

Physical therapy helps with acute and chronic low back pain

By Jerry Moczerniuk, PT, DPT

Lower back pain has, and continues to be, one of the most common reasons for physician visits in the United States. The majority of Americans experience back pain in their lifetime. Low back pain has been for years associated with very high healthcare costs and costs related to lost wages and productivity. In 2006, the costs attributable to low back pain were estimated at \$100 billion in the United States alone.

In early 2017, The America College of Physicians (ACP) released new guidelines for non-invasive treatments of acute, sub-acute and chronic low back pain. The ACP looked at effectiveness of pharmacological and non-pharmacological treatments of low back pain at different stages of pain.

The ACP found some benefits in pharmacological treatment of low back pain, but primarily with strong medications, and for long term (chronic low back pain). For acute or sub-acute pain, acetaminophen,

NSAIDs and systemic corticosteroids were no different than placebo for pain intensity. For chronic low back pain, NSAIDs, opioids and benzodiazepines were associated with small pain improvements only and lasted for a limited time.

The review of research from the ACP also looked at nonpharmacologic therapies and their comparative benefits. For acute low back pain, research showed some benefits of massage and spinal manipulation. The research also showed moderate pain relief with superficial heat. Low-laser therapy and NSAIDs combination largely decreased pain intensity and resulted in moderate functional improvements in patients with acute and sub-acute low back pain. For patients with low back pain, evidence shows that both exercises and motor control exercises (control and support of the spine) result in improvements in pain and function.

Recommendations provided by the ACP are based on the above summarized research results, and state that for acute

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Physical therapy

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and sub-acute low back pain clinicians and patients should select nonpharmacologic treatment consisting of superficial heat, massage, spinal manipulation and low-laser therapy.

Likewise for chronic low back pain, nonpharmacologic interventions are considered as first line options because there are fewer harms associated with these types of therapies. The recommendations also stated that greater effects on pain are associated with individually designed programs, and supervised home exercises.

These recommendations shown effectiveness of physical therapy interventions (exercises, massage, moist heat, low-laser therapy, stretching) in treatment of both acute and chronic low back pain. Physical therapy, however, should be tailored and specific to an individual.

A skilled physical therapist is capable of accurately diagnosing the cause of back pain, and should tailor treatment based on individual patient needs. Physical therapy treatment may consist of modalities to control pain and swelling, specific exercises in directional preference, stabilization exercises, hands on techniques to improve joint mobility and decrease spasm, activity modification strategies and postural re-education to decrease symptoms and facilitate healing.



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