



The myth about pain and physical damage

It is a common belief within society that there is a direct correlation to pain and something being damaged within the body. However, research shows that pain is much more complex than that and is actually influenced by a variety of factors. The latest studies show that pain does not always equal damage.



What is the evidence?

The stats below are 'abnormalities' that are found on scans in people without pain.

- ◆ 87% of people between the age of 20-70 years have a disc bulge in their neck
- ◆ 22% of middle-aged men have partial rotator cuff tears in their shoulders
- ◆ 78% of middle-aged men have bursitis in their shoulders
- ◆ 37% of 20-year olds and 96% of 80-year olds have disc degeneration in their lower back
- ◆ 43% of people >40 years have knee osteoarthritis
- ◆ 19% of people >40 years will have a meniscus tear in their knee

If these 'abnormalities' are found consistently in people without pain, then we cannot say with any confidence that pain correlates well with damage. This doesn't mean that abnormalities found on scans are not contributing to your pain, as that may well be the case - but the fact remains that pain is complex and multidimensional, and while these findings may have some impact, it is also likely that there are other factors also contributing to your pain. **Any approach to rehabilitation must address the multifactorial nature of each person's pain, as each person's pain is unique to them.**

A lot of these changes are often a normal part of ageing, or can occur years before we become aware of them. For example, you can tear a rotator cuff muscle in your shoulder without even knowing and continue to live a pain-free, normal life. You may then develop pain later for any number of reasons - a particular task that your body was not prepared for, poor sleep, or maybe you are feeling more stressed than usual. You might then be sent for a scan, revealing the tear that was there all along, but it is the tear that gets the blame! Let's consider...

- ◆ Does having wrinkles on your face give you face pain?
- ◆ Does going bald on your head give you head pain?
- ◆ Have you ever noticed bruising and have no recollection of how it occurred?

Why is this a positive message?

Of course, it can sometimes be quite confronting to receive a message like this, and it can be normal to think:

- ◆ "So, you are telling me that my pain doesn't exist and that I'm making it up?"
- ◆ "I know my back is damaged and that is what is wrong!"

Please, do not think this message is about saying your pain is not real... **ALL PAIN IS REAL!**

The point being made here is hopefully a reassuring one that we can take confidence in - **we do not necessarily need to fix these changes found on your scan to help with your pain.** There are other things we can do to help you, and these things will be very individualised, which is why it is critical that you are assessed by - and chat with - your Exercise Physiologist for a tailored intervention.

Let's take some reassurance from the evidence, and understand that as humans we are inherently strong, robust and adaptable - and that we don't need fixing before we start doing!

References:

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