

Evidence does not support spinal manipulation for acute lower back pain

September 21 2012, by Joan Vos Macdonald



Manipulating or "adjusting" the spine is a popular way to treat occasional or acute lower back pain and is covered by many health insurance plans, but a recent review by *The Cochrane Library* finds no evidence to suggest it is more effective than other therapy options.

According to the National Institutes of Health, lower back pain affects eight out of 10 people, and is commonly caused by injury or overuse. Spinal manipulation (SMT), a technique used by chiropractors,

osteopaths, naturopaths and some [medical doctors](#), is used to improve the range of motion of the joints in the spine.

"SMT is a worldwide, extensively practiced intervention; however, its effectiveness for acute lower back pain is not without dispute," said lead reviewer Sidney Rubinstein, senior researcher at the VU University Medical Center in Amsterdam.

The reviewers studied the results from 20 [randomized controlled trials](#) representing 2,674 participants with lower back pain of less than six weeks duration. Reviewers concluded that SMT neither reduced pain nor sped recovery faster than treatment options such as exercise, the use of NSAID [pain medications](#) or physiotherapy. Surprisingly, the review also found no evidence to suggest that SMT was more effective than therapies known to be ineffective. "This last finding would suggest more research is needed," said Dr. Rubinstein. If SMT is just as effective as accepted interventions, it should be better than ineffective therapies, such as using ultrasound or heat therapy.

"Such reviews may be confusing because they are not comparing apples to apples," said Mitchell Freedman, D.O., director of Physical Medicine and Rehabilitation at the Rothman Institute at Thomas Jefferson University Hospital in Philadelphia. "For a start, there are different kinds of manipulation, some more aggressive and some limited to stretching. Also, while [spinal manipulation](#) is not useful in all circumstances, it can be in some. You do need to look across a whole spectrum."

Another complicating factor is the nature of acute [lower back pain](#). Defined as lasting six weeks or less, it tends to go away on its own in almost 90 percent of all cases. "Studies do promote the use of manipulation in subacute to chronic pain which is different from acute pain," said Freedman.

More information: Rubinstein SM, Terwee CB, Assendelft WJJ, de Boer MR, van Tulder MW. Spinal manipulative therapy for acute low-back pain. *Cochrane Database of Systematic Reviews* 2012, Issue 9. Art. No.: CD008880. [DOI: 10.1002/14651858.CD008880.pub2](https://doi.org/10.1002/14651858.CD008880.pub2).

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