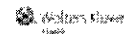




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Adding chiropractic manipulative therapy to standard medical care for patients with acute low back pain: the results of a pragmatic randomized comparative effectiveness study.

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Abstract

ABSTRACT: Study Design: Randomized controlled trial. Objective: To assess changes in pain levels and physical functioning in response to standard medical care (SMC) vs. SMC plus chiropractic manipulative therapy (CMT) for the treatment of low back pain among 18 to 35-year-old active duty military personnel. Summary of Background Data: Low back pain is common, costly and a significant cause of long-term sick leave and work loss. Many different interventions are available, but there exists no consensus on the best approach. One intervention often used is manipulative therapy. Current evidence from randomized controlled trials demonstrates that manipulative therapy may be as effective as other conservative treatments for LBP, but its appropriate role in the health care delivery system has not been established. Methods: Prospective, 2-arm RCT pilot study comparing SMC plus CMT to SMC alone. The primary outcome measures were changes in back-related pain on the Numerical Rating Scale (NRS) and physical functioning at 4 weeks on the Roland Morris Disability Questionnaire (RMQ) and Back Pain Functional Scale (BPFS). Results: Mean RMQ scores decreased in both groups over the course of the study, but adjusted mean scores were significantly better in the SMC plus CMT group than in the SMC group at both week 2 ($p < 0.001$) and week 4 ($p = 0.004$). Mean NRS was also significantly better in the group that received CMT. Adjusted mean BPFS scores were significantly higher (improved) in the SMC plus CMT group than in the SMC group at both week 2 ($p < 0.001$) and week 4 ($p = 0.004$). Conclusion: The results of this trial suggest that CMT in conjunction with standard medical care offers a significant advantage for decreasing pain and improving physical functioning when compared to standard care alone, for men and women between the ages of 18-35 with acute low back pain.

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