



## Effectiveness of various treatments for low back pain management

NEWS

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Around 60% - 80% adults experience low back pain (LBP) at some point throughout their lifetime. Various treatment options are available for LBP management, but it is crucial to issue an evidence-based assessment for these options.

Rihn JA and colleagues performed a systematic review and network meta-analysis to investigate the current treatment options of LBP as per randomized controlled trials (RCTs). The effectiveness was compared using the mixed-treatment comparison (MTC).

MEDLINE and the Cochrane Collaboration Library were systematically searched for the RCTs from 1990 to 2014. Preoperative and postoperative ODI and VAS back pain scores, additional surgeries, and complications were extracted from the specified studies. Standard and network meta-analytic techniques were manipulated.

A total of 12 RCTs were included in the investigation: 5 fusion versus exercise and CBT; 5 total disk replacement (TDR) versus fusion; 1 TDR versus exercise and cognitive behavioral therapy (CBT); and 1 fusion versus physical therapy (PT). The pooled mean difference supporting fusion over exercise and CBT was 2.0 points on the basis of MTC, concerning the ODI change scores. The pooled mean difference favoring TDR over exercise and CBT, and TDR over fusion was 6.4 points and 4.4 points. The pooled mean differences favoring fusion over PT resulted in 8.8 points. For PT versus structured exercise with CBT, the pooled mean difference favouring exercise with CBT over PT was 6.8 points and for TDR versus PT, favouring TDR over PT was 13.2 points. Between different treatments, additional surgery rates were related.

Therefore, all the four mentioned treatments imparted some advantages in chronic LBP patients. Further, as reported by MTC analysis, The TDR may be the most efficient treatment. Whereas, the PT may be the least efficient treatment for chronic LBP management.

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Link to the source: <https://www.ncbi.nlm.nih.gov/pubmed/27831982>

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