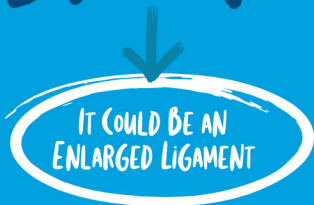


KNOW
YOUR
BACK
STORY



MOBILITY MATTERS:

Landmark Survey on Chronic Low
Back Pain in America and Mobility Index

TOPLINE REPORT

Presented by Dr. Peter Pryzbylkowski

MOBILITY MATTERS: LANDMARK SURVEY ON CHRONIC LOW BACK PAIN IN AMERICA AND MOBILITY INDEX: WHY NOW?



- Unlike other debilitating conditions, we didn't know until today how many people suffer from chronic low back pain (CLBP)
- We didn't know who is suffering most and how CLBP experience changes through life's decades
- We didn't know what people are doing to find relief

NOW WE KNOW.



METHOD STATEMENT AND SPINE HEALTH SPECIALIST CONTRIBUTORS

Online survey conducted May 12 to May 20, 2022 by
The Harris Poll on behalf of Vertos Medical

5,020 adults surveyed ages 18+, including **1,521 adults** who currently experience **CLBP** or **sciatic pain**

Data represent national U.S. adult population based on weighting by age, gender, race/ethnicity, region, education, household income, household size, and marital status, allowing survey responses to be extrapolated to the U.S. adult population

Sample data are accurate to within +/-1.7 percentage points using a 95% confidence level for the total sample of U.S. adults, and +/- 3.0 percentage points using a 95% confidence level for CLBP sufferers



**Developed in partnership with
leading Spine Health Specialists**

- Ashley Comer, NP
- David M. Dickerson, MD
- Steven Falowski, MD
- Zohra Hussaini, MSN, FNP-BC, MBA
- Peter Pryzbylkowski, MD
- Rebecca Sanders, MD

CLBP AFFECTS MORE PEOPLE THAN ARTHRITIS¹, DIABETES² OR HEART DISEASE³

More than **72.3 million** U.S. adults self-report they have **CLBP** (28% of the population)

59 million have at least one **Lumbar Spinal Stenosis (LSS)** symptom (82%)

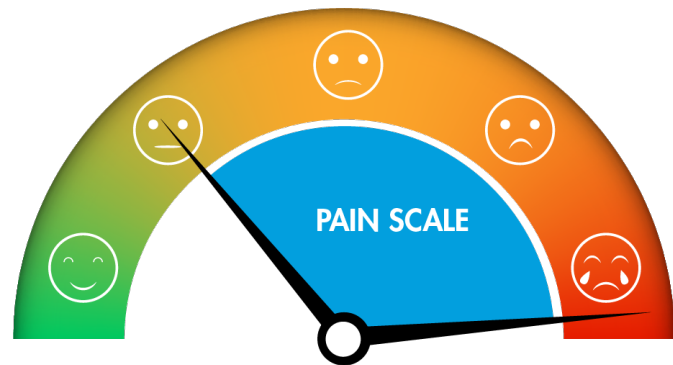
27 million have never been told by an **HCP** exactly what caused their **CLBP** (37%)

78% of U.S. adults with **CLBP** **DO NOT KNOW** an **enlarged ligament** could be the cause



More than **8 in 10** with **CLBP** wish there were **better treatment options**

TOO MANY PEOPLE SUFFER TOO LONG WITH CLBP




85% of CLBP sufferers describe their pain as "moderate" to the "worst pain possible"



MORE PEOPLE NEED TO SEEK OUT **SPINE HEALTH DOCTORS** FOR ACCURATE DIAGNOSIS AND TREATMENT

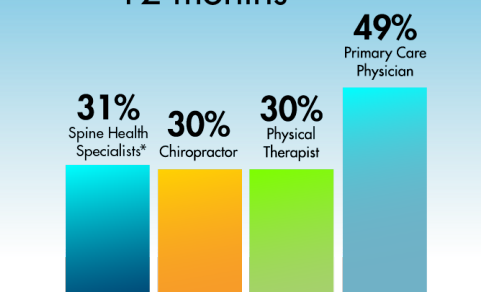


→ While most have seen an **HCP** about **CLBP**, nearly **1 in 5** have not



→ On average, **CLBP** sufferers have:

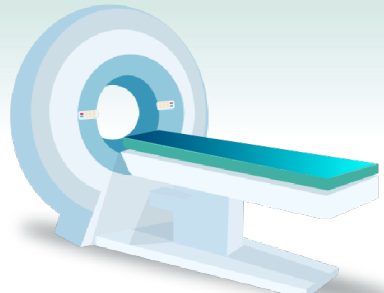
- Seen **3 different HCPs**
- Made **4 visits** to an HCP in the past 12 months



HCP Type	Percentage
Spine Health Specialists*	31%
Chiropractor	30%
Physical Therapist	30%
Primary Care Physician	49%

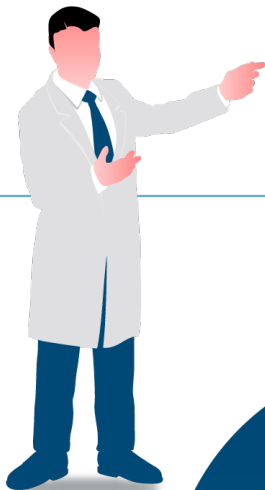
→ **Less than a quarter** (22%) have never had diagnostic imaging

Less than half (46%) have ever had an MRI to determine the cause of their **CLBP**



HCPs Seen for CLBP

*Includes: Pain Specialist, PM&R Doctor, Interventional Pain Physician, Physiatrist



OPIOID USE IS A SIGNIFICANT, ALARMING CONCERN

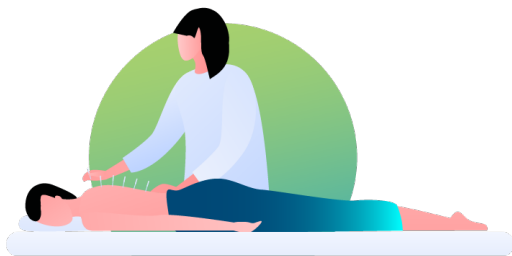


30%
of **CLBP** patients
have been prescribed
opioids for pain



15%
are currently taking **opioids**,
with the highest use among
people in their 50s (19%)

70% SAID IT HAS BEEN DIFFICULT TO FIND A TREATMENT THAT WORKS WELL TO EASE CLBP



26%
of CLBP sufferers have done **conservative** or Eastern medicine, including chiropractic adjustment, physical therapy, or acupuncture



21% of CLBP sufferers received an epidural steroid injection (ESI),

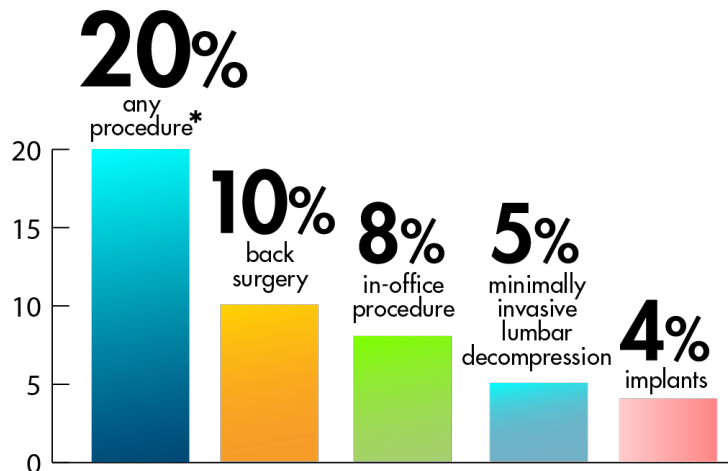
77% of them had **more than one**



77% of CLBP sufferers have taken drug treatments, including **opioids** and **NSAIDs**

Only **5%** have ever had minimally invasive procedures

1 IN 10 OR LESS CLBP SUFFERERS HAVE HAD SPECIFIC PROCEDURES



* some patients have multiple procedures

79%
have concerns about **surgery**

76% SAY CLBP HAS INTERFERED WITH THEIR ABILITY TO COMPLETE EVERYDAY TASKS

53%

More than half say CLBP has had a major or moderate **negative impact** on their overall quality of life



78%

have accepted CLBP as a **part of their life...**



**OUR MESSAGE TODAY:
DO NOT WRITE OFF YOUR CHRONIC LOW BACK PAIN!**



INTRODUCING THE FIRST-EVER **MOBILITY INDEX** THROUGH THE DECADES...



As we age, it can be difficult to assess what mobility challenges are a normal part of aging or a condition that may be treatable, such as CLBP.

*The **Mobility Index** was designed to demonstrate how people could be moving through the decades of their lives if chronic low back or leg pain was not a limiting factor.*

THE MOBILITY INDEX IS COMPRISED OF 3 MAIN DIMENSIONS...

Self-rated mobility: 5-point scale: Poor, fair, good, very good, or excellent

Ease of doing specific activities:

4-point scale: Very difficult, somewhat difficult, somewhat easy, very easy

- 30 questions asked across 18 activities, including:



- Standing for longer than 30 minutes



- Standing up from a seated position or getting in and out of a car easily



- Going up or down stairs
-

Attitudes about mobility:

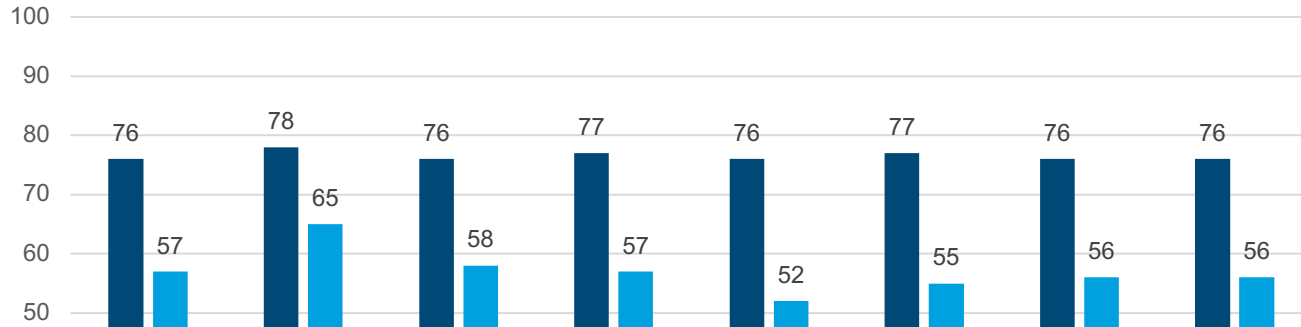
4-point scale: Strongly disagree, somewhat disagree, somewhat agree, strongly agree

- Asked across 10 attitudinal statements, including:

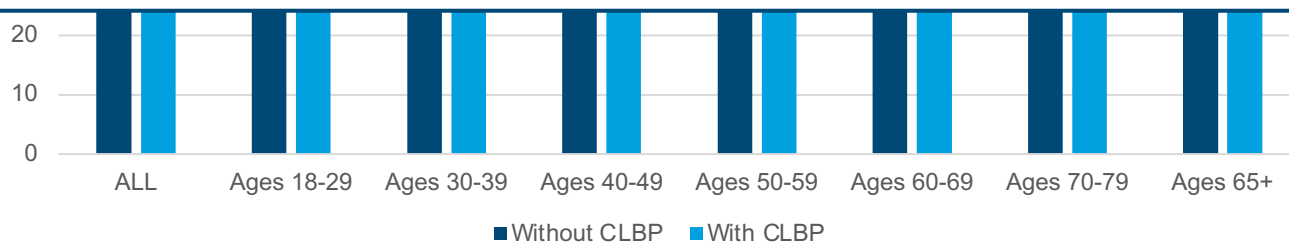
- My body doesn't move like it used to
- I often make it through the day without any physical pain at all
- I struggle to do daily activities or tasks without taking a break

...THE RESULTS ARE STARTLING

Mobility Index Through the Decades: Chronic Low Back Pain (CLBP)



Most decades show a roughly **20 POINT DROP** in mobility among those with CLBP, with the highest drop observed among those in their 50's (24-points)



MOBILITY INDEX THROUGH THE DECADES: IN THE 50'S



Mobility Index Components with ≥ 35 pt. differential
Among adults in their 50's

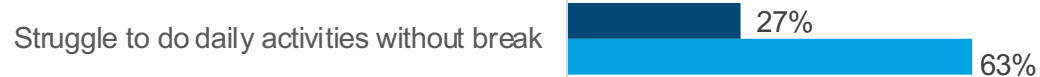
% good, very good, excellent



*% very/
somewhat easy*



*% strongly/
somewhat agree*

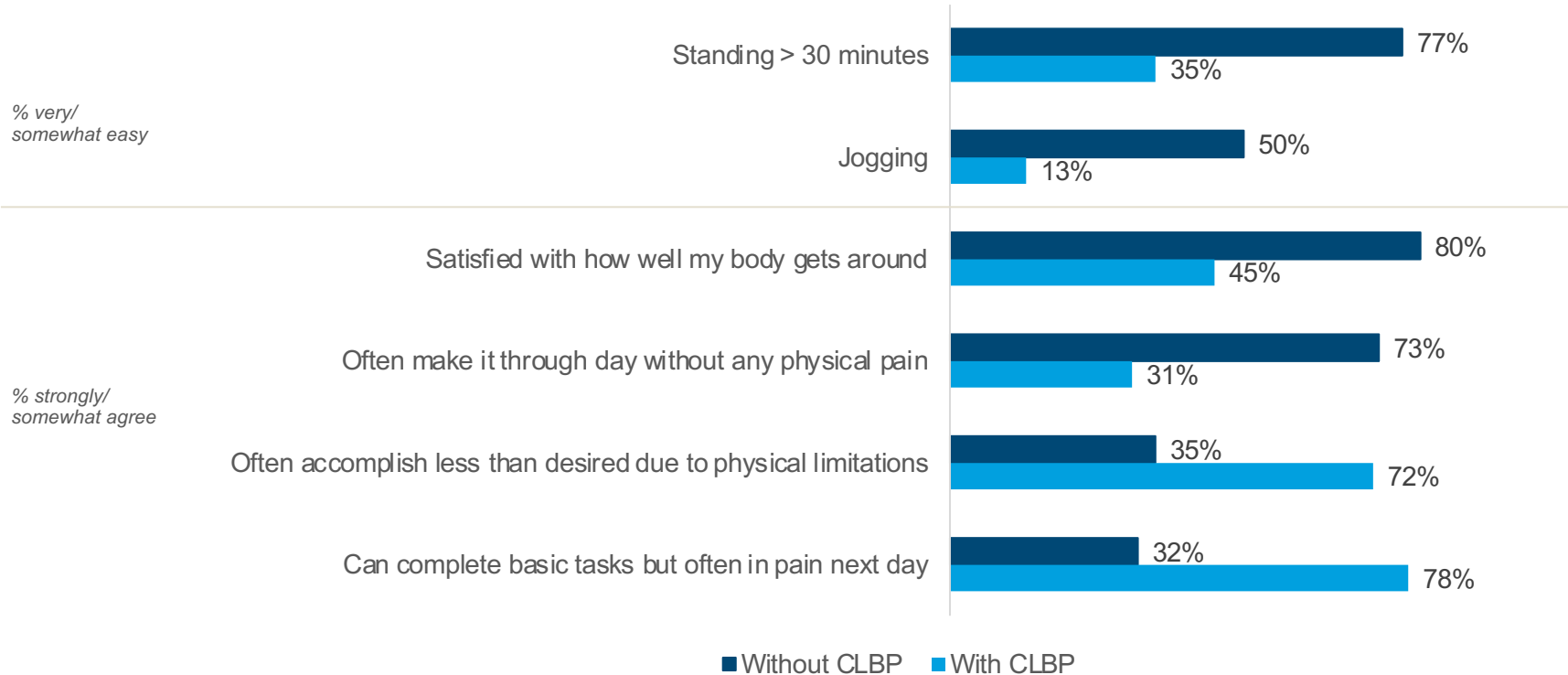


■ Without CLBP ■ With CLBP

MOBILITY INDEX THROUGH THE DECADES: IN THE 60'S



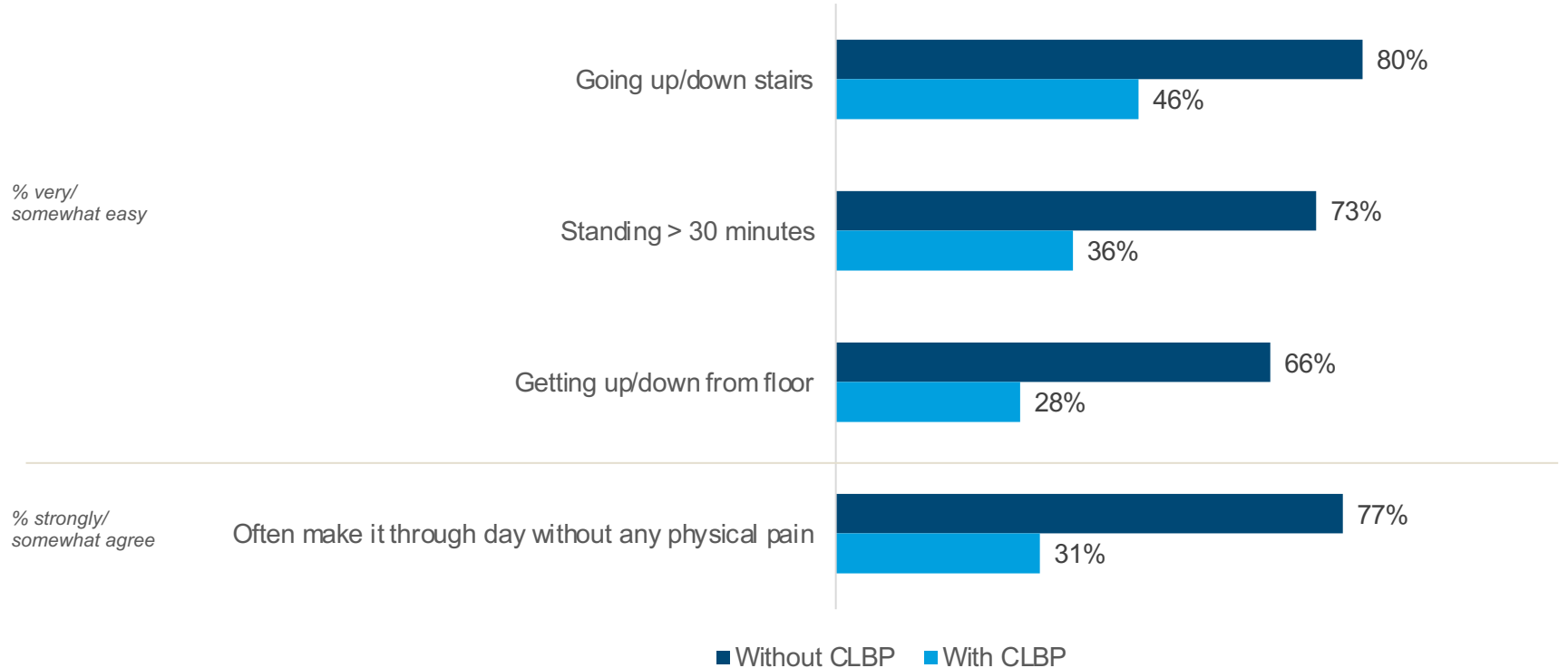
Mobility Index Components with ≥ 35 pt. differential
Among adults in their 60's



MOBILITY INDEX THROUGH THE DECADES: IN THE 70'S



Mobility Index Components with ≥ 35 pt. differential
Among adults in their 70's





DR. PETER PRYZBYLKOWSKI: CALL-TO-ACTION



- *Too many people are **suffering from** CLBP in America*
- *People should seek out advice from **spine health doctors** who can assess and treat chronic low back pain and **look for the enlarged ligament***
- ***Minimally invasive treatments should be considered earlier** in the treatment pathway after conservative therapies fail, e.g., PT, chiropractic adjustment, exercise, etc.*
- *Per the CDC and treatment guidelines, **opioids should be avoided** due to their lack of effectiveness and inherent risks*
- *Our hope is that this campaign will spark not only awareness, but also help **get people moving again***



*“Without movement there is no Life...
We should use our energy to the fullest.”*

Ai Qing
Renowned Chinese Poet



REFERENCES

1. BARBOUR KE, HELMICK CG, BORING M, BRADY TJ. VITAL SIGNS: PREVALENCE OF DOCTOR-DIAGNOSED ARTHRITIS AND ARTHRITIS-ATTRIBUTABLE ACTIVITY LIMITATION—UNITED STATES, 2013–2015. MORB MORTAL WKLY REP 2017;66:246–253. DOI: 10.15585/MMWR.MM6609E1.
2. CENTERS FOR DISEASE CONTROL AND PREVENTION. NATIONAL DIABETES STATISTICS REPORT. AVAILABLE: [HTTPS://WWW.CDC.GOV/DIABETES/DATA/STATISTICS-REPORT/INDEX.HTML](https://www.cdc.gov/diabetes/data/statistics-report/index.html). ACCESSED JUNE 18, 2022.
3. HEALTHLINE. HEART DISEASE: FACTS, STATISTICS, AND YOU. AVAILABLE: [HTTPS://WWW.HEALTHLINE.COM/HEALTH/HEART-DISEASE/STATISTICS#WHO-IS-AT-RISK?](https://www.healthline.com/health/heart-disease/statistics#who-is-at-risk?). ACCESSED JUNE 18, 2022.