



MANAGING BACK AND NECK PAIN IN THE TIME OF COVID-19

PATIENT GUIDE

RECOMMENDATIONS FROM WORLD SPINE CARE

ADAPTED FROM [THE GLOBAL SPINE CARE INITIATIVE](#)

Recommendations from World Spine Care

As a result of the current **COVID-19 pandemic**, most healthcare providers who commonly treat or advise patients who are experiencing spinal pain (low back, middle back and neck pain) are unable to see patients. These Primary Spine Care Clinicians include chiropractors, physical therapists, osteopaths, and family/general physicians.

In most jurisdictions, secondary and tertiary medical specialists and surgeons including orthopedic surgeons, neurosurgeons, rheumatologists, pain management physicians, and neurologists have been forced to limit their practices to emergency or critical patients.

However, spinal pain and other disorders have not gone away. People are still experiencing back and neck pain and are having to cope with the discomfort, disability and disruption of life that these conditions can cause.

Patients can become very anxious when they experience back or neck pain and feel neglected when they are unsure how to deal with these symptoms and unable to see their chiropractor, physical therapist, acupuncturist, osteopath, family/general physician or specialist for advice on what to do.

World Spine Care, in conjunction with the Global Spine Care Initiative, has developed an evidence-based model of care that can be modified so that patients can help themselves or be helped by their clinicians - while at the same time avoiding, or markedly limiting the degree of direct contact.

KEY POINTS

1. For most people experiencing back or neck pain it is not necessary to have a face-to-face office visit with a licensed clinician (chiropractor, physical therapist, osteopath, or family physician) during periods of social and/or physical distancing.
2. Except in emergencies, Telehealth communication with a licensed clinician familiar with spine related treatment should be considered before considering an office-based consultation. This can include talking to a clinician by phone or preferably by videoconferencing.
3. Unless advised by a licensed clinician, it is important to avoid going to the emergency departments of a hospital, the services of which are already being stressed by COVID-19 patients.

DISCLAIMER

This guide should only be considered in situations where social isolation is required or where clinicians or patients have elected to reduce contact, due to COVID-19, to those who require urgent or emergency care. It is expected that patients and providers will continue regular care as soon as any restrictions are lifted.

This Guide is being provided as a public education service. WSC assumes no responsibility for any legal issues that may arise. Patients should always follow the recommendations of a licensed clinician.

This Guide was developed by a multidisciplinary panel of 28 spine care authorities and clinicians from 10 countries on 4 continents.



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STEP 1

I HAVE BACK OR NECK PAIN OR SYMPTOMS INCLUDING PAIN, NUMBNESS OR WEAKNESS IN MY ARMS OR LEGS OR HEADACHES THAT MIGHT BE COMING FROM MY BACK OR NECK. HOW DO I DETERMINE THE SEVERITY OF THESE SYMPTOMS?

Answer the following 5 questions to determine whether it is necessary to seek professional help.

Your responses will help to determine the health care you should consider and the urgency or your condition (Telehealth, in-office visit, or emergency care). This can be done personally, or with the help of a licensed clinician or first responder via a Telehealth consultation by phone or videoconferencing.

1. What are my problems/symptoms?

- a. No or minimal discomfort
- b. Mild pain
- c. Moderate pain
- d. Severe pain
- e. Numbness or tingling
- f. Muscle weakness
- g. Loss of balance
- h. Recent onset of bladder or bowel problems like loss of control

2. Do I feel pain beyond my spine?

- a. No
- b. Down both legs
- c. Down one leg
- d. Down both arms
- e. Down one arm
- f. New or different headaches
- g. Chest pain

3. Are my symptoms stopping me from doing my normal activities?

- a. No. I can do everything
- b. Yes, a little. I can do most activities
- c. Yes, a lot. I have difficulty doing anything

4. Have I had a recent fall or accident?

- a. No
- b. Yes

5. Do I have, or have I had, any other serious diseases?

- a. No
- b. Cancer
- c. Infection such as Tuberculosis or HIV/AIDs
- d. Osteoporosis or steroid use
- e. Any condition that causes inflammation of my joints or muscles
- f. Any condition that affects my nerves or brain

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STEP 2

NOW THAT I HAVE DESCRIBED MY SYMPTOMS, WHAT SHOULD I DO?

MINIMAL OR NO DISCOMFORT BUT NO OTHER SYMPTOMS

YES ON 1A AND NO ON ALL OTHER QUESTIONS.

It is not necessary for you to see a licensed clinician in the office. If concerned about activities that can cause spine pain seek information from a reliable source and stay active. Consider a Telehealth communication with your licensed clinician if you have questions.

MILD SPINE PAIN

YES ON 1B AND NO TO ALL OTHER QUESTIONS.

Office-based treatment by a licensed clinician is not usually necessary. Consider self-care recommendations and Telehealth communication with a licensed clinician.

SELF-CARE

- Keep moving and try to maintain as much of your normal activity as you can.
- Try applying heat or cold over the area of discomfort for 20 minutes maximum. Take care to avoid skin burns if too hot or cold.
- Avoid prolonged sitting or stationary positions.
- Consider home exercises and relaxation techniques such as yoga and tai-chi.
- Consider over the counter medication such as paracetamol, ibuprofen, and naproxen. These medications should not be taken without first contacting a medical physician if they have caused any prior adverse symptoms or if you have symptoms consistent with the flu.
- Mild spine pain is very common and usually does not become disabling. Usually the pain will improve or resolve within a few days or weeks.
- If the symptoms persist for prolonged period (greater than 6 weeks), consider contacting a licensed clinician who is knowledgeable about spinal disorders.
- Tests such as X-rays and MRIs are not very helpful in the decision of which treatment to consider.

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STEP 2

(CONTINUED)

MODERATE SPINE PAIN**YES, ON 1C AND 3B**

Office-based treatment by a licensed clinician is not always necessary.

Initially try self-care.

SELF-CARE

- Keep moving and try to maintain as much of your normal activity as you can.
- Try applying heat or cold over the area of discomfort for 20 minutes maximum. Take care to avoid skin burns if too hot or cold.
- Avoid prolonged sitting or stationary positions.
- Consider home exercises and relaxation techniques such as yoga and tai-chi.
- Consider over the counter medication such as paracetamol, ibuprofen, and naproxen. These medications should not be taken without first contacting a medical physician if they have caused any prior adverse symptoms or if you have symptoms consistent with the flu.
- Moderate spine pain is not uncommon. Usually the pain will improve or resolve over time.
- If the pain does not resolve over a period of 2 weeks, or the pain is intolerable, it may be necessary to seek the advice of a licensed clinician for recommendations on how to reduce symptoms.
- X-rays, MRI scans or other testing are generally not required unless the pain does not improve over a period of 6 weeks.

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STEP 2

(CONTINUED)

SEVERE SPINE PAIN

YES ON 1D AND 3C AND NO ON ALL OTHER QUESTIONS.

Office-based treatment by a licensed clinician is not always necessary.

Initially try self-care.

SELF-CARE

- Keep moving and try to maintain as much of your normal activity as you can.
- Try applying heat or cold over the area of discomfort for 20 minutes maximum. Take care to avoid skin burns if too hot or cold.
- Avoid prolonged sitting.
- Consider over the counter medication such as paracetamol, ibuprofen, and naproxen. These medications should not be taken without first contacting a medical physician if they have caused any prior adverse symptoms or if you have symptoms consistent with the flu.
- Severe spine pain is less common. Even severe spine pain, in most cases, in the absence of major injury, nerve symptoms or serious disease, tends to improve or resolve with time.
- If the pain is intolerable, it may be necessary to seek the advice of a licensed clinician for recommendations on whether you should be seen in an outpatient setting, require testing, and how to reduce symptoms.
- X-rays, MRI scans or other testing may be necessary.

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STEP 2

(CONTINUED)

SYMPTOMS CONSISTENT WITH NERVE PROBLEM

PAIN, NUMBNESS OR TINGLING IN ARMS OR LEGS (YES TO 1D AND/OR 1E).

MUSCLE WEAKNESS (YES TO 1F).

LOSS OF BALANCE (YES TO 1G).

NEW ONSET OF BOWEL OR BLADDER PROBLEMS (YES TO 1H).

SEVERE NEW ONSET OF HEADACHES OR CHEST PAIN (YES TO QUESTIONS 2B, 2C, 2D, AND/OR 2E).

Office-based treatment by a licensed clinician is necessary.

- If symptoms are of recent onset (less than one week), consider contacting a health care practitioner or emergency room/A&E for a detailed examination.
- If you have experienced recent onset of incontinence, loss of bowel or bladder function, or marked loss of balance, muscle weakness or difficulty walking, go to the emergency department.
- The licensed clinician or emergency physician will determine if you require X-rays, MRI or other testing and treatment.

POSSIBLE SPINE/BONE FRACTURE

SEVERE FALL OR ACCIDENT WITH SEVERE SPINE PAIN (YES ON 1C AND 4B).

Emergency treatment is necessary.

- Have someone call for an ambulance or nearest help.
- Keep still and do not move.

POSSIBLE COMPLICATION OF A SERIOUS PROBLEM THAT IS AFFECTING THE SPINE

YES ON ANY OF THE CONDITIONS NOTED IN QUESTIONS 5.

Seek care from a licensed clinician or medical specialist to determine whether your serious disease is causing your spine-related symptoms.

Diseases such as cancer, certain infections, and inflammatory rheumatologic diseases can impact the spine and cause pain.

REMEMBER,

You are empowered to self-assess. Your spine care provider is your partner in health, do not hesitate to reach out to them by phone or email if you have questions.

Thank You.

On behalf of World Spine Care and the Global Spine Care Initiative, we wish to thank the multidisciplinary panel of 28 spine care authorities and clinicians from 10 countries on 4 continents who provided their time and expertise into the development of this Guide.

Learn more about World Spine Care:
www.worldspinecare.org