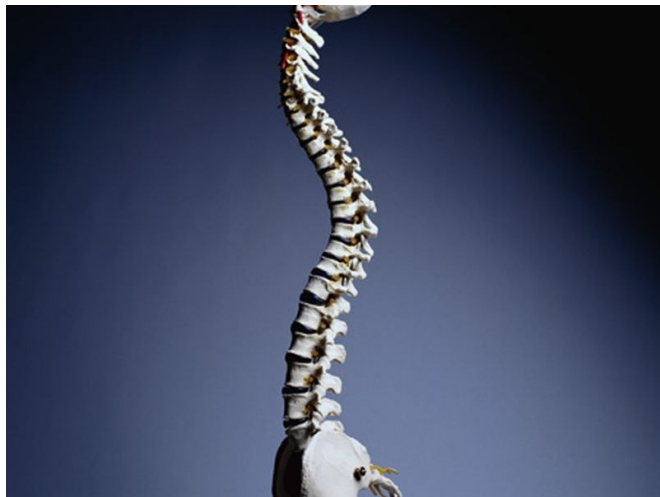


Back pain in older men tied to incident vertebral fractures

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significantly more likely to report any back pain (70 versus 59 percent; prevalence ratio [PR], 1.2), severe back pain (8 versus 4 percent; PR, 1.9), bother from back pain most/all the time (22 versus 13 percent; PR, 1.7), and limited usual activity from back pain (34 versus 18 percent; PR, 1.9).

"Results suggest incident radiographic-only VFs often were symptomatic, and were associated with both new and worsening back pain," the authors write. "Preventing these fractures may reduce back pain and related disability in older men."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)

[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—Incident, clinically undiagnosed radiographic vertebral fractures (VFs) are associated with increased likelihood of back pain symptoms, according to a study published online Sept. 7 in the *Journal of Bone and Mineral Research*.

Howard A. Fink, M.D., M.P.H., from the Geriatric Research Education and Clinical Center in Minneapolis, and colleagues assessed the correlation of incident clinically undiagnosed radiographic VF with back [pain](#) symptoms and associated activity limitations using data from the Osteoporotic Fractures in Men Study. Overall, 4,396 men aged 65 and older completed spine X-rays and symptom questionnaires at baseline and 4.6 years later.

The researchers found that the likelihood of having back [pain symptoms](#) and associated activity limitation at follow-up was highest for men with incident radiographic plus clinical VF. Men with incident radiographic-only VF were also

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