

## Studies on Lumbar and Cervical Findings

1) **“Efficacy of Spinal Manipulation and Mobilization for Low Back Pain and Neck Pain: A Systematic Review and Best Evidence Synthesis.”** Gert Bronfort, Mitchell Haas, Roni Evans, Lex Bouter. *Spine*. 2004;335-356.

- 43 RCT's which met the admissibility data for study validity and statistical significance were reviewed. The study was aimed to assess the efficacy of Spinal Manipulation Therapy (SMT) and Mobilisation (MOB) for the management of lower back pain (LBP) and neck pain (NP)
- Results

**Acute LBP-** moderate evidence that SMT provides more short term relief than MOB and detuned diathermy and limited evidence that SMT provides faster recovery than a commonly used physical therapy treatment strategy.

**Chronic LBP-** SMT/ MOB is effective in the short term when compared with placebo and general practitioner care and in the long term compared to physical therapy. There is limited to moderate evidence that SMT is better than physical therapy and home back exercise in both the short and long term.

**Acute and Chronic LBP-** SMT/ MOB provides either similar or better pain outcomes in the short and long term when compared with placebo, McKenzie therapy, Medical care, management by physical therapists, soft tissue treatment and back school.

**Acute NP-** there are limited studies and thus the evidence is inconclusive. (recent research now provides more conclusive evidence for Acute and Sub-Acute NP. Please refer to cervical spine studies).

**Chronic NP-** there is moderate evidence that SMT/MOB is superior to general practitioner management for short term pain reduction but that SMT offers similar pain relief to high-technology rehabilitative exercise in the short and long term.
- According to the research reviews, Manipulation and mobilisations by Chiropractors can be confidently recommended as viable options for the treatment of neck and low back pain.

2) **“Chronic Spinal Pain Syndromes: A Clinical Pilot Trial Comparing Acupuncture, a NSAID and Spinal Manipulation.”** Lynton G.F. Giles and Reinhold Muller. *Journal of Manipulative and Physiological Therapeutics*. 1999;22:376-381.

- Participants received either acupuncture, NSAIDs' or Chiropractic Spinal Manipulation.
- After 4 weeks, Chiropractic Spinal Manipulation was the only treatment intervention that achieved statistically significant improvements in pain and disability for neck, lower back and upper back pain.

3) **“Chronic Spinal Pain: A Randomised Clinical Trial, Comparing Medication, Acupuncture and Spinal Manipulation.”** L.G. Giles and R. Muller. *Spine*. 2003;28(14):1490-1502.

- Patients with Chronic pain treated with Spinal Manipulation, had consistent statistically significant improvements above acupuncture and medication without the side effects of NSAIDS. A follow up after the study revealed that manipulation had retained its efficacy.

4) **Long-Term Follow up of a Randomised Clinical Trial Assessing the Efficacy of Medication, Acupuncture and Spinal Manipulation for Chronic Mechanical Spinal Pain Syndromes**". Reinhold Muller and Lynton G.F. Giles. *Journal of Manipulative and Physiological Therapeutics*. 2005;28:3-11.

- The objective of this study was to assess the long term benefits of medication, needle acupuncture and Spinal Manipulation for patients with chronic (>13 weeks) spinal pain syndromes.
- The study concluded that for patients with chronic spinal pain syndromes, Spinal Manipulation if not contra-indicated, may be the only treatment modality of the assessed regimens, which provides broad and significant long-term benefits.