

Online-Appendix

Kurz und bündig - Schlüsselbotschaften über Diagnose, Bildgebung und Selbstbehandlung für Patient(inn)en mit unspezifischen Kreuzschmerzen?

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Tabelle S1: Final ranked listed of 30 priority statements grouped by content areas.

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Final ranked listed of 30 priority statements grouped by content areas.			
Statement	Expert median ranking in 1000 Minds	Consumer median ranking in 1000 Minds	Percentage of respondents rating each statement as robust and current ‡(%)
Stay active			
When you have back pain, staying active is important. You need to pace yourself to return to your usual activities*†.	1	5	92
When you have back pain, carry on with normal activities as far as possible.	2	24	99
Staying active helps prevent long-term back problems.	5	8	82
Bed rest for more than a day or 2 is not good.	14	22	88
Do not take back pain lying down.	19	25	82

Red flag identification			
You should see a health practitioner URGENTLY if you have back pain and either of the following: bladder and/or bowel disturbance, significant leg muscle weakness*†.	4	1	96
You should see a health practitioner if you have back pain and any of the following: pain that spreads down one or both legs; a fever; recent invasive surgery; recent significant trauma; unexplained weight loss; history of cancer*.	8	3	94
You should see your health practitioner if your back pain is severe and it is worrying you, if you are having difficulty managing your back pain, or your pain is getting worse*.	15	2	88
Reassurance			
Your pain may not necessarily be related to the extent of damage in your back. Hurt does not necessarily mean harm*†.	3	17	95
Most people find that their back pain settles down over a short period. If your back pain persists and is worrying you, consult a health professional*.	6	4	86
In most cases of recent onset back pain, the pain will get better in several weeks; however, this varies from person to person.	7	14	86
It is rare for low back pain to be caused by a more serious health problem.	9	26	96

Most people have pain in their low back at some stage in their lives.	11	18	98
It is not necessary to know the specific cause of your back pain to manage the pain effectively.	13	23	86
It is normal to worry about the cause of your back pain and the impact it may have on you.	17	12	75
Unnecessary interventions			
Imaging (eg, x-ray, computed tomography [CT] scan, or magnetic resonance imaging [MRI]) is usually not needed in the majority of cases of low back pain, particularly when your pain has been present for less than 6 weeks. Talk to your doctor about this*.	10	21	96
X-rays will not highlight the cause of pain in most cases unless a fracture is suspected†.	12	27	96
CT scans have little use in diagnosing back problems and caution should be exercised due to the large amount of radiation involved with their use†.	22	30	93
Blood tests are usually not needed in the majority of cases of low back pain.	29	28	95
Principles of management			
Work towards returning to your usual activities, with guidance from your health practitioner*	16	7	87
Persistent low back pain is influenced by a number of factors—physical, emotional, and environmental; so, it is important to address each of these areas†	18	6	85
Take ownership of your own wellbeing*†	20	20	87

Staying positive is important. Help is available†	21	13	82
Work with your health care team to set goals‡	25	16	73
Work with your health practitioner to address your concerns	26	10	71
Work with your health practitioner to manage your back pain	27	11	66
If you have any further questions to ask your health practitioner, write them down and discuss them at your next visit	28	9	78
Health practitioners can assist in screening for causes of back pain*†	30	15	51
Disease knowledge			
In around 95% of cases, it is not possible to pinpoint the cause of back pain	23	29	80
Low back pain may happen again over Time	24	19	95
<p>* Statement was modified by consumers during the focus groups. † Statement was introduced by the panel. ‡ Percentage of respondents rating 1 or 2, where a rating of "1" meant that the respondent agreed that the statement was robust and current, and a rating of "5" meant respondent did not think the statement was robust and current.</p>			