

Aberdeen Low Back Pain Scale

Overview:

Ruta et al all used a questionnaire to measure outcome in patients with low back pain. This can be used for initial evaluation of the patient and to monitor the effectiveness of any interventions. The authors are from the University of Aberdeen and the Aberdeen Royal Infirmary in Scotland.

| Question | Response | Points |
|---|--|------------|
| In the past 2 weeks how many days did you suffer pain in the back or leg(s)? | none at all | 0 |
| | between 1 and 5 days | 1 |
| | between 6 and 10 days | 2 |
| | for more than 10 days | 3 |
| On the worst day during the past 2 weeks how many painkilling tablets did you take? | none at all | 0 |
| | less than 4 tablets | 1 |
| | between 4 and 8 tablets | 2 |
| | between 9 and 12 tablets | 3 |
| | more than 12 tablets | 4 |
| Is the pain made worse by any of the following? | coughing | +1 |
| | sneezing | +1 |
| | sitting | +1 |
| | standing | +1 |
| | bending | +1 |
| | walking | +1 |
| | Do any of the following movements ease the pain? | lying down |
| sitting down | | see below |
| standing | | see below |
| walking | | see below |
| In your right leg do you have any pain in the following areas? | pain in the buttock | +1 |

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| | pain in the thigh | +1 |
| | pain in the shin or calf | +1 |
| | pain in the foot or ankle | +1 |
| In your left leg do you have any pain in the following areas? | pain in the buttock | +1 |
| | pain in the thigh | +1 |
| | pain in the shin or calf | +1 |
| | pain in the foot or ankle | +1 |
| Do you have any loss of feeling in your legs? | no | 0 |
| | yes just one leg | 1 |
| | yes both legs | 2 |
| In your right leg do you have any weakness or loss of power in the following areas? | hip | +1 |
| | knee | +1 |
| | ankle | +1 |
| | foot | +1 |
| In your left leg do you have any weakness or loss of power in the following areas? | hip | +1 |
| | knee | +1 |
| | ankle | +1 |
| | foot | +1 |
| If you were to try and bend forward without bending your knees how far down do you think you could bend before the pain stopped you? | I could touch the floor. | 0 |
| | I could touch my ankles with the tips of my fingers. | 1 |
| | I could touch my knees with the tips of my fingers. | 2 |
| | I could touch my mid thighs with the tips of my fingers. | 3 |
| | I couldn't bend forward at all. | 4 |

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| On the worst night during the last 2 weeks how badly was your sleep affected by the pain? | not affected at all | 0 |
| | I didn't lose any sleep but needed tablets | 1 |
| | it prevented me from sleeping but I slept for more than 4 hours | 2 |
| | I only had 2-4 hours of sleep | 3 |
| | I had less than 2 hours of sleep | 4 |
| On the worst day during the last 2 weeks did the pain interfere with your ability to sit down? | I was able to sit in any chair for as long as I liked | 0 |
| | I could only sit in my favorite chair as long as I liked | 1 |
| | pain prevented me from sitting more than 1 hour | 2 |
| | pain prevented me from sitting more than 30 minutes | 3 |
| | pain prevented me from sitting more than 15 minutes | 4 |
| | pain prevented me from sitting at all | 5 |
| On the worst day during the last 2 weeks did the pain interfere with your ability to stand? | I could stand as long as I wanted without extra pain | 0 |
| | I could stand as long as I wanted but it gave me extra pain | 1 |
| | pain prevented me from standing more than 1 hour | 2 |
| | pain prevented me from standing more than 30 minutes | 3 |
| | pain prevented me from standing more than 15 minutes | 4 |
| | pain prevented me from standing at all | 5 |
| On the worst day during the last 2 weeks did the pain interfere with your ability to walk? | pain did not prevent me walking any distance | 0 |
| | pain prevents me walking more than 1 mile | 1 |

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| | pain prevents me walking more than 1/2 mile | 2 |
| | pain prevents me walking more than 1/4 mile | 3 |
| | I can walk but less than 1/4 mile | 4 |
| | I was unable to walk at all | 5 |
| In the last 2 weeks did the pain prevent you from carrying out your work housework and other daily activities? | no not at all | 0 |
| | I could continue with my work but my work suffered | 1 |
| | yes for one day | 2 |
| | yes for 2-6 days | 3 |
| | yes for 7 days or more | 4 |
| In the last 2 weeks for how many days have you had to stay in bed because of the pain? | none at all | 0 |
| | between 1 and 5 days | 1 |
| | between 6 and 10 days | 2 |
| | for more than 10 days | 3 |
| In the last 2 weeks has your sex life been affected by your pain? | not affected by the pain | 0 |
| | mildly affected by the pain | 1 |
| | moderately affected by the pain | 2 |
| | pain prevents any sex life at all | 3 |
| | does not apply | NA |
| In the last 2 weeks have your leisure activities been affected by your pain? | not affected by the pain | 0 |
| | mildly affected by the pain | 1 |
| | moderately affected by the pain | 2 |
| | severely affected by the pain | 3 |
| | pain prevents any social life at all | 4 |
| In the last 2 weeks has the pain | not at all | 0 |

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| interfered with your ability to look after yourself (e.g. washing dressing etc.) | | |
| | because of the pain I needed some help looking after myself | 1 |
| | because of the pain I needed a lot of help looking after myself | 2 |
| | because of the pain I could not look after myself at all | 3 |

where:

- Point assignments is discussed on page 1889 first column.
- Some point assignments may need review. For example pain in the foot or ankle without pain higher up strikes me as unusual to be due to back pain.
- The point assignment for actions that relieve the pain is unclear to me. According to the text it could be scored as +1 for each activity. But it would seem that the pain is worse if no activity relieves the pain. So I scored it as $(4 - (\text{number of actions relieving the pain}))$.
- Many scores of pain relief distinguish between different types of "painkillers".

total number of points = SUM(points for all questions answered)

back pain severity score = $(\text{SUM}(\text{points for all questions answered}) / \text{SUM}(\text{maximum points for questions answered})) * 100$

Interpretation: • minimum back pain severity scale: 0

• maximum back pain severity scale: 100

• The higher the score the greater the severity of the back pain.

Performance:

- The authors found the instrument valid and reliable.
- It was compared to the Oswestry Waddell and Greenough indices.
- It correlated with the SF-36 as a general measure of health status. It was able to detect significant changes in patients and was more responsive than the SF-36.
- It shows good internal consistency and test-retest reliability.
- The instrument shows construct validity.

References:

Ruta DA Garratt AM et al. Developing a valid and reliable measure of health outcome for patients with low back pain. Spine. 1994; 19: 1887-1896.