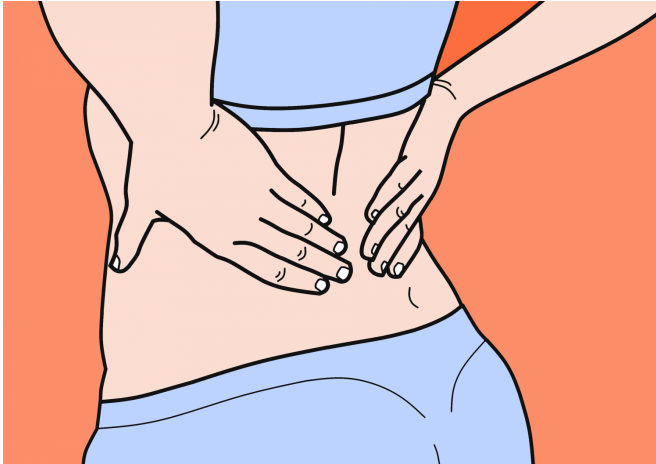


Early physical therapy benefits low-back pain patients

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Patients with low-back pain are better off seeing a physical therapist first, according to a study of 150,000 insurance claims.

The study, published in *Health Services Research*, found that those who saw a physical therapist at the first point of care had an 89 percent lower probability of receiving an opioid prescription, a 28 percent lower probability of having advanced imaging services, and a 15 percent lower probability of an emergency department visit—but a 19 percent higher probability of hospitalization.

The authors noted that a higher [probability](#) of hospitalization is not necessarily a bad outcome if [physical therapists](#) are appropriately referring patients to specialized care when low back pain does not resolve by addressing potential musculoskeletal causes first.

These patients also had significantly lower out-of-pocket costs.

"Given our findings in light of the national opioid

crisis, state policymakers, insurers, and providers may want to review current policies and reduce barriers to early and frequent access to physical therapists as well as to educate patients about the potential benefits of seeing a physical therapist first," said lead author Dr. Bianca Frogner, associate professor of family medicine and director of the University of Washington Center for Health Workforce Studies.

Frogner said individuals in all 50 states have the right to seek some level of care from a physical therapist without seeking a physician referral, however, many do not take advantage of this option. She said this may be because some insurance companies have further requirements for payment.

About 80 percent of adults experience back pain at some point during their lifetime, according to the National Institutes of Health.

Currently, patients with [low-back pain](#) are given painkillers, x rays and, in some cases, told to rest, said Frogner. She said seeing a physical therapist first and given exercise is a more evidence-based approach.

Using an insurance claims dataset provided by the Health Care Cost Institute, the researchers reviewed five years of data of [patients](#) newly diagnosed with low back [pain](#) who had received no treatment in the past six months. The claims were based in six states: Washington, Wyoming, Alaska, Montana, Idaho and Oregon.

The research involved the UW School of Medicine in Seattle and The George Washington University in Washington, D.C.

"This study shows the importance of interprofessional collaboration when studying complex problems such as [low-back pain](#). We found important relationships among physical

therapy intervention, utilization, and cost of services and the effect on opioid prescriptions," said Dr. Ken Harwood, lead investigator for The George Washington University.

More information: *Health Services Research*,
[dx.doi.org/10.1111/1475-6773.12984](https://doi.org/10.1111/1475-6773.12984)

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