

Understanding Back Pain

The Diagnostic Work-up for Back Pain, is It Always Necessary?

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Back pain often occurs in the absence of significant underlying disease. Recurrent back pain or chronic back pain often leads to a diagnostic workup involving multiple types of tests. The most common form of testing used for the workup of back pain is diagnostic imaging. The workup itself often uncovers a variety of structural abnormalities many of which are related to age and degenerative changes. The attending physician must always be careful not to misdiagnose the cause or causes of a patient's pain, especially when it may lead to an aggressive intervention with increased risk of adverse side effects.

Many physicians try to comply with the healthcare system expectations of 1) examine, 2) diagnose, and 3) treat, following that order. Most physicians feel obligated to try to confirm the source of pain in the spine. But this is often a daunting task. Most patients will ask their doctors to give them a specific reason for the pain which leads to further evaluation. A wrong diagnosis can lead to incorrect treatment, unnecessary treatment and sometimes harmful treatment. In some cases, the back pain will improve whether or not treatment was administered and whether or not an accurate diagnosis was rendered.

Some studies have shown that a definitive diagnosis causing the back pain can be provided in 10-20% of injuries with back pain. Approximately 80% of individuals who suffer with back pain will recover within a few weeks without treatment. Physicians must be careful not to quickly attach a pain diagnosis based upon imaging studies alone. X-ray, CT, and MRI are primarily used to evaluate structure, and therefore can not be used confirm the presence of pain. They are used to look for abnormalities, which may be associated with pain or dysfunction.