

Little evidence for prediction rules for low back pain

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(HealthDay)—Few randomized clinical trials have been done to assess clinical prediction rules for patients with lower back pain, and the trials that have been done are of low quality and do not provide sufficient evidence to support their use, according to a review published in the April 20 issue of *Spine*.

Shilpa Patel, M.B.B.S., from the University of Warwick in the United Kingdom, and colleagues identified and reviewed three published randomized clinical trials, which evaluated clinical prediction rules, developed to determine which patients with non-specific low back [pain](#)

would respond best to specific treatments.

The researchers found that the studies had only 123 to 239 patients, too small to adequately validate a clinical prediction rule. Based on the available data, the use of clinical prediction rules for the management of non-specific low back pain could not be supported.

"There is a lack of good quality randomized controlled trials validating the effects of a clinical prediction rule for [low back pain](#)," Patel and colleagues conclude. "Furthermore, there is no agreement on appropriate methodology for the validation and impact analysis. The evidence for, and development of, the existing prediction rules is generally weak."

Several authors disclosed relevant financial activities.

More information: [Abstract](#)
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