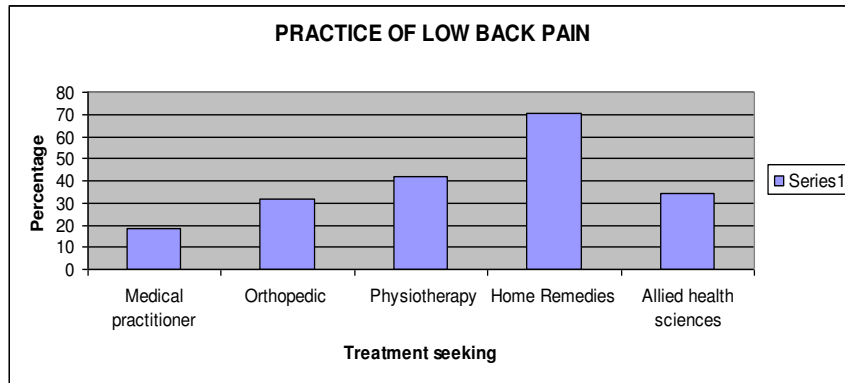


Figure 7 Practice of low back pain.

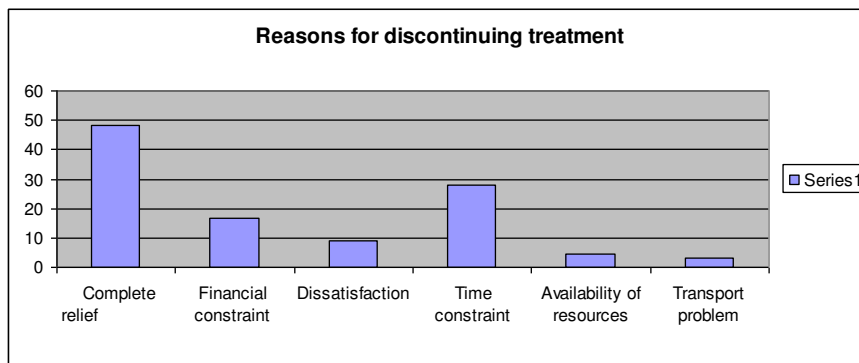


Figure 8 Practice of low back pain.

Discussion

In this Cross sectional study, total of 50 female subjects had participate. The Knowledge, Attitude and Practice about low back pain among these female subjects have shown in results. The occurrence of low back pain is high (54.3%) and the knowledge about common age group which is affected by low back pain is 31 to 45 years (55.6%). The common causes of low back pain are prolonged sitting, standing or walking. **A. Burdorf et al** have stated that there potential impact of physical load on disability due to low back pain among workers with exposure of physical load (16). **AC Odole et al** did a study on low back pain at work to find out Knowledge and Attitude of Sectional Heads at the University College Hospital, Ibadan. The aim was to identify the difficulties and Organizational needs required in the management of LBP at work, and they concluded that there was no significant association between respondents’ knowledge and attitude towards managing workers with LBP and they also have poor knowledge but a positive attitude towards managing workers with LBP (6).

Low back pain affects individual’s lifestyle by reducing work efficacy (76.3%) and also it reduced daily activities (77.7%) of individuals. There are different approaches individuals try due to low back pain (Figure 3). Bed rest is very common approach females tend to do during low back pain (61.2%). According to the result females follow home remedies before taking proper treatment under medical advice. There are moderate populations who follow physiotherapy treatment for low back pain, but the awareness of Physiotherapy has increased in past few years. There are 48.4% of subjects discontinued the treatment due to complete relief. There are 17.8% of individuals who are not aware about the treatment of low back pain.

Conclusion:

There is a lack of knowledge about low back pain regarding the age of affection, causes and treatment option. There are misconceptions in the community regarding attitude towards low back pain as most people prefer rest whilst suffering from low back pain. Most of the people opted for home remedies as a treatment for low back pain.

Limitations of the study

- The sample size is small.
- The data collection relied entirely on the information given by the subject, hence it is totally subjective.

References:

- 1) Erik L. Werner; 'Media campaign for improving knowledge, attitude and practices in low back pain' at the university of Bergen,2008; 3-85.
- 2) Department of pain medicine and Palliative care-Low back pain-causes. stop pain.org.
- 3) Greg McIntosh and Hamilton Hall, Low Back Pain/Musculoskeletal Disorder ; British Medical Journal, 2009
- 4) A Burdorf and J P Jansen; 'Predicting the long term course of low back pain and its consequences for sickness absence and associated work disability'; occupational and environmental medicine ; august 2006;v.63(8);522-529
- 5) C'ecile Poulain et al; 'Long term return to work after a functional Restoration Program for Chronic low back pain-Prospective study'; Eur Spine J. 2010; 19(7);1153-1161.
- 6) Shyamal Koley, Gurpreet Singh and Rupali Sandhu , 'Severity of disability in elderly patients with low back pain in Amritsar, Punjab', Anthropologist Journal 2008, 10(4), 265-268.
- 7) Len Kravitz and Ron Andrews , 'Fitness and low back pain.'
- 8) Sean Gallagher,'Reducing Low back pain and disability in mining', National institute for occupational safety and health'; September 2008; 12.
- 9) Department of pain medicine and Palliative care-Low back pain. stop pain.org.
- 10) Leboeuf-Yde C, Kyvik KO; 'At what age does low back pain become a common problem? A study of 29,424 individuals aged 12-41 years', spine J. January 1998; 23(2); 228-34.
- 11) Ms. Michelle Emelia Lobo; 'Knowledge, attitude towards low back pain and it's occurrence among pre-university collage student in urban Mangalore – A survey
- 12) Schneider S, Randoll D et al, ' Why do women have back pain more than men? A representative prevalence study in the federal republic of Germany.' Pub med.gov; October 2006;v 22(8); 738-47.
- 13) SS Tavafian et al, 'Patient's knowledge, perception and belief about the reasons of low back pain.' Iranian J Publ Health, 2004; v 33(4); 57-60.
- 14) Antti Malmivaara et al, ' The treatment of acute low back pain- Bed rest, Exercise, or Ordinary Activity?' N Engl J Med 1995;v 332;p 351-355.
- 15) Ketan C Pande, ' Psychological disturbance in Indian low back pain population.' 2004; v 38(3);p 175-177.
- 16) A Burdorf et al. Predicting the long term course of LBP and its consequences for sickness absence and associated work disability.OccupEnvironMed2006;63:522-529.