Comparison of spinal manipulation methods and usual medical care for acute and subacute low back pain: a randomized clinical trial.

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With low back pain being a common, and often debilitating, condition treated by both medical doctors and doctors of chiropractic, elucidating the most effective treatment strategy has potential for wide-ranging influence on patient treatment options.

Schneider et al., (2015) conducted a randomized clinical trial comparing the effectiveness of Manual Thrust Manipulation with Mechanical-assisted (Activator Instrument) Manipulation, as well as manipulation with Usual Medical Care. Participants consisted of 107 adults with acute and subacute low back pain. The 2 manipulation groups were treated twice per week for 4 weeks. Usual Medical Care participants were prescribed OTC medications and advised to avoid lengthy bed rest and stay physically active.

At the 4 week time point, Manual Thrust Manipulation was found to significantly decrease low back pain and disability compared with Mechanical-assisted Manipulation (disability = −8.1, P = 0.009; pain = −1.4, P = 0.002) and also compared with Usual Medical Care (disability = −6.5, P = 0.032; pain = −1.7, P < 0.001). Comparisons of Mechanical-assisted Manipulation with Usual Medical Care did NOT show a statistically significant difference in outcomes at 4 weeks. At 3 and 6 months, there were no significant differences between any of the groups.

**TAKE-HOME MESSAGE**
The authors conclude that, for acute and subacute LBP, Manual Thrust Manipulation yields short-term decreases in self-reported disability and pain, when compared to Usual Medical Care, and Mechanical-assisted Manipulation.

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