

Low Back Pain and Ethnic Pregnant Women



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Abstract

Wide prevalence of low back pain was seen among pregnant ethnic women namely acute and sub-acute and localized. Number of published articles was critically reviewed to build up existing knowledge as well as find out knowledge gap. We know ethnic women lead diverse life style including living pattern, feeding style and traditional belief of remedy but specific research on low back pain among pregnant women residing in hilly, riverine and forest dense area is scarce. In addition, how traditional life style contributes to develop back pain during pregnancy need to be discovered on the basis of ethnicity.

Introduction

Document suggests that pregnant women often suffer low back pain which have negative impact on their quality of life, occurs mostly during first pregnancy [1]. Statistics shows that low back pain affects their daily activities even some of them are unable to work [2]. Pregnancy related LBP usually begins between five to seven months of gestation, considered to be the most significant risk factor for postpartum LBP and the existing literature indicates LBP as the leading reason for sick leave [3].

Critical review of Literature

The following passages highlight past literature which the research author believes bears relevance to the subject of the study. Back pain during pregnancy is common phenomena, half of all pregnancies are complicated by back pain [4]. Low back pain in pregnancy brings many changes in load and body mechanism both anatomically and physiologically resulting muscle fatigue in turn often results in poor posture and/or makes poor posture even worse [5]. Approximately one-third of patients reported that pain worsens at night time and more frequently disturbed sleep [6]. Pregnancy related back pain may not be avoided purely but can be reduce severity or frequency. Get plenty of rest, physiotherapist prescribed and guided exercises, avoid high heels, sleeping on the back, reduce some physical activities such as standing on one leg, climbing stairs, walking long distances and standing for long periods of time, maximize vocational ergonomics, take many short breaks, try to lie down, and educate pregnant women on structural fitness [7].

Low back pain is seen randomly during pregnancy; no trimester is immune. Oswestry disability index suggests scores up to 30 (mild to moderately disability). This literature recommended that sensitization of obstetrician and the orthopaedician to interact in a multidisciplinary approach would address the problem accurately and effectively [8].

Pregnancy triggers a wide range of changes in a woman's body leading to various musculoskeletal dysfunctions, most widely noticed are low back pain. Musculoskeletal dysfunctions and general discomforts very commonly affect the activities of daily living of pregnant women and understanding the common discomforts during various trimesters of pregnancy will help to develop a comprehensive program for prevention and cure [9].

At a study on Iranian women found the prevalence of LBP during pregnancy was 57.3%, which is nearly similar to most other countries [10]. In Swedish women the prevalence of low back pain during pregnancy was 49% [11]. In another study on Swedish women found that 68.5% respondents reported experiencing LBP during their current pregnancy [12]. Peter and Ulrich (2011) mentioned that as many as 80% of pregnant women will experience low back pain, especially in their third trimester of the pregnancy [13]. Another study found that, the 2nd and early-3rd trimesters are the period when backache is most prevalent.¹⁰ In a study on North American women it was found that, severe low back pain during pregnancy are at extremely high risk for developing a new episode of severe low back pain during a subsequent pregnancy as well as later in life [14]. In a

study among the pregnant women of Sweden, it was found that, multiparity is a risk factor for LBP of current pregnancy [15]. Evidence suggests that low back pain can occur if any job involves lifting and carrying heavy objects, or if anyone spends a lot of time sitting or standing in one position or bending over [16].

Conclusion

Low back pain among ethnic pregnant women requires both quantitative and qualitative study using local resources.

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