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Title of Abstract A randomised controlled trial on the effectiveness of osteopathic manipulative treatment of chronic low back pain

Text of ABSTRACT

Introduction

Chronic Low Back Pain (CLBP) is a very common complaint in the general population and it is often managed by physicians by conservative means. Osteopathic manipulative treatment (OMT) has been recently been demonstrated to be an effective method to reduce pain in patients suffering with CLBP. The objective of this study was to compare the effects of OMT with sham manipulative treatment (SMT) on patient's self reported pain and disability.

Design

This was a randomized controlled investigation

Methods

For this study ninety-four patients were recruited from the Orthopedic Department, Bassini Hospital (Italy) in the period between September 2006 and March 2008. Patients were randomly assigned to either usual care plus OMT (n = 44) or usual care plus SMT (n = 50). The main outcome variables were the Oswestry Disability Index and a 10-cm visual analog scale (VAS) for overall back pain. Data were analyzed using a two-factor ANOVA for repeated measures with an α level set at 0.05.

Results

Overall, OMT significantly decreased pain and disability compared to SMT on this study. The change in VAS was -2.8 ± 1.4 for OMT and 0 ± 0.9 for SMT. The change in Oswestry Disability Index -8.4 ± 8.5 for OMT and 0.3 ± 7.2). There was a significant interaction (group x time) for both visual analog scale ($p < 0.01$) and for Oswestry Disability Index ($p < 0.01$). No adverse events were recorded during the study.

Discussion

Similarly to previous investigation in this area (Licciardone *et al* 2005) OMT appears to provide benefits over and above usual care for the treatment of CLBP. The improvement in the OMT compared to the SMT demonstrated that placebo effects such as interaction with patients and range of motion activities do not justify per se the results of this study. Future studies should aim to use less

subjective outcome measures and focus on the mechanism through which OMT is able to reduce pain and disability in CLBP patients.

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