

Abstract

Low back pain is a multifactorial process. The causes for the occurrence and maintenance of low back pain are highly individual. However, an individualised therapy in consideration of well-established psychosocial risk factors such as pain responses is rarely realised. Exceedingly individual is the multidimensional concept of body image, which is a rapidly growing area of research within pain research. In the context of mental disorders, a more negative body image was shown, which in turn may affect coping. The consideration of body image in the treatment of low back pain may contribute to a more individualised and more effective therapy. Therefore, the aim of this dissertation was to examine the body image in patients with low back pain, as well as in the context of pain responses.

The review (manuscript 4.1) served as theoretical foundation for the following clinical studies I and II about body image and low back pain. The possible relevance of cognitive-affective, evaluative dimensions of body image in patients with low back pain is discussed. Previous studies which focussed on perceptual aspects of body image have shown that patients suffering from low back pain revealed a more negative body image compared to healthy controls. These results indicate that the cognitive-affective dimension of body image, which is described as feelings, beliefs, and thoughts about the own body, may also be more negative in patients with low back pain.

In study I (manuscript 4.2) the body image between patients suffering from low back pain and healthy controls was compared. For the first time, patients were distinguished between subacute and chronic pain stadiums in the context of body image. Results imply a more negative body image in all three examined dimensions, health, physical efficacy, and self-acceptance, compared to the group of healthy controls. It can be assumed that body image and low back pain are related and that a consideration of body image may be an important addition in the therapy of patients.

Building on the former results, study II (manuscript 4.3) examined differences of pain responses and body image between athletes and non-athletes, both suffering from low back pain. Results indicate differences in body image with regard to pain responses. Patients of both groups with an adaptive or eustress-endurance pain response showed a more positive body image compared to patients showing a distress-endurance or fear-avoidance pain response. Athletes only revealed a more positive body image of physical efficacy compared to non-athletes.

Findings of the present dissertation suggest a high relevance of body image in the context of low back pain and pain responses. The consideration of body image as a psychosocial factor is a promising approach in the therapy of low back pain.