

# Three Good Reasons to Avoid Surgery for Back Pain

*Written for PainChats by Dr David Hanscom, Spinal Orthopaedic Surgeon.*

## Stop and Think Carefully About Back Surgery

If you're considering having spinal surgery, it's important to know that surgery is not your best option for recovery from low back pain.

Surgery for relieving back pain has never been shown to be effective. In 2006, it was demonstrated that only 22% of patients were satisfied with the outcomes two years later. All research shows consistently poor outcomes for fusion surgery performed for back pain. You can't operate on something that you can't see, and you can't see low back pain. Surgery without a specific purpose is not the "definitive" answer for your pain.

There are three reasons to rethink fusion surgery for persistent back pain.

### Reason #1: Fusion Surgery Doesn't Help Pain

Fusion surgery is that it simply doesn't work. It's very difficult for anyone to identify the exact source of back pain. Surgeons and patients can only be confident about 5-10% of the time, so the source of pain cannot be indicated. Disc degeneration, ruptured discs, bulging discs, arthritis, and narrowed discs have been clearly shown to not be the source of chronic back pain. Yet these changes are the most common reason that surgery is suggested. A high percentage of people without any back pain have various disc disorders and by age 65 it reaches 100%. Those changes are normal, and it's most likely that other factors are causing the pain.



## Reason #2: Increased Risk of More Pain After Surgery

Several studies have shown that if surgery is performed in any part of the body in the presence of ongoing chronic pain, it can induce chronic pain at the new surgical site up to 60% of the time. In other words, if you are suffering from chronic neck pain and undergo a hernia repair, you can develop ongoing groin pain and it can be permanent 5–10% of the time. Normally a hernia operation is almost painless.

This data doesn't include surgery with complications. The re-operation rate within the first year of fusion surgery can be as high as 20%. The hardware used to hold the spine stable can impinge on the nerves, causing severe leg pain or weakness. Additionally, there is a significant chance that the spine will break down around the area of the fusion, requiring more surgery.

The chances of pain becoming worse are more than double the chances of sustained improvement. Spinal fusion is a major operation and the surgery-related pain is challenging to manage, even without a background of ongoing pain and sensitivity of the nervous system.

## Reason #3: Other Treatments Are More Effective

Chronic back pain can be reliably solved with the correct treatment approaches. Neuroscience research has revealed both the nature of the problem as well as the solution. Your brain memorizes pain just like an athlete, artist or musician learns his or her skill.

Because pain is so important for your survival, your brain quickly memorises and prioritises pain over other sensations. Once pain circuits are embedded in your brain, these circuits are permanent, similar to riding a bicycle.

This might not sound encouraging, but once you understand the neurological nature of chronic pain it's solvable. The key is to shift off the painful and unpleasant circuits onto functional and enjoyable ones or to create "detours" around them. This is achievable by using strategies that create changes in the brain. In other words, you're rewiring your brain.

These concepts have been around for several decades and have become especially popular in the last five years.

There are three aspects to the solution to chronic pain:

1. Learn about the complex nature of chronic pain
2. Have a plan for addressing the complex nature of pain (putting lots of self-management strategies together)
3. Take complete control of your own recovery process (with help and support from kind and knowledgeable health professionals).

## Personal Notes and Reflections

1. What information did you read here that is relevant to your pain experience?
  
  
  
  
  
  
  
  
  
  
2. What did you read here that surprised you, or that you disagree with? Why do you think that is?
  
  
  
  
  
  
  
  
  
  
3. Are there any actions that you want to take after reading this information?

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