Finding ways forward with pain as a fellow traveler

Older women’s experience of living with osteoporotic vertebral compression fractures and back pain

Akademisk avhandling

Som för avläggande av filosofie doktorsexamen vid Sahlgrenska akademin, Göteborgs universitet kommer att offentligen försvaras i hörsal Arvid Carlsson, Academicum Medicinaregatan 3, Göteborg den 4 maj, klockan 13:00.

Av Hilda Svensson

Fakultetsopponent:

Professor Peter Nordström

Institutionen för samhällsmedicin och rehabilitering, Medicinska fakulteten vid Umeå Universitet, Sverige

Avhandlingen baseras på följande delarbeten


II. Johansson, L.*. Svensson, H. K.*, Karlsson, J., Olsson, L-E., Mellström, D., Lorentzon, M & Sundh, D. Decreased physical health-related quality of life - a persisting state for older women living with clinical vertebral compression fracture. * Contributed equally. [In manuscript]


Finding ways forward with pain as a fellow traveler

Older women’s experience of living with osteoporotic vertebral compression fractures and back pain

Hilda Svensson

Center for Person-Centered Care (GPCC), Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg, Sweden, 2018.

Abstract

In a globally aging population, the number of older people living with physical disabilities due to persisting conditions will increase. Within the population of older women, two common conditions leading to long-term back pain are degenerative disc disorder and osteoporotic vertebral compression fractures, with subsequent poorer health-related quality of life and reduced well-being. The aim of this thesis was to achieve a comprehensive understanding of older women’s experience of living with osteoporotic vertebral compression fractures and back pain.

Study I had a descriptive cross-sectional design based on an epidemiological study (Gothenburg H70 Birth Cohort Studies) comprising both self-reported outcomes in the form of questionnaires and objective physical measurements, in older women with long-term back pain. Study II also had a cross-sectional design and comprised a similar source of data, but from another epidemiological study (SUPERB), in older women with clinical vertebral compression fractures aiming to determine health-related quality of life over time. Study III was a systematic literature review aiming to explore level of current knowledge of interventions within the population of older women with osteoporosis and vertebral compression fracture, whereas Study IV had a qualitative design, aiming to illuminate the lived experience of women with osteoporosis and vertebral compression fracture.

The results revealed a low health-related quality of life and reduced physical ability in women with long-term back pain, however with discrepancies, in that the women reported an equal level of sense of coherence and self-reported physical ability as the women without back pain. Women with clinical vertebral compression fracture, however, showed a similar level of physical ability and mental health-related quality of life as women without fractures but reported a reduced physical health-related quality of life up to 18.9 years post fracture. The interventions that have been implemented within the population of older women with osteoporosis and vertebral compression fractures, mainly included physical activity and have revealed probable effects on primarily physical mobility and health-related quality of life. However, since this population has a substantial symptom burden, e.g. back pain and reduced physical ability, there was a risk of selection bias in that the women with the most illness experience were excluded. Ten women describing their lived experience of living with osteoporosis and vertebral compression fracture painted a dark picture of turmoil, insecurity and chaos, creating restraints and missed opportunities through fear and concerns about pain experience and living with a deceptive body. Nevertheless, even though the women in this thesis reported reduced health-related quality of life and physical ability, together with fear and concerns due to vertebral compression fracture and long-term back pain, there was a sense of resilience and strong will-power not to give up, but to keep struggling on their own to continue finding ways forward.

Keywords: older women, back pain, vertebral compression fracture, osteoporosis, degenerative disc disorder, health-related quality of life, transition

ISBN: 978-91-629-0464-7 (Print)  http://hdl.handle.net/2077/55627