

[IMAGE]

The Rehabilitation of Low Back Pain: What Works Best

Back pain is an extremely common condition; by most estimates, 80 percent of all people experience it at some point in their lives. Chronic low back pain is an especially common disorder. Evidence suggests that using rehabilitation techniques to treat low back pain patients is more effective than doing nothing. The question is, which types of rehabilitation work best?

In this randomized, controlled trial, 212 people with chronic low back pain were assigned to one of four groups: active physical exercise, cognitive behavioral therapy, a combination of the two therapies, or no treatment. Patients undergoing active physical exercise rode a bicycle and performed back exercises to improve fitness levels and increase back strength, while patients used cognitive behavioral therapy to help them cope with the pain and overcome their reluctance to perform physical activities.

At the end of the trial, patients in all of the treatment groups saw an improvement in function and a reduction in pain levels compared to the group that received no treatment. In addition, the ability to perform certain physical tasks improved in patients who received active physical exercise or combined therapy, but not cognitive behavioral therapy.

While exercise and cognitive therapy appear effective in helping to rehabilitate people with low back pain, they are by no means the only therapies available. Your doctor of chiropractic can draw up a treatment program that combines chiropractic adjustments with techniques such as those listed above to provide a safe, effective form of rehabilitation. For more information on the methods doctors of chiropractic use in the treatment of low back pain, visit www.chiroweb.com/find/archives/musculoskeletal/backpain.

Reference:

Smeets RJEM, Vlaeyen JWS, Hidding A, et al. Active rehabilitation for chronic low back pain: cognitive-behavioral, physical, or both? First direct post-treatment results from a randomized controlled trial. *Musculoskeletal Disorders* Jan. 20, 2006;7:5.

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