

JSNA Health and Wellbeing Profile 2026/27

Musculoskeletal (MSK) Conditions

Musculoskeletal conditions are the leading cause of pain and disability in England and account for one of the highest causes of sickness absence and productivity loss. Musculoskeletal (MSK) conditions affect joints, ligaments, tendons, muscles and nerves and supporting structures of the limbs and back (e.g. spinal discs).

The impacts of MSK conditions are significant as sufferers can live with them for many years, resulting in a long-term burden of pain and impaired functioning, and possibly mental health issues. There is also a substantial economic burden due to work days lost and healthcare costs.

Summary points

- 14.1% of adults in Bristol live with a musculoskeletal problem (2024)
- Approximately 77,620 (15.7%) of Bristol residents suffer from back pain; 28,500 (17.8%) of adults aged over 45 suffer from knee osteoarthritis and 17,320 (10.8%) suffer from hip osteoarthritis.
- In Bristol, the prevalence of osteoporosis in the population aged 50 years and over was 1.9%, significantly higher than England average of 1.2% (2024/25).

Musculoskeletal Conditions

Musculoskeletal conditions have been ranked as a top reason for 'years lived with disability' in England and in Bristol¹. MSK conditions are known to impact quality of life by increased pain, limiting range of motion and impacting the ability to take part in daily life such as attending work.

In Bristol 14.1% of adults aged 16 and over reported a musculoskeletal problem² in 2024, significantly lower than England average of 17.9%. Those numbers increase with age, with 48.5% of people over 85 reporting a musculoskeletal problem nationally. In addition, more women (20.0%) than men (15.6%) struggle with musculoskeletal conditions.

National data on health inequalities identified three ethnic groups where the reporting of a long-term MSK problem was significantly higher than the England average, namely: White British (21.0%), White Irish (20.9%) and Black Caribbean (20.2%).

Back pain

Lower back pain has been ranked as the third highest cause of death and disability combined for both Bristol and nationally, according to the Global Burden of Disease Study 2021 (published May 2024), accounting for 4.65% of the total Disability Life Adjusted Years (DALY's) in Bristol and 4.4% in England. It ranks as the highest contributor in Bristol and England for the number of years lived with disability and affects people of all ages; their performance at work and general well-being.

There are several risk factors for developing back pain, including occupational posture, depressive moods, obesity, body height, physical activity levels and age.

¹ [Global Burden of Disease Study 2021](#)

² GP Patient Survey via Office for Health Improvement and Disparities (OHID) [Musculoskeletal health: local profiles](#)

It is estimated that in Bristol 15.7% of people all ages (approximately 77,620 Bristol residents - using mid-year population estimates for 2024) are suffering from back pain³, lower than the national average of 16.9%.

Osteoarthritis

Osteoarthritis is a degenerative joint disease that may cause cartilage loss and morphological damage to other joint tissues. Osteoarthritis was ranked as the 12th largest contributor to years lived with disability in Bristol in the 2021 Global Burden of Disease Study⁴.

[A prevalence modelling tool for musculoskeletal conditions](#), developed by Arthritis UK and Imperial College London estimated that prevalence of knee osteoarthritis among people aged 45 and over in Bristol in 2012 was 17.8%, similar to the national average of 18.2%. Applied to the latest available population statistics for 2024, this means that over 28,500 Bristol residents are suffering from the disease.

The same modelling tool estimated the prevalence of hip osteoarthritis in people aged 45 and over as 10.8%, which equates to over 17,320 Bristol residents (2024). Also similar to the national average of 10.9%.

Rheumatoid arthritis

Rheumatoid arthritis is an inflammatory disease of joints. It affects the small joints of the hands and the feet, usually both sides equally, although any synovial joint can be affected.

In Bristol, the prevalence of rheumatoid arthritis in the population aged 16+ is significantly lower than nationally: 0.60% compared to 0.79% in England. Nearly 3,000 Bristol residents are suffering from the disease. Prevalence of rheumatoid arthritis in Bristol has remained stable over the years (Figure 1).

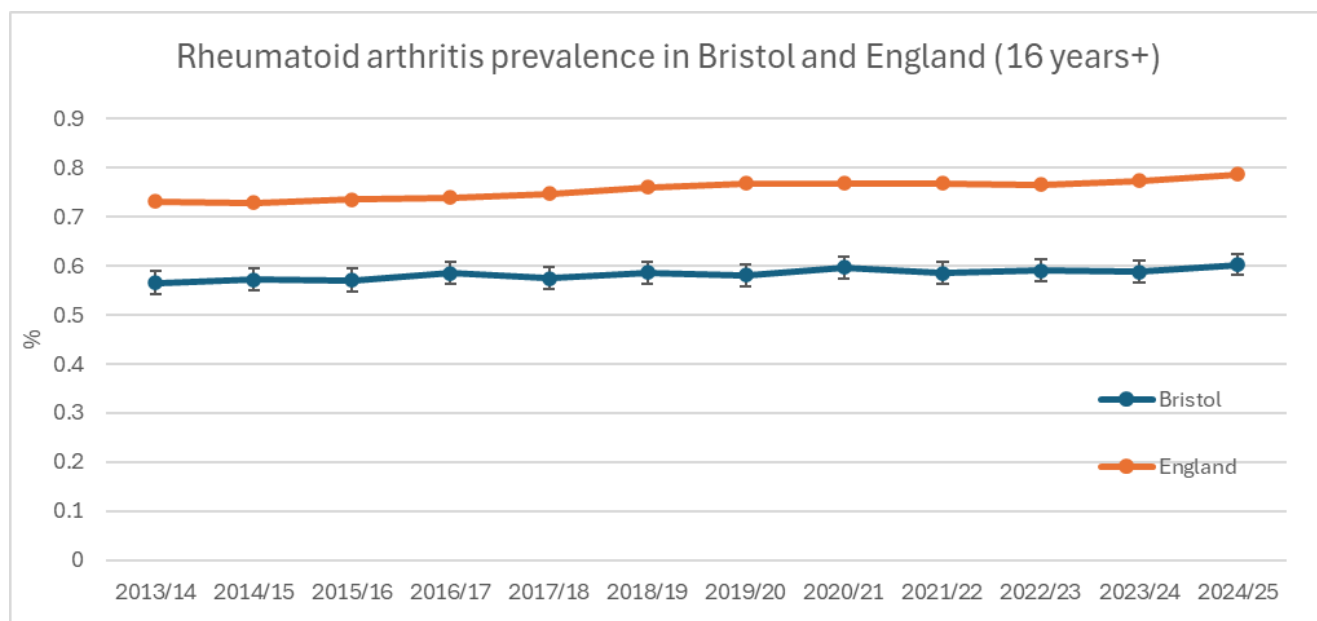


Figure 1: Rheumatoid arthritis prevalence, population aged 16+. Bristol vs England. Source: Office for Health Improvement and Disparities Musculoskeletal health: local profiles (May 2026).

³ [Musculoskeletal \(MSK\) Calculator](#) produced by Imperial College London for Arthritis UK

⁴ [Global Burden of Disease Study 2021](#)

Osteoporosis is a health condition that weakens bones, making them fragile and more likely to break. It develops slowly over several years and is often only diagnosed when a fall or sudden impact causes a bone to break (fracture)⁵.

Women are at greater risk of osteoporosis due to the decrease in oestrogen production at the menopause, which accelerates bone loss. The prevalence of osteoporosis increases markedly, from approximately 2% at 50 years of age to almost 50% at 80 years of age⁶.

In Bristol, the prevalence of osteoporosis in the population aged 50 years and over in 2024/25 was 1.9%, significantly higher than England average of 1.2%. Bristol osteoporosis prevalence rose sharply between 2014/15 and 2018/19 but is now stabilising at just under 2% (Figure 2).

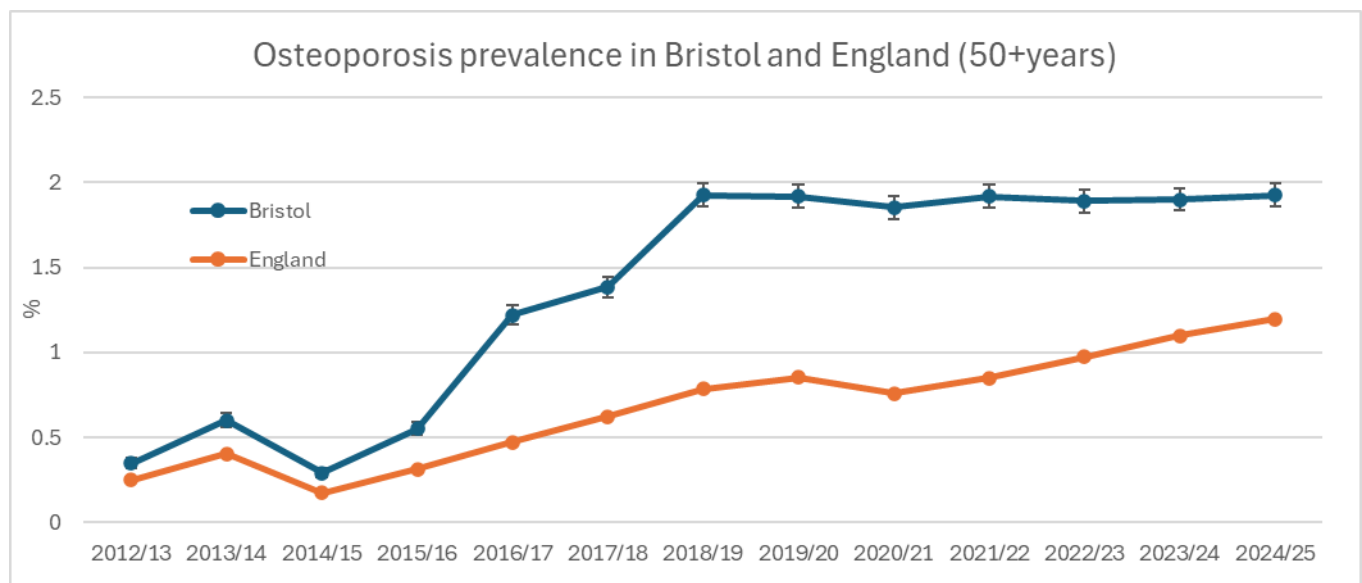


Figure 2: Osteoporosis prevalence, population aged 50+. Bristol vs England. Source: OHID Musculoskeletal health: local profiles (May 2026).

One of the consequences of osteoporosis is a hip fracture (fracture of the neck of femur). The average age of a person with a hip fracture is 83 years for women and 84 for men with the majority of fractures occurring among women (76%)⁷.

In Bristol there were 395 emergency hospital admissions in 2024/25 due to a hip fracture in the population aged 65 and over, a rate of 618 admissions per 100,000 population, significantly higher than the national average of 536 per 100,000 population (Figure 3). The rate was significantly higher for women (715 per 100,000) than men in Bristol (494 per 100,000). The national rate for females was 633 per 100,000 which is statistically similar to the Bristol female rate but the male rate in Bristol was significantly higher than the national average of 394 per 100,000.

⁵ [NHS - Osteoporosis](#)

⁶ National Institute for Health and Care Excellence: <https://cks.nice.org.uk/topics/osteoporosis-prevention-of-fragility-fractures/background-information/prevalence/>

⁷ NICE: [The management of hip fracture in adults](#)

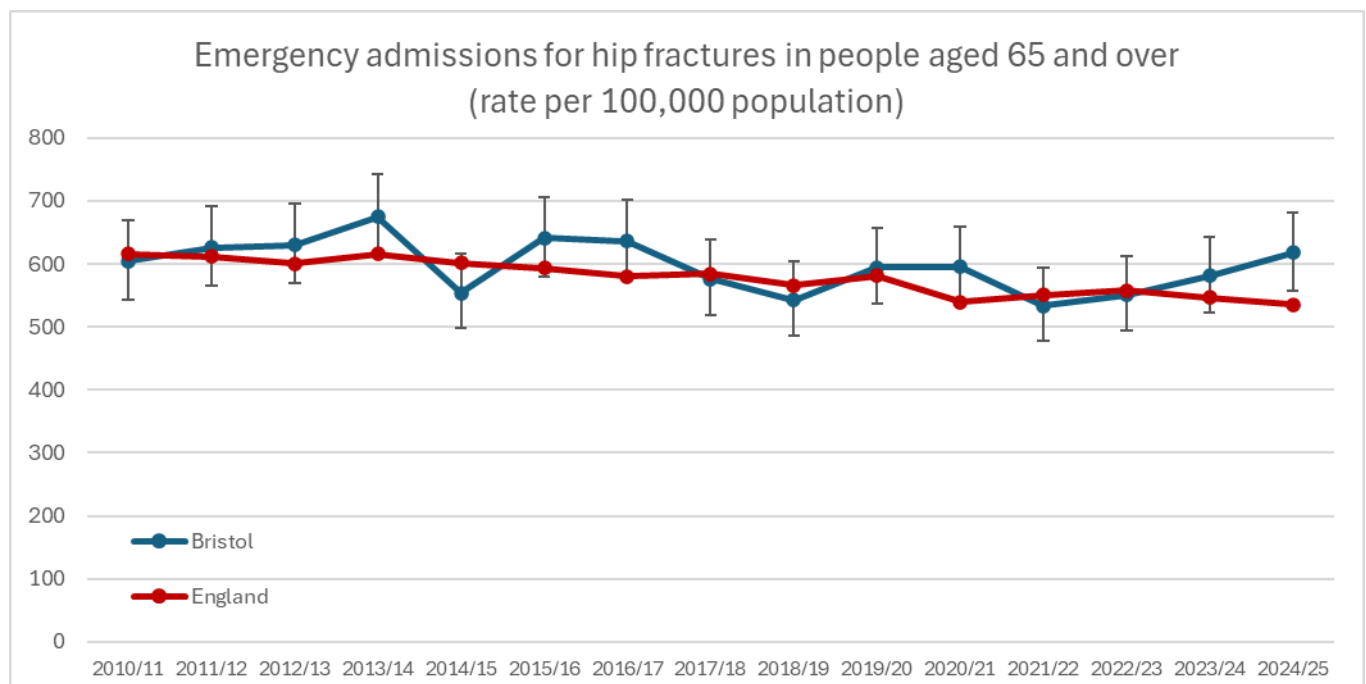


Figure 3: Hospital admissions due to hip fractures. Public Health Outcomes Framework, May 2026.

Risk factors

Musculoskeletal conditions are one of the biggest threats to the health of people who are obese. Obesity directly damages weight-bearing joints such as knees and hips because of the abnormally high loads they have to carry⁸. In Bristol 59.4% of adults aged 18 and over are overweight or obese, lower than the national average of 64.6% (2024/25)⁹.

Physical inactivity is also a risk factor in developing musculoskeletal conditions. In Bristol 14.4% of adults aged 19 and over have been classified as physically inactive, significantly lower than the national average of 21.8% (2024/25)¹⁰.

Further data / links / consultations:

- Office for Health Improvement and Disparities (OHID) [Musculoskeletal health: local profiles](#)
- [Arthritis UK](#)
- [Musculoskeletal health: applying All Our Health - GOV.UK \(www.gov.uk\)](#)
- JSNA section - [Falls](#)

Covid-19 Impact:

While the full impact of Covid-19 upon musculoskeletal conditions remains to be seen, it is likely that reduced opportunities to exercise, ability to eat a balanced diet and achieve or maintain a healthy weight, and the increased burden of poor mental health will be seen to have an impact upon some musculoskeletal conditions.

Date updated: May 2026

Next update due: May 2027

⁸ Versus Arthritis: [State of Musculoskeletal Health 2019](#)

⁹ Public Health England (based on Active Lives survey, Sport England) [MSK Profile](#)

¹⁰ % of respondents aged 19 and over, with valid responses to [questions on physical activity](#), doing less than 30 moderate intensity equivalent (MIE) minutes physical activity per week in bouts of 10 minutes or more in the previous 28 days.