

A Fresh Look at Back Care in the United States: *Outrageously* Expensive, Sadly Ineffective

The US medical system is treating back and neck pain more frequently, more intensively, and *much more* expensively than in the past. Yet despite the outrageous sums of money directed at these symptoms, there is no sign that medicine is making progress in their management.

An unbalanced medical and societal response has turned back and neck pain collectively into the *single* most expensive area of medical spending in the United States. They soaked up an almost unbelievable \$134.5 billion in 2016 alone, according to a careful new study by Joseph Dieleman, PhD, and colleagues from the Institute for Health Metrics and Evaluation at the University of Washington. (See Dieleman et al., 2020.)

Back and neck pain have become nightmare conditions for US society at multiple levels. And there is no relief in sight.

Back and neck pain are leading causes of work and life disability. They have resulted in the deaths of hundreds of thousands of people—directly and indirectly—through the opioid crisis. And they have led US society to waste billions of dollars on ineffective and/or marginally effective treatments.

In most cases, low back pain is inherently a benign condition with a generally positive prognosis. Ideally, it should not require much medical care. For the vast majority it is more of a “grin and bear it” symptom than a premise for heroic and specific medical interventions. And the same holds true for most forms of neck pain.

Yet a succession of treatments, treatment models, and treatment philosophies have failed to restrain back and neck care spending. According to Dieleman, spending on back and neck pain more than tripled from 1996 to 2016.

“Low back and neck pain increased from \$37 billion in 1996 to \$135 billion in 2016, without adjusting for population changes (just observed spending). That is an annualized rate of 6.7%,” said Dieleman in a recent email.

[Editor’s note: this article is not intended as criticism of individual healthcare provid-

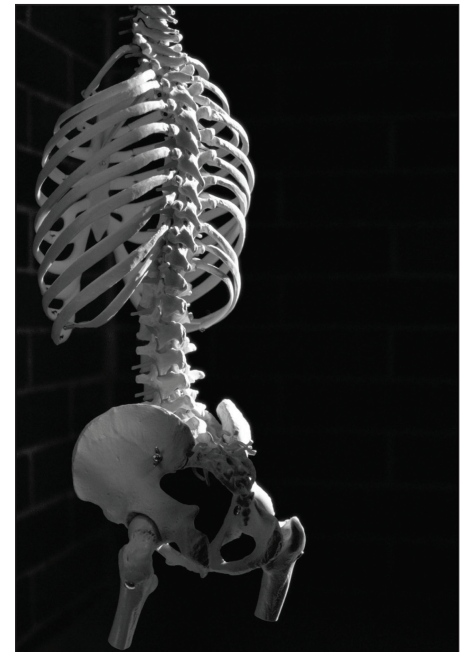
ers or professions. It addresses population-based trends.]

Management of Back Pain a Major Failure

Articles in the *BackLetter* have argued repeatedly that the management of low back and neck pain has been largely a futile endeavor on a population basis. US society has thrown huge sums of money at these problems. Yet there haven’t been any significant improvements in the overall prevalence of low back pain or back-related disability. In fact, this area of medicine has become notorious for low-value care.

A *BackLetter* editor asked Dieleman if he agreed with these assertions. He answered in the affirmative.

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Lie Detection: Fact or Fiction?

Detecting important patient emotional and psychological states automatically via computer could be hugely consequential in spine care—particularly in attempts at “lie detection” regarding symptoms as they relate to back- and neck-related disability claims.

Even if lie detection proves to be an unrealistic goal—and a moral quandary for healthcare providers—a computer program that could reliably detect happiness, sadness, anger, fear, surprise, and disgust would be valuable.

Many influential researchers have argued that the facial representations of these particular psychological states are impossible to hide—and are easily monitored and detected. Yet many other scientists remain skeptical about these assertions

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