

OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Michiel Rorick

New Study Shows Chiropractic More Effective Than Medical Care for Chronic Low-Back Pain

An exciting new report concludes that chiropractic care is more effective than medical management for a common condition: chronic low-back pain. Dr. Rorick has outlined these scientific findings in lay-person terms, so that patients can learn about this groundbreaking study.

How Can I Find Out More About Chiropractic Wellness Research?

If you are interested in research documenting the benefits of chiropractic, you have come to the right place! Dr. Rorick is committed to providing patients with the latest cutting-edge research in chiropractic wellness and related fields, such as nutrition, stress-reduction, environmental influences on health, exercise and how one's attitude affects well-being.

To this end, each week Dr. Rorick presents a new, hot-off-the-presses *Optimal Health University*® topic. This office is focused on teaching our patients and community about this vital health information, which will jump-start them on the road to wellness. To find out more about this revolutionary approach to patient education, or to suggest future *Optimal Health University*® topics, please call our office today!

Dr. Rorick focuses on correcting a spinal condition called **vertebral subluxation** — a disorder characterized by restricted spinal movement or the misalignment of spinal bones (vertebrae). Dr. Rorick corrects vertebral subluxations with gentle and effective maneuvers called **chiropractic adjustments**. And chiropractic adjustments have been shown to be more effective than other methods for alleviating chronic low-back pain.

What Is Chronic Low-Back Pain?

Chronic low-back pain (CLBP) is a condition in which low-back pain persists long-term. In the new study, CLBP was defined as pain lasting more than 12 weeks. Often, medical

treatment fails to eradicate CLBP. Symptoms of CLBP may wax and wane, but they endure.

Where Was the Study Published?

The study was published in the *Journal of Alternative and Complementary Medicine*. This highly respected publication is peer-reviewed — meaning that papers published in it are required to meet exacting criteria and undergo a stringent review process by an international board of experts.

Who Conducted the Study?

Adam Wilkey, D.C., a chiropractor in private practice in Oldham, United Kingdom, and Michael Gregory,

M.B., Ch.B., FRCA, a researcher at the Royal Oldham Hospital. Additional co-authors include David Byfield, D.C., M.Phil, and Peter W. McCarthy, Ph.D., both of the Welsh Institute of Chiropractic, University of Glamorgan, in Wales.

Why Was This Study Called For?

Chiropractors, like Dr. Rorick, support ongoing efforts to expand scientific investigation of the benefits of chiropractic.

The new study's authors chose to conduct this analysis because there is a need for additional studies comparing chiropractic care to medical care for patients with CLBP.

What Previous Research Has Been Conducted on This Topic?

A wealth of research supports the use of chiropractic for back pain; however, most of this research addresses patients with acute injury, rather than CLBP. In an editorial accompanying the new study, Daniel Redwood, D.C. of Cleveland Chiropractic College points out that “the first wave (1975-2005) of research on chiropractic treatment of low-back pain dealt with acute cases and focused on comparing spinal manipulation to a comparison treatment or placebo.”



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“A strong majority of these studies (there are now over 40 randomized controlled trials of spinal manipulation for low-back pain) found that manual manipulation outperformed competing options; in no study did a comparison treatment or placebo outperform manipulation.”

“Moreover, not a single participant in any of the trials experienced a major negative reaction to chiropractic care. The evidence supporting spinal manipulation for acute low-back pain is broad and deep, leading government consensus panels in the United States, Canada, Great Britain, Sweden, Denmark, Australia, and New Zealand to recommend spinal manipulation in their low-back pain guidelines, as did recent guidelines jointly developed by the American College of Physicians and the American Pain Society.”

Dr. Redwood goes on to emphasize that we are now entering a second wave of chiropractic research, one that analyzes the differences between acute and chronic pain. The new study is part of that new wave.

Where Did the Study Take Place?

The trial was performed at a National Health Service (NHS) hospital outpatient clinic (pain clinic) in the United Kingdom.

Who Took Part in the Investigation?

The study included 30 patients who had suffered low-back pain for more than 12 weeks. They were all between the ages of 18 and 65.

The researchers randomly assigned study participants to either medical treatment or chiropractic care.

Both groups began the study with the same levels of pain. However, the chiropractic group was on average a decade older and had suffered from CLBP for an average of three years longer.

What Type of Care Did the Patients Receive?

The patients received their randomly assigned type of care — and only that one type — for eight weeks.

Patients in the medical treatment group underwent standard treatment protocols established within the pain clinic. This included oral and injected medications and transcutaneous electrical nerve stimulation (TENS).

Patients assigned to chiropractic care received standard chiropractic adjustments performed to alleviate vertebral subluxations.



What Measures Were Used to Determine Results?

Before all patients began a treatment protocol, they completed questionnaires widely accepted by the medical and chiropractic professions (as well as by other professions) for evaluation of back pain, called the Roland-Morris Disability Questionnaire (RMDQ) and Numerical Rating Scale (NRS). Scientific studies have also proven these questionnaires valid.

The patients completed the same evaluations at intervals throughout the study, and at the end of their eight-week treatment.

What Were the Findings?

Findings demonstrated that the chiropractic patients enjoyed significant improvement over the medical pa-

tients, for both reduction in disability as well as reduction in pain intensity. Considering the chiropractic patients were older and had suffered their condition longer, these findings are even more momentous.

What Will Be the Impact?

Dr. Redwood explains that “chiropractors currently confront an ingrained mindset on the part of many insurers and medical physicians who demand that courses of chiropractic care be limited in duration, recognizing little or no difference between acute and chronic cases. Doctors and insurers who would never consider limiting chronic pain patients to a 6-week course of prescription anti-inflammatory or analgesic medication in many cases do not hesitate to place such limits on chiropractic management of chronic back pain.”

Dr. Redwood urges that these new findings change these attitudes, and promote chiropractic as the most effective means of caring for patients with CLBP.

Where Can I Access the Study?

The study, *A Comparison Between Chiropractic Management and Pain Clinic Management for Chronic Low-Back Pain in a National Health Service Outpatient Clinic*, appears in the June 2008 issue of the *Journal of Complementary and Alternative Medicine*, volume 14, pages 465-473. It may be viewed on the journal’s Web site (www.liebertonline.com/loi/acm).

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