



<b>Title</b>	<b>Back and Neck Pain</b>
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<b>Reference</b>	SBU report No.145, ISBN 91-87890-60-7, 91-87890-65-8 (in Swedish)

*This is an 800-page report on the epidemiology, diagnosis, and treatment of back and neck pain. Also covered in the report are the economic, social, and psychosocial aspects of back pain. An international working group of 13 researchers in the fields of medicine, epidemiology, psychology, and economics did a systematic review of the findings from clinical research of different options to treat back pain. Report took 4 years to complete. English summary of the report is available at [www.sbu.se](http://www.sbu.se)*

Altogether 25 000 studies were identified of which 2000 were finally referenced in this report. The evidence was graded as strong (A), moderate (B), limited (C), or no evidence (D).

The scientific basis for more than 30 different treatments was systematically reviewed.

For the majority of these there are either no evidence or limited evidence in favor of treatment. For some modalities there is strong or moderate evidence against their effectiveness, eg, by traction, aerobics, stretching, and bed rest. For a minority of treatments there is strong evidence of effectiveness, eg, for anti-inflammatory and muscle relaxant drugs, manual treatment, manipulation, exercise, multidisciplinary treatment, spa treatment, and continuation of normal activities.

For diagnosing: Systematic anamnesis and physical examination are good foundations for correct diagnosis (B). Radiographic studies are of limited value.

For acute low back pain: Normal activities result in faster recovery and fewer chronic functional disorders (A), anti-inflammatory and muscle relaxant drugs offer effective pain relief (A), while bed-rest is not effective (A).

For chronic back pain: Manual treatment/manipulation, back training, and multidisciplinary treatment effectively relieve pain (A). Intensive treatment at a health resort reduces pain in the short term for elderly patients (>60 years of age) with chronic low back problems (A).

Surgery: For herniated discs, effective (A). For surgical fusion, no evidence (D).

For neck pain, the evidence is sparse. The only firm evidence is that acupuncture is not effective (A). Psychological and social factors may have a strong influence on back and neck pain.

**SBU conclusions** include:

- Back and neck pain is common. Healing is promoted by staying active, returning to work, and exercising at an appropriate intensity.
- A thorough anamnesis and physical examination is important for relieving anxiety about the consequences of pain and sufficient for identifying those who should be referred to a specialist.
- For most patients with back pain, the interventions that can be offered in primary care are the only ones needed.
- Back pain and its consequences are not isolated physical problems but are associated with other conditions such as social, psychological, and workplace-related factors.
- Knowledge on how to prevent back pain has been applied and assessed to a surprisingly minor degree.
- There is little scientific evidence on the effectiveness of most treatments.

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