



Title Costs and Outcomes of Chiropractic Treatment for Low Back Pain

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Aim

To review the clinical and economic implications of chiropractic care in treating lower back pain (LBP).

Conclusions and results

Eighteen review articles and 4 trials published later were identified. Relative costs were examined from 10 economic studies.

Chiropractic care for LBP is similar in effectiveness to standard medical care and physical therapy. Studies showed that the 3 treatment methods had similar effects on pain relief and functional improvement. No clear cost advantage was found for any of the 3 methods studied. One of the economic studies compared chiropractic care with physical therapy and found costs to be similar. Cost results varied among the studies comparing chiropractic care with standard medical care. Chiropractic care was similar to physical therapy and as effective as, or better than, standard medical care for improving time lost from work.

Recommendations

Not applicable.

Methods

Review articles were searched using a predefined strategy. An economic filter was applied for the search of economic studies. Two reviewers independently selected clinical studies for inclusion if they reported on adult populations with chronic or acute LBP who were receiving chiropractic intervention and were compared to adults receiving standard nonsurgical care. Data were abstracted and study quality was evaluated using the Oxman and Guyatt Scale for quality assessment of the systematic reviews, the Jadad scale for RCTs, and the Newcastle-Ottawa Quality Assessment Scale for non-RCTs. Clinical outcomes included pain level or functional status. The primary outcome for economic studies was an incremental measure of the implication of moving from the comparator to the intervention.

Results from the studies were summarized, and a qualitative comparison was undertaken.

Further research/reviews required

A well-designed Canadian study that compares the cost effectiveness of LBP care provided by chiropractors, physical therapists, and primary care physicians would be of benefit.