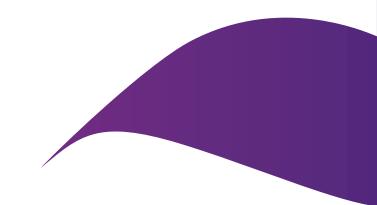


Disordered Breathing in Low Back Pain: Fact or Fallacy?

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Disordered Breathing in Low Back Pain: Fact or Fallacy?





Integrating breathing and movement

"The muscles that support respiration are the same muscles that support postural control; therefore, we can not look at posture, movement and balance without looking at breathing."





The Story to Date

What have we heard so far?

The Story to Date



The diaphragm plays an important role in managing i) Respiratory demand

ıg

i) Disordered breathing is a risk factor for developing low back pain i) Respiratory conditions have a heterogeneous effect on low back pain

(Hodges et al., 2000, 2001)

(Smith et al., 2006, 2009, 2014)

(Beeckmans et al, 2016; Rasmussen-Barr, 2019)







The diaphragm plays an important role in managing ii) Postural perturbation

ii) The biomechanics of the diaphragm are altered in patients with chronic low back pain versus healthy controls

ii) Interventional breathing exercises are effective in reducing low back pain

(Hodges et al., 2000, 2001)

(Kolar et al, 2012)

(Usman et al, 2023)





The Story to Date
What have we heard so

far?



Plausible Mechanisms

How does it work?



Plausible Mechanisms



Behavioural modulators that have been hypothesised to underlie respiratory hypoalgesia include relaxation (via the ANS), distraction from pain and patient expectation (Jafari et al., 2017)



Altered motor performance – spinal stability (Hodges et al., 2000)

Respiratory Disease and Low Back Pain





Respiratory Disease Low Back Pain



ALSWH survey (n = 38050) self- report; only asked about frequency of breathing difficulties which may limit interpretation of the data



- Diaphragm dysfunction or systemic inflammatory influence on pain response? (Caramori et al., 2015; Morris et al., 2020)
- Disease process vs.
 impacts on physical
 activity? (Wertz et al., 2010; Allen
 et al., 2015)
- Breathing difficulty: no differentiation between respiratory disease pathologies (Smith et al., 2006)

(Smith et al., 2006, 2009, 2014)



Respiratory Conditions: Are They Created Equal?

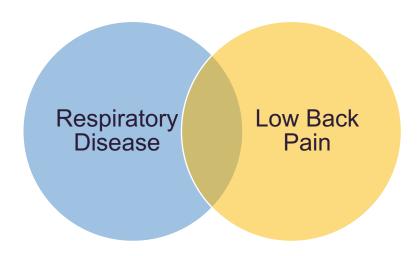
(Beeckmans et al., 2016; Rasmussen-Barr et al., 2019)



Reduced exercise tolerance: lung hyperinflation (Perez et al., 2016; Wertz et al., 2010)

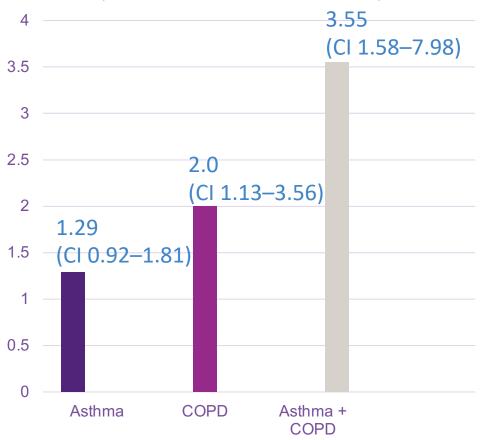


Smoking (Behrend et al., 2012; Centres for Disease Control and Prevention, 2022; Nieminen et al., 2021)



Relative Risk of Low Back Pain

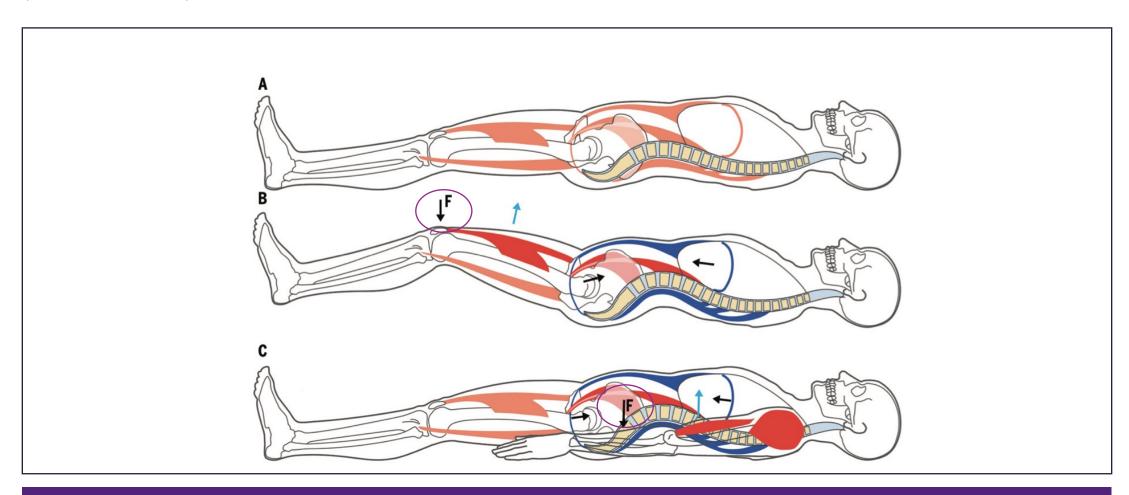
(Rasmussen-Barr et al., 2019)





The Diaphragm: A Postural Stabiliser

(Kolar et al, 2012)



Low back pain ← → altered diaphragmatic biomechanics

Are Breathing Exercises the Answer?



(Usman et al., 2023)

Effect Size for CLBP Parameters

Pedro Score	(8/10)	(6/10)	(5/10)	(5/10)	(4/10)	(6/10)	(3/10)
Trials	Kapitza et al. (2010)	Janssens et al. (2015)	Kang et al. (2016)	Finta et al. (2018)	Finta et al. (2020)	Mohan et al. (2020)	Park et al. (2020)
Pain	0.19 (at rest) 0.06 (during activity)	1.5	х	0.05	х	X*	х
Disability	Х	n	0.4	Х	X	Х	Х
Proprioception	X	X*	X	X	x	X	X
Balance	х	х	х	х	0.84 (m-FRT) 0.33 (left sided-LRT) 0.67 (right-sided-LRT)	х	х

Note: n: insignificant changes; x: outcomes that were not measured in the study; x*: outcomes for which data to calculate effect size was not given.

- Janssens et al: high (interventional group) vs low load (control) inspiratory muscle training; interventional group displayed significant improvements in pain (NRS)
 - Mechanism of efficacy unclear





The Story to Date
What have we heard so far?



Plausible Mechanisms
How does it work?



Confounding Factors *Why the debate?*

Confounding Factors



Association between a sedentary lifestyle, respiratory disorders and back pain (Kolar et al., 2012; Perez et al., 2016; Wertz et al., 2010)

- Diaphragm dysfunction or lack of physical activity?
 - Primary contributor or consequence?
- Pro-inflammatory response

Other lifestyle-related factors

(Behrend et al., 2012; Centres for Disease Control and Prevention, 2022; Nieminen et al., 2021)

Smoking promotes low back pain and underlies COPD

Psychosocial factors

(Panagioti et al., 2014)

Enhanced anxiety, stress and hypervigilance





The Story to Date
What have we heard so far?



Plausible Mechanisms
How does it work?





Lab vs Life



- Flawed inferences from research
 - correlation vs. causation
- Lack of high quality, recent data
 - conjecture in the literature
- Mechanistic data
 - inferred clinical reasoning
 - pain modulation vs. postural stability

- Lack of clarity in application
 - dosage parameters incidental activity vs. prescriptive exercise







The Story to Date
What have we heard so far?



Plausible Mechanisms
How does it work?



Confounding Factors *Why the debate?*



Lab vs Life
What do we know now?

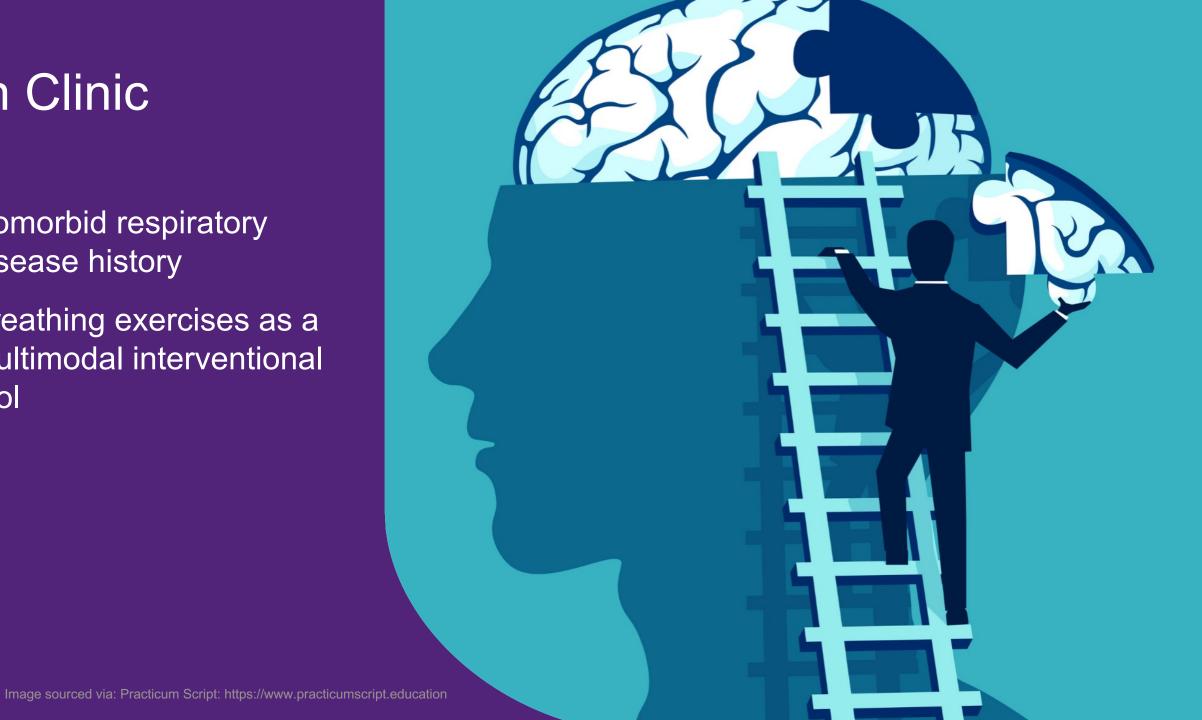


In Clinic
What to do about it?

In Clinic

Comorbid respiratory disease history

Breathing exercises as a multimodal interventional tool





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