Low Back Pain Disability Questionnaire

Instructions

This questionnaire has been designed to give us information as to how your back or leg pain is affecting your ability to manage in everyday life. Please answer by checking ONE box in each section for the statement which best applies to you. We realize you may consider that two or more statements in any one section apply but please just shade out the spot that indicates the statement which most clearly describes your problem.

Section 1 - Pain intensity

____ I have no pain at the moment

____ The pain is very mild at the moment

____ The pain is moderate at the moment

____ The pain is fairly severe at the moment

____ The pain is very severe at the moment

____ The pain is the worst imaginable at the moment

Section 2 - Personal care (washing, dressing etc)

____ I can look after myself normally without causing extra pain

____ I can look after myself normally but it causes extra pain

____ It is painful to look after myself and I am slow and careful

____ I need some help but manage most of my personal care

____ I need help every day in most aspects of self-care

____ I do not get dressed, 1 wash with difficulty and stay in bed

Section 3 – Lifting

____ I can lift heavy weights without extra pain

____ I can lift heavy weights but it gives extra pain

____ Pain prevents me from lifting heavy weights off the floor, but I can manage if they are conveniently placed eg. on a table

____ Pain prevents me from lifting heavy weights, but I can manage light to medium weights if they are conveniently positioned

____ I can lift very light weights

____ I cannot lift or carry anything at all

Section 4 - Walking*

____ Pain does not prevent me walking any distance

____ Pain prevents me from walking more than 2 kilometres

____ Pain prevents me from walking more than 1 kilometre

____ Pain prevents me from walking more than 500 metres

____ I can only walk using a stick or crutches

____ I am in bed most of the time

Section 5 – Sitting

____ I can sit in any chair as long as I like

____ I can only sit in my favorite chair as long as I like

____ Pain prevents me sitting more than one hour

____ Pain prevents me from sitting more than 30 minutes

____ Pain prevents me from sitting more than 10 minutes

____ Pain prevents me from sitting at all

Section 6 - Standing

____ I can stand as long as I want without extra pain

____ I can stand as long as I want but it gives me extra pain

____ Pain prevents me from standing for more than 1 hour

____ Pain prevents me from standing for more than 3 minutes

____ Pain prevents me from standing for more than 10 minutes

____ Pain prevents me from standing at all

Section 7 - Sleeping

____ My sleep is never disturbed by pain

____ My sleep is occasionally disturbed by pain

____ Because of pain I have less than 6 hours sleep

____ Because of pain I have less than 4 hours sleep

____ Because of pain I have less than 2 hours sleep

____ Pain prevents me from sleeping at all

Section 8 - Sex life (if applicable)

____ My sex life is normal and causes no extra pain

____ My sex life is normal but causes some extra pain

____ My sex life is nearly normal but is very painful

____ My sex life is severely restricted by pain

____ My sex life is nearly absent because of pain

____ Pain prevents any sex life at all

Section 9 – Social life

____ My social life is normal and gives me no extra pain

____ My social life is normal but increases the degree of pain

____ Pain has no significant effect on my social life apart from limiting my more energetic interests eg, sport

____ Pain has restricted my social life and I do not go out as often

____ Pain has restricted my social life to my home

____ I have no social life because of pain

Section 10-Travelling

____ I can travel anywhere without pain

____ I can travel anywhere but it gives me extra pain

____ Pain is bad but I manage journeys over two hours

____ Pain restricts me to journeys of less than one hour

____ Pain restricts me to short necessary journeys under 30 minutes

____ Pain prevents me from travelling except to receive treatment

*Note: Distances of 1 mile, 1/2 mile and 100 yards have been replaced by metric distances in the Walking section