Chronic Low Back Pain

Patient name_____ Date_____

Chronic Low Back Pain | (pain lasting months or years with no specific underlying diagnosis, and no significant comorbidities or physical limitations.)

For patients with chronic low back pain, clinicians and patients should initially select nonpharmacological treatments with:

NON-DRUG TREATMENT

- ❑ **Exercise –** exercise therapy provides clinically meaningful reductions in pain and modest improvements in function compared to no treatment, usual care or placebo. Group based activity that includes both stretching and strengthening components may be most effective.
- ❑ **Multidisciplinary rehabilitation –** activities that involve professionals from various disciplines. Disabling chronic low back pain is regarded as the result of interrelating physical, psychological and educational components, and social or occupational factors requiring multidisciplinary interventions. These rehabilitation programs yield moderate improvements in pain and small improvements in function compared to usual care.
- ❑ **Acupuncture –** a system of alternative medicine that involves pricking the skin or tissues with needles, used to alleviate pain and to treat various physical, mental, and emotional conditions. Acupuncture is supported by moderate evidence for small to moderate reductions in pain and improvements in function compared to no treatment or usual care.
- ❑ **The following activities are effective when practiced 2-5 times per week for 10-24 weeks with moderate effects on pain and small effects on function compared to usual care:**
  1. **Tai Chi –** an ancient Chinese tradition involving a series of movements performed in a slow, focused manner and accompanied by deep breathing.
  2. **Yoga –** a practice that includes breath control, simple meditation, and the adoption of specific body postures. It is widely practiced for health and relaxation.
- ❑ **Cognitive behavioral therapy –** a type of psychotherapy in which negative patterns of thought about the self and the world are challenged to alter unwanted behavior patterns or treat mood disorders such as depression. Cognitive-based therapies and mindfulness can result in reductions in pain intensity and disability.
- ❑ **Spinal manipulation –** technique that treats back pain, neck pain and other musculoskeletal conditions via the application of force to the spinal joints. Treatment of dysfunctional areas in the spine is intended to restore the spine's structural integrity, reduce pain and initiate the body's natural healing processes. The evidence for spinal manipulation is mixed, despite being widely used. Data has shown small improvements in pain and function compared to recommended intervention guidelines but no clear superiority over other active treatments.

(More chronic low back pain options next page)

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Pharmacologic therapy should be considered for patients with chronic low back pain who do not improve with nonpharmacological interventions.

DRUG THERAPY (if indicated)

- ❑ **NSAIDS (Motrin, Advil, Aleve etc.) –** some evidence (moderate quality evidence) shows that NSAIDs were associated with a small to moderate improvement in pain intensity compared to placebo and small to no effect on function. NSAIDs should be the first option considered.
- ❑ **Tramadol –** Tramadol (a narcotic) has a moderate effect on pain control and small effect on function.
- ❑ **Duloxetine (Cymbalta) –** Duloxetine has a small effect on pain control and function.
- ❑ **Opioids (hydrocodone/morphine) –** this should be the last treatment option considered in patients for whom other therapies have failed. Opioids had a small effect on short-term pain and function. Opioids are associated with substantial harm including but not limited to addiction, abuse, overdose and many other side-effects.
- ❑ **Other agents –** including acetaminophen, muscle relaxants, benzodiazepines, and corticosteroids are NOT supported by evidence for low back pain relief and are not recommended for routine use.

FOLLOW UP

If you are not improved in _____ days, if new symptoms occur or if you have concerns, please call the office at _____ or return to the office for a re-check.

Additional Instructions:

_____

_____

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This health alert is courtesy of:

THE PHYSICIAN ALLIANCE

These items are provided solely for informational purposes and are not intended as a substitute for consultation with a medical professional. Patients with any specific questions about the items on this list or their individual health should consult their physician. 2025