

Spine and public health- the stakes are high!

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Abstract

Spine-related disorders represent a massive growing global problem in terms of rising costs, disability, work loss and worsening outcomes. These issues are often closely associated with high stress, fatigue, poor sleep, sedentary lifestyle, weight gain, smoking and overmedication.

We can all agree that there's a lot of mismanagement of these patients in general, with no real guidance or education on self-management. Low back pain, in particular, is the quintessential biopsychosocial problem. It often emerges around times of rapid change and/or social change e.g. adolescence, pregnancy, menopause and even transitions into retirement. These issues are multifactorial and thus there is a growing need for multi-modal interdisciplinary approaches. People are increasingly searching for effective non-pharmacological interventions. The most recent studies provide even more compelling evidence that acute back pain often becomes chronic and long-standing due to early non-guideline concordant care and/or recommendations. Back pain requires a lot of creativity and focus at the front-end/first-contact i.e. The patient's "point of entry" into the system.

So what do we do?! For one, people need to be educated before they even get to our rooms, misconceptions need to be addressed. The biomedical, pathoanatomical model of 'structural damage' needs to be laid to rest. There's a big opportunity here. Back pain gives us a teachable moment not seen in other chronic conditions. People in pain are far more likely to comply with advice to exercise, lose weight, reduce smoking and improve their diets, and this has a positive spill-over effect on conditions like obesity, diabetes, hypertension, depression etc.

This represents a massive opportunity for individual clinicians to impact the health of communities. Essentially, it serves as a springboard for self-care at many levels.

*These disorders include back and neck pain, "pinched" nerves (e.g., sciatica), shoulder pain, fibromyalgia, arthritis/spondylosis and even knee/leg pain.

Biography

Kanwal Sood has been in private practice in Durban, South Africa for the past 12 years and was also the team physician for Jaguars club rugby team during the first 3 years of his practice. Along with Dr Junaid Shaik he formed KZN Spine Care, a group practice collaboration focusing on engaging with the public and wider medical community. He's also part of the Primary Spine Provider Network (PSPN) team. The PSPN is a digital best evidence training, support and professional development platform for spine providers around the world. He is special interests include interdisciplinary primary spine care, integrated community health models and public health.

