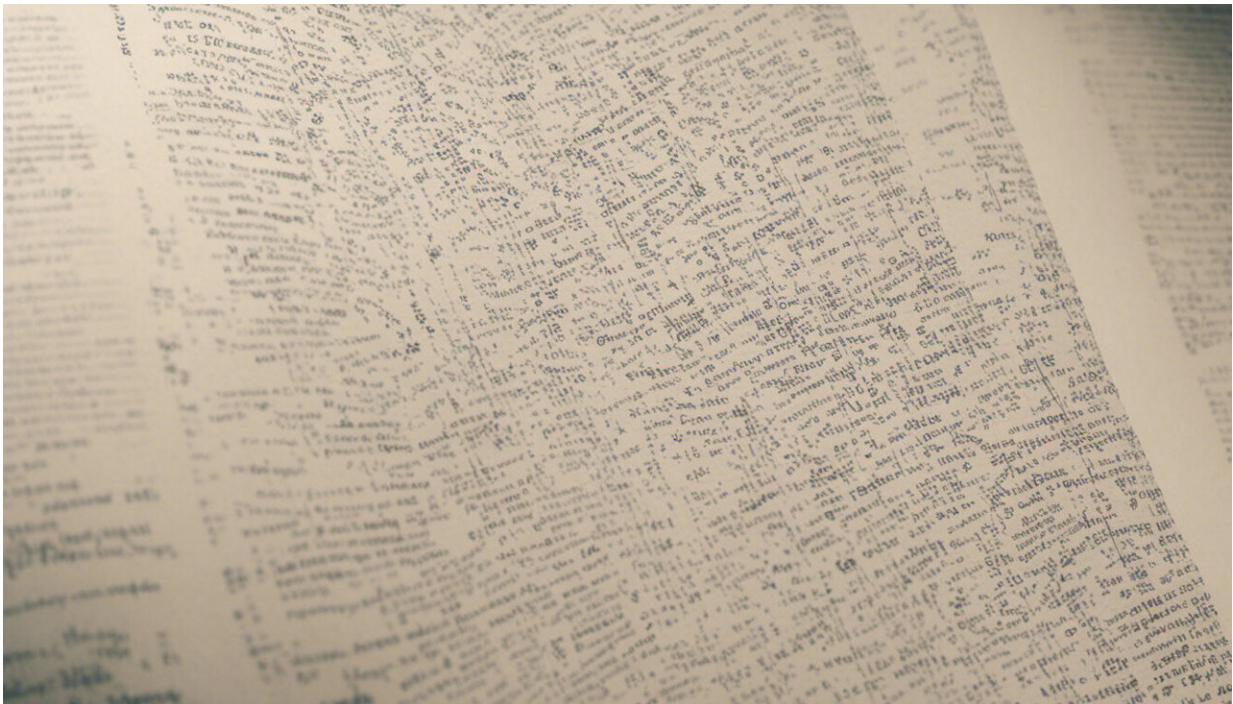


Evidence remains inconclusive for the effectiveness of manual therapy

April 1 2014



Credit: AI-generated image ([disclaimer](#))

(Medical Xpress)—A continuing lack of evidence to support the effectiveness of manual therapy continues to prevent a meaningful conclusion on manipulation and mobilisation for conditions of the spine and extremities, according to a new report from Warwick Medical School.

The report, published today in *Chiropractic & Manual Therapies*, updates the [evidence](#) given by the 2010 Bronfort UK Evidence report, and includes new data from systematic reviews, primary comparative studies and qualitative studies of both musculoskeletal and non-musculoskeletal conditions.

Manual therapies, particularly [spinal manipulation](#) and mobilisation, are commonly used treatment modalities for back pain by physical therapists, osteopaths, and chiropractors.

Back pain alone is a growing health problem with serious societal and economic consequences. In the UK, back pain affects around 29% of the population annually. Over one in ten people who reported back pain consulted with osteopaths and/or chiropractic practitioners.

It is estimated that in the USA, 80% of people will experience back problems at some point in their lifetime.

Manual therapies are being used by patients suffering not only from musculoskeletal problems like back or joint pain, but also for other conditions such as asthma or infant colic.

Drawing on a broader range of research evidence than used by Bronfort et al, and with more recent studies available, the team were able to update, revise or confirm conclusions made in that report, and introduce new categories to be considered.

There was moderate evidence in favour of using manual therapies for acute lower back pain, and in other situations including:

- Manipulation and/or mobilisation combined with exercise for neck pain, plantar fasciitis (Jogger's Heel), hip osteoarthritis and patellofemoral pain syndrome

- Combined chiropractic care for low back [pain](#)
- A combination of mobilisation and exercise for acute whiplash-associated disorder
- Manual mobilisation combined with exercise for knee osteoarthritis
- Spinal manipulative therapy for migraines

However, the evidence remains inconclusive for a range of conditions, including:

- Asthma using osteopathic manual therapy
- Paediatric nocturnal enuresis using spinal manipulation
- Infant colic using spinal manipulation
- Dysmenorrhoea using spinal manipulation
- Premenstrual syndrome using spinal manipulation
- Stage 1 hypertension using spinal manipulation added to diet
- Otitis media and pneumonia in elderly adults using osteopathic manual therapy

Dr Paul Sutcliffe, Deputy Director for Warwick Evidence, explained "We simply require a higher quality body of evidence about the effectiveness of manual therapy. The research needs to be better designed, and with a greater appreciation for the diversity of clinical conditions – particularly those non-musculoskeletal conditions. Until we have that, we are not in any position to be drawing meaningful conclusions."

Provided by University of Warwick

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