

Spinal manipulation for back pain

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The experts have raised serious apprehensions on the efficacy of these practices and propose detailed research to investigate the reliability of spinal manipulation for the treatment of low back pain. Random clinical trials are conducted of the samples who receive the spinal manipulation therapy and the effectiveness is often measured using a patient-based primary assessment system that includes patient-rated intensities in pain, the extent of disability, overall improvement experienced time taken for recovery. Spinal manipulation therapy is often said to have responded differently to the different levels of back pains. In the case of patients reported with acute back pain, a moderate level of evidence is available for the short-term relief of pain being achieved using spinal manipulation therapy. The reports available also highlight that in the case of patients suffering from chronic back pain, the moderate evidence is available in favor of spinal manipulation therapy both in the long term and short term.

Current research status

Extensive research has been undertaken to assess the impact of spinal manipulation on back pain. In one such study, the patients having hip pain and those recommended for extensive physiotherapy sessions were selected for the detailed review process (Flynn et al, 2002). This was undertaken to assess their response level to the spinal manipulation procedure and the recovery rate using this method of treatment. The spinal manipulation program was carried out by experienced chiropractors or physiotherapists on the patients recommended after the clinical examination. The process of spinal manipulation concentrates on the musculoskeletal structures and functions of the body, particularly of the spinal column and the nervous system, towards the restoration and maintenance of health. The entire spinal

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manipulation program in this study was undertaken in three sessions and the percentage change in the disability scores was recorded. This has helped to estimate the percentage success rate of the program. The five important variables considered in the clinical procedure were symptom duration, fear-avoidance beliefs, lumbar hypomobility, hip internal rotation range of motion, and no symptoms distal to the knee. The persons who had exhibited 4 or 5 variables, improved their chance of recovery under spinal manipulation from 45 % to 95 %. showed 45- 95 % (Flynn, et al, 2002). Another research exercise was conducted by Childs et al (2004) with the objective to evaluate the potential of spinal manipulation in the treatment of patients with low back pain. The sample selected for the experiment was from a pool of patients undergoing regular physiotherapy sessions and those not having any nervous related disorders. The observations were made at the end of 1 week, 4 weeks and 6 months on a set of patients who received only physiotherapy sessions with those having undergone 2 sessions of spinal manipulation and back exercises along with physiotherapy. The researchers observed that the patients who had received spinal manipulation and back exercises showed remarkable improvement in comparison with those who received physiotherapy sessions alone. Though the study proposes a convenient way for the doctors to assess the effect of spinal manipulation on the patients with low back pain it lacks the flexibility to check the feasibility of application by the doctors at their place of work.