

## LOW BACK Disability Index

Patient Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_ Score: \_\_\_\_\_

To understand how much your low back pain has affected your ability to manage your everyday activities, please answer each section by circling the ONE CHOICE that most applies to *YOUR PROBLEM TODAY*.

<p><b>SECTION 1 - Pain Intensity</b></p> <p>0 The pain comes and goes and is very mild.            1 The pain is mild and does not vary much.            2 The pain comes and goes and is moderate.            3 The pain is moderate and does not vary much.            4 The pain comes and goes and is severe.            5 The pain is severe and does not vary much.</p>	<p><b>SECTION 6 – Standing</b></p> <p>0 I can stand as long as I want without pain.            1 I have some pain while standing, but it does not increase with time.            2 I cannot stand for longer than one hour without increasing pain.            3 I cannot stand for longer than 1/2 hour without increasing pain.            4 I cannot stand for longer than ten minute without increasing pain.            5 I avoid standing, because it increases the pain straight away.</p>
<p><b>SECTION 2 - Personal Care</b></p> <p>0 I would not have to change my way of washing or dressing in order to avoid pain.            1 I do not normally change my way of washing or dressing even though it causes some pain.            2 Washing and dressing increases the pain, but I manage not to change my way of doing it.            3 Washing and dressing increases the pain and I find it necessary to change my way of doing it.            4 Because of the pain, I am unable to do some washing and dressing without help.            5 Because of the pain, I am unable to do any washing or dressing without help.</p>	<p><b>SECTION 7 – Sleeping</b></p> <p>0 I get no pain in bed.            1 I get pain in bed, but it does not prevent me from sleeping well.            2 Because of pain, my normal night's sleep is reduced by less than one than one quarter.            3 Because of pain, my normal night's sleep is reduced by less than one-half.            4 Because of pain, my normal night's sleep is reduced by less than three-quarters.            5 Pain prevents me from sleeping at all.</p>
<p><b>SECTION 3 - Lifting</b></p> <p>0 I can lift heavy weights without extra pain.            1 I can lift heavy weights, but it causes extra pain.            2 Pain prevents me from lifting heavy weights off the floor.            3 Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently positioned, eg. on a table.            4 Pain prevents me from lifting heavy weights, but I can manage light to medium weights if they are conveniently positioned.            5 I can only lift very light weights, at the most.</p>	<p><b>SECTION 8 - Social Life</b></p> <p>0 My social life is normal and gives me no pain.            1 My social life is normal, but increases the degree of my pain.            2 Pain has no significant effect on my social life apart from limiting my more energetic interests, My e.g., dancing, etc.            3 Pain has restricted my social life and I do not go out very often.            4 Pain has restricted my social life to my home.            5 I have hardly any social life because of the pain.</p>
<p><b>SECTION 4 - Walking</b></p> <p>0 Pain does not prevent me from walking any distance.            1 Pain prevents me from walking more than one mile.            2 Pain prevents me from walking more than 1/2 mile.            3 Pain prevents me from walking more than 1/4 mile.            4 I can only walk while using a cane or on crutches.            5 I am in bed most of the time and have to crawl to the toilet.</p>	<p><b>SECTION 9 - Traveling</b></p> <p>0 I get no pain while traveling.            1 I get some pain while traveling, but none of my usual forms of travel make it any worse.            2 I get extra pain while traveling, but it does not compel me to seek alternative forms of travel.            3 I get extra pain while traveling which compels me to seek alternative forms of travel.            4 Pain restricts all forms of travel.            5 Pain prevents all forms of travel except that done lying down</p>
<p><b>SECTION 5 – Sitting</b></p> <p>0 I can sit in any chair as long as I like without pain.            1 I can only sit in my favorite chair as long as I like.            2 Pain prevents me from sitting more than one hour.            3 Pain prevents me from sitting more than 1/2 hour.            4 Pain prevents me from sitting more than ten minutes.            5 Pain prevents me from sitting at all.</p>	<p><b>SECTION 10 - Changing Degree of Pain</b></p> <p>0 My pain is rapidly getting better.            1 My pain fluctuates, but overall is definitely getting better.            2 My pain seems to be getting better, but improvement is slow at present.            3 My pain is neither getting better nor worse.            4 My pain is gradually worsening.            5 My pain is rapidly worsening.</p>

### Pain Index

1	2	3	4	5	6	7	8	9	10
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Little to no Pain

Moderate Pain

Severe Pain

## DISABILITY INDEX

1. Each of the 10 sections is scored separately (0 to 5 points ea.) & added up (max. total = 50).

**EXAMPLE:**

Section 1. Pain Intensity	Point Value
A. _____ I have no pain at the moment	0
B. _____ The pain is very mild at the moment	1
C. _____ The pain is moderate at the moment	2
D. _____ The pain is fairly severe at the moment	3
E. _____ The pain is very severe at the moment	4
F. _____ The pain is the worst imaginable	5

2. If all 10 sections are completed, simply double the patients score.

3. If a section is omitted, divide the patient's total score by the number of sections completed times 5.

**FORMULA:**

$$\frac{\text{PATIENT'S SCORE}}{\text{\# OF SECTIONS COMPLETED X 5}} \times 100 = \text{\% DISABILITY}$$

**EXAMPLE:**

If 9 of 10 sections are completed, divide the patient's score by 9 X 5 = 45;

if.....Patient's Score: 22

Number of sections completed: 9 (9 X 5 = 45)  $22/45 \times 100 = 48\%$  disability

4. Interpretation of disability scores (from original article):

SCORE	INTERPRETATION OF THE OSWESTRY LBP DISABILITY QUESTIONNAIRE
0-20% Minimal Disability	Can cope w/ most ADL's. Usually no treatment needed, apart from advice on lifting, sitting, posture, physical fitness and diet. In this group, some patients have particular difficulty with sitting and this may be important if their occupation is sedentary (typist, driver, etc.)
20-40% Moderate Disability	This group experiences more pain and problems with sitting, lifting and standing. Travel and social life are more difficult and they may well be off work. Personal care, sexual activity and sleeping are not grossly affected, and the back condition can usually be managed by conservative means.
40-60% Severe Disability	Pain remains the main problem in this group of patients by travel, personal care, social life, sexual activity and sleep are also affected. These patients require detailed investigation.
60-80% Crippled	Back pain impinges on all aspects of these patients' lives both at home and at work. <i>Positive intervention is required.</i>
80-100%	These patients are either bed-bound or exaggerating their symptoms. This can be evaluated by careful observation of the patient during the medical examination.