

# Chiropractic associated with lower likelihood of tramadol prescription in adults with sciatica

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A new study led by researchers at University Hospitals Connor Whole Health has found that adults initially receiving chiropractic spinal manipulation for newly diagnosed radicular low back pain (sciatica) were significantly less likely to be prescribed tramadol over the following year compared to those receiving usual medical care.

Tramadol is a synthetic opioid that has been increasingly prescribed for [low back pain](#) in the United States (US) over the past decade. While tramadol has a lower potency compared to other [prescription opioids](#), it still carries risks of persistent use and adverse events.

"While previous studies found a reduced likelihood of opioid prescription among those receiving chiropractic care, our study is the first to focus specifically on tramadol," said Robert Trager, DC, lead author of the study.

The [retrospective cohort study](#), [published](#) in *BMJ Open*, used data from over 2,300 [patient records](#) across multiple US academic health centers. It included adults aged 18–50 with a new diagnosis of sciatica, which is characterized by radiating pain, numbness, or weakness in the leg due to a compressed nerve root.

The authors describe extensive efforts to account for differences between the chiropractic and non-chiropractic (usual medical care) cohorts. For example, the cohorts were similar with respect to age, sex, and several other factors. The researchers found that 1.3% of the chiropractic patients received a tramadol prescription over 1-year follow-up, compared to 4.0% of the patients receiving usual medical care.

"As our nation continues to grapple with the opioid crisis, this study reinforces the value of offering patients evidence-based non-pharmacological alternatives for [pain management](#)," said Dr. Françoise Adan, Chief Whole Health and Well-being Officer and Director of UH Connor Whole Health.

Co-author and Resident Physician at Duke University Hospital Roshini Srinivasan, MD, shared that "this work is particularly encouraging to clinicians as we continue to seek safe, effective therapies for conditions that can be complicated to manage, such as chronic low back pain and

sciatica."

The researchers caution that the retrospective design has limitations and call for further research to confirm their findings. In addition, they question whether the findings might be explained by a general effect of visiting a non-pharmacologic clinician, such as a chiropractor, physical therapist, or acupuncturist.

**More information:** Robert James Trager et al, Chiropractic spinal manipulation and likelihood of tramadol prescription in adults with radicular low back pain: a retrospective cohort study using US data, *BMJ Open* (2024). [DOI: 10.1136/bmjopen-2023-078105](https://doi.org/10.1136/bmjopen-2023-078105)

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