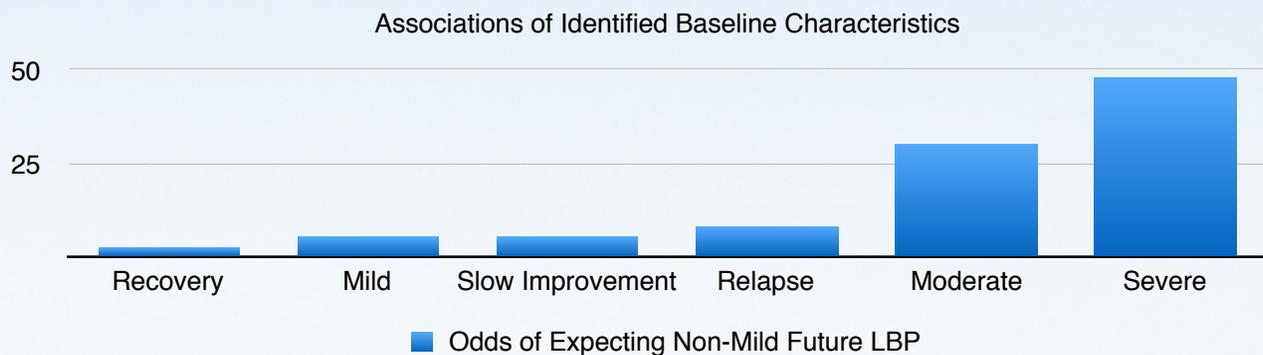




Patients with low back pain had distinct clinical course patterns that were typically neither complete recovery nor constant pain. A latent class analysis of longitudinal data

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In practice, each of us see patients that require repeat consultations and treatments for spine-related complaints. While this may, at first, give the impression that the initial treatment was in-effective; new research exploring the typical clinical course patterns may show the exacerbation to be part of a natural case history.

The chart above illustrates that patients with more severe initial pain patterns are far more likely to expect future episodes of low back pain. This information further emphasizes that we must focus not only on the best evidence-based treatment option for the patient's current episode; but that ongoing periodic care may be necessary for the evaluation, detection, and treatment of future episodes.

This research fits well with a piece published by *SPINE* (August 2011) that found "spinal manipulative therapy is effective for the treatment of chronic nonspecific LBP. To obtain long-term benefit, this study suggests maintenance SM after the initial intensive manipulative therapy."

"However, most models identified a subgroup characterized by slow improvement, i.e., a gradual reduction in LBP severity and days that occurred over approximately 6 months."

"In conclusion, the clinical course of LBP is complex. Over a 1-year follow-up period, most patients did not become pain-free for a sustained period, but at the other end of the spectrum, only a small proportion reported persistent severe pain."

"The current implication for clinicians and researchers is to be aware that most LBP does not simply go away."

We believe in creating a healthier community. We believe patients have better outcomes when physicians work together. Let's build a healthier tomorrow.

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