



Advances in Low Back Pain Management

An evidence based update

Low Back Pain (LBP) is a significant and disabling problem in today's society and is likely the most common reason an individual will visit your office next to the common cold.¹ LBP will be experienced by 65% to 90% of individuals at some point in their lifetime.² Acute LBP will typically resolve within 6 weeks in 80% to 90% of episodes, but recurrence rates are as high as 79% to 84%.^{2,3} In those with acute LBP, 2% to 3% will go on to develop disabling chronic LBP.^{4,5} The physical therapists at Hands on Physical Therapy would like to share with you recent valuable evidence on the role of Physical Therapy (PT) in the management of low back disorders. We hope that this information will facilitate dialogue and decision making to better serve those with LBP.

Physical Therapy Management of LBP

Physical therapy has been shown to be effective in the management of acute^{6,7} and chronic LBP.^{8,9} Specific PT interventions have been shown to reduce the rate of recurrence as well as intensity of recurrent LBP by 67% and 59% respectively when compared to medicine, rest and advice.³ Patients with earlier access to physical therapy also return to work sooner than when referral is delayed.^{4,12} Evidence suggests that therapeutic outcomes are maximized when patient presentation is classified into specific subgroups and treatment is based on this classification.^{6,10,11} Individuals meeting select criteria within treatment based classification approach can experience as high as 95% successful reduction in disability with just a few visits through a combination of manual physical therapy and exercise.⁶

Another important consideration in the treatment and prevention of chronic LBP (and consequent disability) are the effects of fear-avoidance behaviors.¹³ Fear-avoidance beliefs are a primary factor determining whether an individual utilizes avoidance or confrontation as a strategy to recovery.¹⁷ Fritz et al¹⁴ found work-related fear was highly predictive of return to work. Also, George et al^{15,16} found that recognition of fear-avoidance beliefs and treatment according to those beliefs yielded less disability at 4 weeks and 6 months than standard care. A treatment based categorization approach in combination with fear-avoidance interventions can maximize outcomes in these individuals.^{15,16}

Based on evidence from high quality clinical trials, the treatment based classification approach including manual physical therapy, exercise and fear-avoidance considerations (when appropriate) will benefit many of your patients with LBP. In acute LBP cases, delaying PT treatment may result in LBP recurrence or future disability despite initial resolution of symptoms. The professional team at Charlie Company Physical Therapy will honor the privilege of consulting and collaborating with you and your patients with acute, chronic or recurrent LBP. We look forward to the opportunity to partner with you in an effort to improve the health of your patients and enable their return to optimal function during work, daily and leisure activities.

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