

## Thoracic (chest) spine pain

- Although problems with the thoracic spine are less common than other areas of the spine they be just as painful and troublesome.
- Your ribs are attached to the thoracic spine.
- Key treatments, apart from staying active, include manipulation and mobilization therapies.

The thoracic spine is the part of the backbone that runs through the back of the chest and is made up of 12 vertebrae (the circular bones that make up the backbone). Attached to your thoracic vertebrae are your ribs, which means, unlike your neck (cervical spine) and lower spine (lumbar), your thoracic spine is very stable and not particularly flexible.

Around one in ten people will have pain in their thoracic spine at sometime in their life<sup>i</sup>, a lot fewer than the number of people who get neck pain (around five out of ten<sup>ii</sup>). And a great deal fewer than the number of people who have pain in their lower back (nine out of 10<sup>iii</sup>).

### What can go wrong?

Your thoracic spine is the same as the rest of your backbone and the same problems can happen. The two most common problems include:

**Mechanical backache:** this is the most common cause of back pain and means that you have damaged something, such as:

- Sprained or torn a ligament or muscle.
- Damaged one of the facet joints that hold the backbone together.
- Problem with one of the discs between the vertebrae that act as shock absorbers.

Mechanical back problems can be caused by a number of things, including heavy lifting, poor posture, accidents, awkward twisting movements. People most at risk from thoracic spine pain include:

- Those who do a lot of driving (in one study of bus drivers, three out of ten had thoracic spine problems<sup>iv</sup>, three times more than the general population).
- People who sit at computers all day, particularly if they slouch.

**General wear and tear (degeneration):** as we grow older our bodies repair themselves less well and things start to wear out. This can affect our joints holding the spine together – the facet joints – and the discs between the vertebrae.

**Much less common,** but serious causes, include rheumatoid arthritis, bone disorders (like osteoporosis) and serious injuries.

### Symptoms of thoracic spine pain<sup>v</sup>

These problems can put extra stress on the muscles and ligaments around the spine, which can cause pain in the area of the thoracic spine.

If any of the damage or changes puts pressure on one of the many nerves that branch out of the spinal cord, called **nerve root pain**, the pain can be felt in completely different parts of the body. This is known as referred pain and can appear in:

- Your chest and stomach areas, eg. your bowels.
- Your lower (lumbar spine).
- Your arms and legs.

### **Red flag symptoms**

Back pain with any of the following symptoms may be a sign of something more serious and you should tell a doctor:

- Weakness of any muscle in the arms or legs.
- Problems with your bladder or bowels.
- Weight loss, or if you feel generally unwell.
- Pain that comes on gradually and slowly gets worse, particularly if you have another medical conditions such as arthritis, Aids, cancer or take steroids. (Most back pain comes on quite quickly.)

### **What treatments are there?**

As with problems elsewhere in your spine, you can help yourself by:

- Keeping active – your spine is designed for movement and resting for more than a day or two can actually make things worse.
- Taking pain relief, such as paracetamol or anti-inflammatories (eg ibuprofen), to dull any the pain so you can get on with your life and stay active.

The main form of treatment involves manipulation and mobilisation of your spine by a trained practitioner such as a:

- Chiropractor
- Osteopath
- Physiotherapist.

To get the most long-term benefit out this treatment, you should make sure that you get advice on:

- good posture
- exercise.

### **Relevant BackCare information**

Factsheet on Osteopathy

### **Evidence base**

The Clinical Anatomy and Management of Thoracic Spine Pain. Editors Giles, LGF & Singer, KP (2000)

### **References**

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<sup>i</sup> Pedersen, 1994; Hinkley & Drysdale, 1995 – quoted in The Clinical Anatomy and Management of Thoracic Spine Pain.

<sup>ii</sup> Neck Pain in Adults, Prodigy Patient information leaflet, 2002

<sup>iii</sup> Deen, 1996 - quoted in The Clinical Anatomy and Management of Thoracic Spine Pain.

<sup>iv</sup> Anderson et al, 1992 - quoted in The Clinical Anatomy and Management of Thoracic Spine Pain.

<sup>v</sup> NHS Prodigy guidance