

Early PT not tied to lower health care use later on

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(HealthDay)—Early use of physical therapy (PT) for new low back pain

in older adults is not associated with less subsequent back pain-specific health care utilization, compared with patients not receiving early PT, according to a study published in the March issue of *The Spine Journal*.

Deven A. Karvelas, M.D., from Rebound Orthopedics and Neurosurgery in Vancouver, Wash., and colleagues looked at the association between initiating early PT (within 28 days of the index visit for [low back pain](#)) and subsequent back pain-specific health care utilization in [older adults](#). Data from the Back Pain Outcomes using Longitudinal Data registry were evaluated for 4,723 adults, aged 65 and older, presenting to a primary care setting with a new episode of low back pain.

The researchers found no statistically significant difference in total spine relative value units (RVUs) between the two groups (ratio of means, 1.19; 95 percent confidence interval [CI], 0.72 to 1.96; P = 0.49). For secondary outcomes related to use of all health care services, only the difference between total spine imaging RVUs and total PT RVUs was statistically significant, with the early-PT group having greater PT RVUs (ratio of means, 2.56; 95 percent CI, 2.17 to 3.03; P

"In a group of older adults presenting for a new episode of low back pain, the use of early PT is not associated with any statistically significant difference in subsequent back [pain](#)-specific [health care](#) utilization compared with patients not receiving early PT," the authors write.

More information: [Abstract](#)
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