

# Adolescent lifestyle not strongly tied to later muscular pain

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ORs for pain in at least three body regions were high, but the CIs were broad (ORs, 1.7 [95 percent CI, 0.8 to 3.5] and 1.4 [95 percent CI, 0.8 to 2.2], respectively).

"As adverse health behaviors in adolescence were moderately associated with multisite musculoskeletal pains in adulthood, the effectiveness of intervening in adverse health behaviors in adolescence as regards later [musculoskeletal pain](#) should be analyzed," the authors write.

**More information:** [Abstract](#)  
[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—Adverse health behaviors in adolescence are only moderately associated with later musculoskeletal pain in adulthood, according to a study published in the June issue of *Pain Medicine*.

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Antti Puroila, from the University of Oulu in Finland, and colleagues utilized data from a subset of participants (5,737) in the 1966 Northern Finland Birth Cohort to assess the relationship between [health behaviors](#) at age 14 years and pain at approximately age 31 years.

The researchers found that among males, adverse health behaviors in adolescence such as occasional smoking and overweight/obesity predicted pain in three or more body regions at the age of 31 years (odds ratios [ORs], 1.6 [95 percent confidence interval (CI), 1.0 to 2.6] and 1.7 [95 percent CI, 1.0 to 2.8], respectively). Among women, pain predictors included daily smoking (OR, 1.9; 95 percent CI, 1.0 to 3.5) and regular use of alcohol (OR, 2.2; 95 percent CI, 1.0 to 4.8). Risk factors for two pain sites among females included physical inactivity (OR, 1.6; 95 percent CI, 1.1 to 2.5) and [moderate physical activity](#) (OR, 1.7; 95 percent CI, 1.1 to 2.6). For daily smoking among males and overweight/obesity among females, the

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