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Spine (Phila Pa 1976). 2002 Feb 1;27(3):313-9.

Influence of smoking on the health status of spinal patients: the National Spine Network database.

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Abstract

STUDY DESIGN: Multicenter, cross-sectional analysis of data from the National **Spine** Network.

OBJECTIVES: Investigate the association between the **smoking** status of spinal patients, duration and severity of symptoms, and their self-reported health status.

BACKGROUND: Although cigarette **smoking** was identified as a potential risk factor for lower back pain many years ago, more recent research is challenging this finding.

METHODS: The National **Spine** Network database contains information on the initial visit of spinal patients visiting physicians at 23 health care institutions in the United States. All patients for whom data were available regarding **smoking** status are included in this study (n = 25,455).

RESULTS: Data from a total of 25,455 patients (11,494 men and 13,961 women) were included in the study; 16.7% (n = 4249) were smokers. Smokers were younger than nonsmokers (44.2 vs. 48.7 years) and were more likely to report severe back symptoms (37 vs. 50%) and to report symptoms of depression (54 vs. 37%). Smokers of each gender scored 10-15 points lower than nonsmokers on each of the SF-36 subscales. These differences persisted when the absolute scores were compared with age- and sex-specific population norms and after adjustment for comorbid conditions, educational level, and depression. Similar results were obtained when the cohort was stratified by primary diagnosis or by surgical status. When postsurgical patients were grouped by time since surgery, those who were nonsmokers reported improved health status by time period; those who smoked did not.

CONCLUSIONS: Smokers and nonsmokers had had spinal symptoms for similar duration, but the smokers reported more severe symptoms, which were present for a greater proportion of time each day. Also, the smokers had lower physical and mental health status scores (based on the SF-36) than did nonsmokers.

PMID: 11805698 [PubMed - indexed for MEDLINE]

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