



養和醫療
HKSH MEDICAL GROUP

For Immediate Release

HKSH Releases Survey Results on Spinal Health in Hong Kong Nearly 90% of Respondents Report Spinal Problems Impacting Daily Life

(28 October 2024, Hong Kong) HKSH Medical Group (HKSH) recently conducted a spinal health survey (August-September 2024) involving 813 respondents to assess the prevalence and management of spinal problems in the Hong Kong population. The survey utilised an online questionnaire, supplemented by face-to-face interviews through HKSH's network of non-profit elderly service organisations and specialist clinics.

Key findings reveal a high prevalence of spinal pain: 87% of respondents experienced spinal pain within the past year. The pain significantly impacted daily life, with nearly half (48%) reporting sleep disturbances, and 37% experiencing negative emotions such as anxiety, depression, and irritability due to pain or limited mobility. Furthermore, 36% reported that spinal problems affected their work.

Common symptoms amongst respondents with spinal problems included muscle tension, musculoskeletal pain, radiating pain, numbness, and limited mobility. Back pain (58%) and neck pain (54%) were most prevalent, followed by sciatica (30%). A substantial portion of respondents (28%) reported experiencing two or more spinal problems concurrently. Persistent back or neck pain (lasting over three months) was reported by 20% and 22% of respondents, respectively, indicating a significant proportion of chronic cases.

Regarding perceived causes, respondents cited spinal degeneration (40%), including bone spurs, degenerated or protruded discs, and spinal stenosis; spinal deformities (24%), such as round back, hunchback or scoliosis; and osteoporosis (21%).

These findings align with a Mainland China study¹ showing a 20.85% increase in new low back pain (LBP) cases between 1990 and 2019, with 91.3 million LBP patients reported in 2019. The study concluded that LBP constitutes a major disability burden in China. Targeted measures must be implemented for high-risk groups to reduce the disease burden of low back pain.

A recent Lancet study (May 2024)² examined the global burden of 371 health issues, analysing financial costs, mortality and morbidity rates, and years lived with disability (YLDs) across countries and regions. The study also highlighted low back pain as the leading cause of disability worldwide, noting a significant increase in prevalence and YLDs with age, particularly among the 85-89 age group. This poses a substantial challenge for nations with ageing populations.

Dr. WU Wing Cheung, Stephen, Head of the Department of Orthopaedics and Traumatology at HKSH, commented, “While Hong Kong boasts one of the world's highest life expectancies, the increasing proportion of elderly individuals living with disabilities before death results in diminished quality of life in their later years. This burden of disease, impacting patients, caregivers, and the community, has been emphasised in publications such as the Chinese Journal of Disease Control & Prevention and the Lancet’s article.”

¹ Time trends in the burden of low back pain and its associated risk factors in China from 1990 to 2019, Chinese Journal of Disease Control & Prevention, 2023 Issue 6 《1990-2019 年中國人群腰背痛及其危險因素疾病負擔變化趨勢》

² Global incidence, prevalence, years lived with disability (YLDs), disability-adjusted life-years (DALYs), and healthy life expectancy (HALE) for 371 diseases and injuries in 204 countries and territories and 811 subnational locations, 1990–2021: a systematic analysis for the Global Burden of Disease Study 2021. Ferrari, Alize J et al. The Lancet, Volume 403, Issue 10440, 2133 – 2161. (www.thelancet.com Vol 403 May 18, 2024)

養和醫療集團有限公司
HKSH Medical Group Limited

香港跑馬地山村道2號
2 Village Road, Happy Valley, Hong Kong

電話 Tel : (852) 2835 8800
傳真 Fax : (852) 2835 8008
電郵 Email : medicalgroup@hksh.com



Members of HKSH Medical Group:

Hong Kong Sanatorium & Hospital | HKSH Healthcare | HKSH Eastern Medical Centre | HKSH Cancer Centre

www.hksh.com



養和醫療
HKSH MEDICAL GROUP

Dr. WU continued, "Spinal degeneration is a prevalent health problem among the elderly, leading to complications such as low back pain, increased pain and limited mobility with weight-bearing activities, and, in severe cases, difficulties with turning, sitting, and walking. While some patients suspect their conditions link to osteoporosis, which requires bone mineral density testing for confirmation. Severe osteoporosis can indeed cause spinal deformity, height reduction, and stooping. Compression fractures can lead to thoracic deformity and abdominal compression, affecting cardiorespiratory function. Fragility fractures, common in the wrist, lumbar spine, and hip, are also strongly associated with osteoporosis. Addressing spinal problems is crucial for maintaining health and quality of life. Early intervention is essential to prevent complications and preserve functional independence."

The survey also revealed a high prevalence of back and neck pain, particularly among working individuals. However, sciatica showed a significantly higher prevalence among respondents aged 64 and older. **Dr. WONG Yat Wa, Honorary Consultant in Orthopaedic Surgery at HKSH**, analysed this, stating, "Prolonged sitting, common among white-collar workers, contributes significantly to back and neck pain. Sedentary lifestyles are clearly linked to spinal problems, underscoring the importance of lifestyle modifications, such as moderate exercise, to promote spinal health."

The survey indicated that when experiencing spinal pain, most respondents (63%) opted for rest and relaxation; half (50%) used patches or topical medications; 42% used massage or manipulation; and 38% took painkillers. 32% sought Western medical treatment.

Dr. LUK Dip Kei, Keith, Honorary Consultant in Orthopaedic Surgery at HKSH, cautioned, "Many respondents managed their spinal problems without formal medical consultation, potentially delaying diagnosis and treatment, especially for hidden deformities or chronic conditions. Delayed treatment can worsen conditions such as adult spinal deformities, which may originate from childhood or adolescent scoliosis. Parents should be vigilant about their children's rapid spinal growth during puberty and should seek professional evaluation for any abnormalities."

Concerning elderly patients, **Dr. Joshua KO, Honorary Consultant in Orthopaedic Surgery at HKSH**, said, "Spinal degeneration is a very common cause of spinal disease in the elderly. They may have multiple co-existing conditions, such as heart disease, hypertension, or diabetes, which require careful consideration when choosing a treatment. Minimally invasive surgery is a good option because it's less invasive and reduces risks. But ultimately, creating a truly personalised treatment plan requires collaboration with other specialists, like cardiologists and neurologists, to address all aspects of the patient's health."

Dr. CHOW Chi Ping, Alex, Director, Department of Physical Medicine and Rehabilitation at HKSH, adds that minimally invasive surgery allows for a shorter recovery time, thus minimises disruption to patients' daily lives. However, he stresses the critical role of professional post-surgical rehabilitation. This rehabilitation facilitates faster recovery of mobility, minimises post-surgical complications, and significantly improves quality of life.

Dr. WONG further highlights the occurrence of spinal tumours and spinal cord or nerve damage, in addition to degeneration. He said, "Taking metastatic spinal tumours as an example, orthopaedic surgeons and oncologists collaborate to provide optimal palliative care. In some cases, surgical intervention, such as separation surgery (to separate the tumour from spinal cord), can enhance the effectiveness of radiation therapy; in others, complete removal of the malignant tumour may reduce the risk of local recurrence, improving prognosis."

In response to the high incidence of spinal disorders and their impact on public health, **Dr. Joseph CHAN, Chief Medical Officer of HKSH Medical Group, Deputy Medical Superintendent of Hong Kong**

養和醫療集團有限公司
HKSH Medical Group Limited

香港跑馬地山村道2號
2 Village Road, Happy Valley, Hong Kong

電話 Tel : (852) 2835 8800
傳真 Fax : (852) 2835 8008
電郵 Email : medicalgroup@hksh.com



Members of HKSH Medical Group:
Hong Kong Sanatorium & Hospital | HKSH Healthcare | HKSH Eastern Medical Centre | HKSH Cancer Centre

www.hksh.com



養和醫療
HKSH MEDICAL GROUP

Sanatorium & Hospital stated that HKSH will establish a Spine Centre. He explained that addressing spinal problems requires a holistic approach involving orthopaedic specialists, neurosurgeons, and pain specialists. Throughout the recovery process, rehabilitation support, including physiotherapy and other rehabilitative therapies, is essential. Therefore, multidisciplinary consultations are vital for providing personalised treatment.

Dr. CHAN also revealed that the HKSH Spine Centre will collaborate closely with orthopaedic professors at HKUMed on both clinical consultations and joint medical research into complex spinal disorders and advanced treatment technologies to enhance treatment effectiveness and facilitate patient recovery.

– End –

For media enquiries, please contact:

Corporate Affairs Department

Eunice CHENG Tel: 2917 5828

Iris LUO Tel: 2917 5820

Email: media@cad.hksh.com

About HKSH Medical Group

Officially launched in September 2017, HKSH Medical Group promotes public health and advanced medicine through a multi-faceted, coordinated approach across clinical services, medical education, scientific research and public health education. Members of the Group, including Hong Kong Sanatorium & Hospital, HKSH Healthcare and HKSH Eastern Medical Centre, are dedicated to offering top-quality holistic care to patients, upholding the motto ‘Quality in Service, Excellence in Care.’

Established in 1922, Hong Kong Sanatorium & Hospital is one of the key members of HKSH Medical Group and a leading private hospital in Hong Kong. Living up to its motto of ‘Quality in Service, Excellence in Care’, the Hospital is committed to serving the public as well as promoting medical education and research.

For more information about HKSH Medical Group, please visit www.hksh.com.

養和醫療集團有限公司
HKSH Medical Group Limited

香港跑馬地山村道2號
2 Village Road, Happy Valley, Hong Kong

電話 Tel : (852) 2835 8800
傳真 Fax : (852) 2835 8008
電郵 Email : medicalgroup@hksh.com



Members of HKSH Medical Group:

Hong Kong Sanatorium & Hospital | HKSH Healthcare | HKSH Eastern Medical Centre | HKSH Cancer Centre

www.hksh.com



Appendix: Patient Sharing

1. Patient with kidney disease and cervical spinal cord disease

Background	<ul style="list-style-type: none"> ✧ A 68-year-old female patient with renal failure and polymyalgia rheumatica ✧ Underwent a renal transplant in 2003, with graft failure occurring in 2012, necessitating continuous haemodialysis. ✧ Medical history includes left atrial myxoma, ischaemic heart disease, diabetes, hypertension, and hyperuricaemia. ✧ Previously independent in activities of daily living, able to walk unaided, and cared for her husband. 		
Symptom Overview	<ul style="list-style-type: none"> ✧ Recent flare up of polymyalgia rheumatica in mid-June this year after an episode of respiratory syncytial virus(RSV) infection with severe pain over shoulder, back and hip ✧ In addition to flare up of pain, also developed numbness and weakness over all limbs ✧ The condition rapidly progressed in the week prior to consultation, with the patient unable to walk for the two days leading up to the appointment. ✧ Severe weakness in both hands and not able to stand up and transfer to chair by herself ✧ Suspected neurological cause of her generalised weakness and sensory impairment 	Examination and Initial Assessment	<ul style="list-style-type: none"> ✧ Neurological examination ✧ Subacute to acute onset of generalised limb weakness with upper motor neuron sign ✧ No significant cranial nerve dysfunction
Diagnosis 1	✧ Cervical myelopathy	Treatment Plan 1	<ul style="list-style-type: none"> ✧ Emergency operation the next day ✧ Pre-operative assessment : Cardiologist assessment for pre-operative evaluation, and renal physician to conduct pre-operative haemodialysis ✧ Spine surgery : Cervical laminoplasty
Additional Issues	✧ Persistent left thigh pain during walking	Treatment Plan 2	Surgery :



During Recovery			<ul style="list-style-type: none"> ✧ Epidural block at left L3/L4 and L4/L5 to relieve thigh pain
Diagnosis 2	<ul style="list-style-type: none"> ✧ L3/4 stenosis and slip ✧ L4/5 spondylosis 		Minimally invasive surgery(MIS) : <ul style="list-style-type: none"> ✧ Minimally invasive spinal fusion and decompression from L3 to L5
Case Insights	<ol style="list-style-type: none"> 1. Complex cases require multidisciplinary collaboration 2. Classify conditions as emergency or non-emergency based on symptoms, and make appropriate treatment decisions 3. Minimally invasive surgery can reduce surgical risks and enhance post-operative recovery 		

2. Patient with spinal metastasis

Background	<ul style="list-style-type: none"> ✧ Middle-aged male patient, previously healthy, with no major illnesses
Symptom Overview and Past Consultation Experience	Initial symptoms and consultation: <ul style="list-style-type: none"> ✧ Experienced severe back pain upon waking, requiring ambulance transport to hospital ✧ X-rays showed no abnormalities; received pain relief injections and was sent home Progression and Subsequent Consultation: <ul style="list-style-type: none"> ✧ Pain persisted at home, accompanied by convulsions and severe pain in the right leg upon contact with the ground, lasting for some time ✧ Consulted a familiar orthopaedic specialist, underwent a CT scan revealing malignant erosion of the C2 vertebra, posing a risk of sudden fracture ✧ Unable to walk independently
Treatment Plan	<ul style="list-style-type: none"> ✧ Spine surgery : Occipitocervical stabilisation and instrumented fusion for C2 pathological fracture
Treatment Outcome	<ul style="list-style-type: none"> ✧ Post-surgery recovery was good; the patient regained the ability to move and walk, though neck movement was restricted
Pathological Diagnosis	<ul style="list-style-type: none"> ✧ Tissue biopsy during surgery confirmed renal cancer metastasis to the spine
Follow-up Treatment	<ul style="list-style-type: none"> ✧ Following cervical spine treatment, radiation therapy was administered by the oncology department. ✧ Post-radiation, the patient experienced fatigue and temporary loss of taste, lasting about a month. ✧ Currently, symptoms have largely resolved. ✧ Ongoing treatment for renal cancer in the oncology department.
Case Insights	<ol style="list-style-type: none"> 1. Spine is a common location for metastasis 2. Multidisciplinary collaboration is essential, with orthopaedic specialists



養和醫療
HKSH MEDICAL GROUP

	playing a crucial role in treatment and requiring close cooperation with oncology and radiology experts
--	---------------------------------------------------------------------------------------------------------

養和醫療集團有限公司
HKSH Medical Group Limited

香港跑馬地山村道2號
2 Village Road, Happy Valley, Hong Kong

電話 Tel : (852) 2835 8800
傳真 Fax : (852) 2835 8008
電郵 Email : medicalgroup@hksh.com



Members of HKSH Medical Group:

Hong Kong Sanatorium & Hospital | HKSH Healthcare | HKSH Eastern Medical Centre | HKSH Cancer Centre

www.hksh.com



養和醫療
HKSH MEDICAL GROUP

Photo Caption :



Back row, from left:

- **Dr. CHOW Chi Ping, Alex**, Director, Department of Physical Medicine and Rehabilitation of HKSH
- **Dr. KWAN Yat Hong, Kenny**, Chief of Division of Spine Surgery & Clinical Associate Professor, Department of Orthopaedics and Traumatology, School of Clinical Medicine, The University of Hong Kong
- **Dr. Joshua KO**, Honorary Consultant in Orthopaedic Surgery of HKSH
- **Dr. Joseph CHAN**, Chief Medical Officer of HKSH Medical Group, Deputy Medical Superintendent of Hong Kong Sanatorium & Hospital
- **Dr. WU Wing Cheung, Stephen**, Head of the Department of Orthopaedics and Traumatology of HKSH
- **Dr. LUK Dip Kei, Keith**, Honorary Consultant in Orthopaedic Surgery of HKSH
- **Dr. YUNG Wai Hung, Raymond**, Deputy Medical Superintendent of Hong Kong Sanatorium & Hospital
- **Dr. WONG Yat Wa**, Honorary Consultant in Orthopaedic Surgery of HKSH

Front row, center:

- **Mrs. Yuen**, patient

養和醫療集團有限公司
HKSH Medical Group Limited

香港跑馬地山村道2號
2 Village Road, Happy Valley, Hong Kong

電話 Tel : (852) 2835 8800
傳真 Fax : (852) 2835 8008
電郵 Email : medicalgroup@hksh.com



Members of HKSH Medical Group:

Hong Kong Sanatorium & Hospital | HKSH Healthcare | HKSH Eastern Medical Centre | HKSH Cancer Centre

www.hksh.com



養和醫療
HKSH MEDICAL GROUP



- As a patient with multiple chronic illnesses, Mrs. Yuen shared her journey of being diagnosed with cervical myelopathy as well as lumbar stenosis and instability. Emergency operations including cervical spinal widening surgery and minimal invasive fusion & decompression surgery were required.

養和醫療集團有限公司
HKSH Medical Group Limited

香港跑馬地山村道2號
2 Village Road, Happy Valley, Hong Kong

電話 Tel : (852) 2835 8800
傳真 Fax : (852) 2835 8008
電郵 Email : medicalgroup@hksh.com



Members of HKSH Medical Group:

Hong Kong Sanatorium & Hospital | HKSH Healthcare | HKSH Eastern Medical Centre | HKSH Cancer Centre

www.hksh.com