



Netcare Waterfall
City Hospital



LOWER BACK PAIN: THE MYTHS & TRUTHS REVEALED

Almost 80% of people will experience lower back pain at some stage of their lives.

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Lower back pain is often poorly understood and there are many misconceptions surrounding treatment, especially when it comes to spine surgery. In this article we look at some of the myths and facts surrounding this complex symptom.

Myth: Back pain can only be treated by spinal surgery.

Most cases of lower back pain can be treated without the need for surgery, using various modalities such as physiotherapy, biokinetics and medication. There are only specific indications for spinal surgeries, such as spinal instabilities, neurological compromise, tumours and trauma.

Myth: Back pain cannot be cured and I will have back pain for life.

Once the correct cause has been found, back pain can easily be managed with a multidisciplinary team approach.

Truth: More pounds more pain.

Lower back pain is often associated with obesity and being unhealthy. Staying fit and healthy leads to better back health.

Truth: Exercise can help with lower back pain.

Strenuous exercise can cause back pain, but regular, moderate exercise can help you avoid pain. Your spine needs a regular regimen of stretching, strengthening and

aerobic conditioning exercises, such as swimming, yoga, and walking.

Truth: Lower back pain can be a sign of something serious going on.

The causes of lower back pain are vast, and the pain can come from either the spine itself, or referred pain from other organs or joints such as the hips, liver, kidney, bladder, or uterus. It is therefore important to get assessed when the pain is concerning.

Myth: My mattress causes me lower back pain.

Studies have shown that there is no correlation between one's mattress and lower back pain, however it is advisable to always choose a mattress that is comfortable for you, as each of person is different.

Myth: My back pain came from my parents.

Although there are specific genetic conditions that cause lower back pain, lower back pain itself has no genetic link and the cause may be different in each person.

Truth: Stress can cause lower back pain.

This is true. Stress and other psychological matters can be associated with lower back pain, therefore we recommend a multidisciplinary team approach to the management of lower back pain which may include lifestyle changes.

Truth: Massage, heat packs and bedrest will help my pain.

This is also true. With sudden onset pain it is wise to have short periods of rest; heat and massage in the form of trained physiotherapists will help, however it is very important to find the cause first.

Myth: If I take medication for lower back pain I will become addicted.

Most medications prescribed for lower back pain are for short courses and part of additional therapies and you will not get addicted if the medication is taken correctly.



Any surgery, spinal or other, has risks associated with it and your doctor will discuss all of these with you beforehand and provide you with all of the options available. With modern diagnostic and monitoring equipment these risks are often minimised.

Myth: If I don't get surgery I will become paralysed.

This is a common misconception: very rarely will one end up with paralysis from lower back pain. Lower back pain itself will not lead to paralysis, there must be other causes.

When should one see a Spine Surgeon?

- Severe Lower back pain not controlled by conservative methods;
- Lower back pain with a weak bladder or trouble urinating;
- Pain radiating to legs or arms;
- Any weakness, numbness, pins and needles in the arms or legs;
- Fractures of the spine: including osteoporotic fractures;
- Children with back/spine problems;
- Lower back pain with significant weight loss.

Netcare Waterfall City now has a fully-integrated Spinal Team. It is well known that most spine disorders, specifically involving lower back pain and neck pain, are best managed using a multidisciplinary team approach. The Netcare team involves an Orthopaedic spine surgeon, a Neurosurgeon, a Physiotherapist, a Biokineticist, Dietician and a Psychologist. Each member of the team has a special interest or further training in the management of spine conditions.

The team uses a patient-based approach combined with shared protocols to ensure each patient is comprehensively assessed and treated. The team approach also means no unnecessary surgeries and true surgical cases are correctly identified, worked up and prepared. Team based post-operative care is also ensured. 