

Duke University Releases Headache Evidence Report

SUBSTANTIAL EVIDENCE SHOWS EFFICACY OF CHIROPRACTIC FOR TENSION AND CERVICOGENIC HEADACHES

Editorial Staff

Report from the FCER

DES MOINES, Iowa-In 1996, the Agency for Health Care Policy and Research (AHCPR) was scheduled to produce a set of clinical practice guidelines on available treatment alternatives for headache in much the same way the agency had previously done with its historic clinical guidelines, *Acute Low Back Problems in Adults*, released late in December 1994.

This headache project was based on the systematic evaluation of the literature by a multidisciplinary panel of experts. Due to largely political circumstances, however, their efforts never came to fruition. The work was never released as guidelines, but was instead transformed with modifications and budget cuts into a set of evidence reports on only migraine headache by the staff at the Center for Clinical Health Policy Research at Duke University.

The Foundation for Chiropractic Education and Research (FCER) is proud to announce that with its efforts and funding from the National Chiropractic Mutual Insurance Company (NCMIC), evidence reports have now been updated on both cervicogenic and tension-type headaches. This new report, *Evidence Report: Behavioral and Physical Treatments for Tension-type and Cervicogenic Headache*, is now available to you exclusively from FCER. It essentially updates and releases much of the information on treatment alternatives for tension and cervicogenic headache that had been suppressed earlier. For documenting both the quality and strength of research findings pertaining to chiropractic and headache, this report represents an invaluable addition to both your library and clinical practice. It does so from the point of view of an impartial government agency-the objectivity and credibility of which would be expected to have the greatest public impact.

Among the many treatment alternatives supported by evidence, chiropractic is buoyed by substantial evidence in this report as to its efficacy in the management of both tension-type and cervicogenic headaches:

- Compared to amitriptyline use, chiropractic is shown to produce slightly lesser effects during the treatment period, but markedly superior results afterward in the treatment of tension-type headache.
- Compared to various soft tissue procedures, a course of manipulation treatments (diversified and/or toggle-recoil techniques, depending on the level of the palpated segmental dysfunction) is shown to produce sustained improvement in headache frequency and severity in the treatment of cervicogenic headache.
- Compared to various soft tissue procedures, there was no evidence to indicate that a course

of manipulation treatments (diversified and/or toggle-recoil techniques, depending on the level of the palpated segmental dysfunction) produced further improvement in headache frequency and severity in the treatment of episodic tension-type headache.

This particular study's findings have important implications in choosing alternatives in contact procedures in managing different types of headache patients.

This new undertaking mandated the staff at the Duke Center to screen citations from the literature, abstract the data into evidence tables, analyze the quality and magnitude of results from these studies, and draft an evidence report with peer review from a panel of 25 reviewers, including researchers and clinicians in chiropractic.

Starting with over 2,500 citations from such sources as MEDLINE, MANTIS, CRAC, CINAHL, PsychoINFO, the Cochrane Controlled Trials Register, and additional articles obtained by referral, the panel obtained bibliographies of both physical and behavioral options for treating headache that were prospective, controlled trials aimed at either relief from or prevention of attacks of tension-type or cervicogenic headache. Among the physical interventions reviewed in this report:

- acupuncture
- cervical spinal manipulation
- low-force techniques such as cranial sacral therapy, massage (including trigger point releases)
- mobilization
- stretching
- heat therapy
- ultrasound
- transcutaneous electrical nerve stimulation (TENS)
- exercise (including postural exercises)

Among the behavioral interventions reviewed are:

- relaxation
- biofeedback
- cognitive-behavioral (stress management) therapy
- hypnosis

Even though further research is desirable-and mandatory-this report clearly positions chiropractic as a viable treatment alternative that lacks the detrimental and sometimes fatal side effects of conventional treatment options for managing tension and cervicogenic headache patients. Compared to other physical treatment methods (including physiotherapy, acupuncture, and electrical stimulation), the evidence supporting chiropractic appears to be more robust. Consequently, this report is an invaluable resource for documenting chiropractic practice to practitioners in other health care professions, the public, and third-party payers.

Evidence Report: Behavioral and Physical Treatments for Tension-type and Cervicogenic Headache is available exclusively from FCER. To order your copy, please call 800-622-6309. *Evidence Report* is available for \$39 for non-FCER members, \$35 for current members (plus shipping and handling). The Executive Summary of this report is available www.fcer.org.

Note: Since 1944, the Foundation for Chiropractic Education and Research has endeavored to fund and support scientifically sound research to evaluate chiropractic health care. To protect the integrity of the research that it funds, FCER maintains a 501 c (3) status as an independent

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