## Dynamic Chiropractic

BACK PAIN

## Consumer Reports Survey Rates DCs Higher Than MDs

BUT CAUTION REGARDING CHIROPRACTIC CARE STILL URGED.

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A recent Consumer Reports survey of its readers found that "hands-on" therapies, led by chiropractic care, were the top-rated treatments for people suffering from back pain. The massive survey also found that chiropractors were given the highest "satisfaction with care" ratings, well above those given to medical doctors who administered various forms of care to back pain sufferers.

The survey, which included 14,000 *Consumer Reports* subscribers and was reported in the publication's May 2009 issue, found that more than half of the respondents had "pain (that) severely limited their daily routine for a week or longer, and 88 percent said it recurred throughout the year." The report stated that while many go to a primary care physician first for diagnosis and treatment, the majority were disappointed with the results.

On the other hand, 59 percent reported that they were "highly satisfied" with the care they received from chiropractors. The next highest rated practitioners were physical therapists (55 percent) and acupuncturists (53 percent), followed by "specialized" physicians (44 percent) and primary care physicians (34 percent).



Respondents were also asked to rate the types of treatments they received. Again, chiropractic/spinal manipulation got top honors, with 58 percent rating it as "helping a lot." Spinal injections were next highest, rated at 51 percent, followed by massage (48 percent) and physical therapy (46 percent). Other highly rated treatments included prescription medications (45 percent), yoga (44 percent), movement therapy and acupuncture (both 41 percent).

In a sidebar article to the main story, Dr. Orly Avitzur, a board-certified neurologist and medical advisor to Consumers' Union, said that half of the survey respondents who reported they had been given a prescription drug for pain-relief were treated with opioids, including Vicodin. This, she said, was "despite the fact that there is very little research to support the use of opioids for acute low back pain." She further said that the use of these drugs results in adverse effects for about half of the people who take them. However, their use is increasing thanks to "pharmaceutical-industry

marketing and promotion of drugs."

Dr. Avitzur also stated that the survey showed "hands-on" therapies, which include chiropractic care, are "very successful and I almost always prescribe them."

Historically, *Consumer Reports* has not been seen as friendly to the profession. However, in 2005, the publication produced a more favorable report, again using a reader survey as a springboard to describe respondents' use and opinion of conventional and alternative medicine. According to a *Dynamic Chiropractic* article on that report, "Chiropractic ranked first out of 11 treatments, including massage, acupuncture, and exercise, in its ability to treat back pain. More readers said that chiropractic 'helped me feel much better' than any of the other therapies." Prescription drugs and over-the-counter drugs ranked eighth and 10th, respectively. The 2005 *DC* article also stated that the *Consumer Reports*' editors called manipulation of the neck risky and said that evidence relating to the effectiveness of chiropractic treatment was mixed.

Somewhat similar "cautions" were included in the 2009 report, and they were not confined to chiropractic. Many of the details are available only to *Consumer Reports* subscribers, but the publication agreed to give *DC* access to them. (See our annotated version of the findings included with this article.)

In a section on "Treatment Ratings for Lower-Back Pain," *Consumer Reports* included a brief discussion of medical evidence for each treatment type. In addition, the editors also assigned their own recommendations and cautions. These recommendations were based on reader reports and the medical evidence examined. As part of this section, the editors stipulated that any treatment receiving more than a 39 percent rating of "helping a lot" (chiropractic received the top rating of 58 percent) "probably reflected real patient benefits, compared with a placebo effect."

That said, the medical evidence reported by the publication included this statement on chiropractic care: "May be more effective in the short-term (less than six weeks) at reducing pain vs. sham (fake) therapy, but no more effective at improving disability. For chronic back pain (lasting more than 12 weeks), spinal manipulation did not appear to be better than general practitioner care, medication, physical therapy, or exercises at improving pain or disability, but the data are not conclusive."

As part of their recommendations and cautions section, the publication's editors stated this about chiropractic: "Both our survey respondents and the published clinical evidence suggest that spinal manipulation can be helpful for lower-back pain in the short-term." However, the editors then cautioned that "some experts think that this treatment could make a herniated disk worse."

On the other hand, the publication was even more cautious about prescription medications, which are typically a primary course of treatment prescribed by medical doctors: "Although 45 percent of the respondents who tried prescription medications said that they were helpful, our experts recommend that these drugs be used with caution and for a short duration with counsel from your doctor. The evidence suggests that while many of these drugs can decrease pain, they can also have significant side effects."

A public version of the report can be found on the *Consumer Reports Web site*.

## **Drug-Based Therapies**

A majority of Consumer Reports survey respondents reported using drugs, both prescription and over-the-counter, to treat their back pain.

Treatment	Said it "helped at lot"	Recommendation
Chiropractic	58%	Helpful for lower-back pain in the short-term. Some experts think that this treatment could make a herniated disk worse.
Spinal or joint/ligament injections	51%	Over half found them to be helpful, but not enough clinical research to say injections are beneficial.
Massage Therapy	48%	Research inconclusive, considered safe. Recommended because could be helpful for those with nonspecific lower-back pain lasting four weeks or more.
Physical Therapy	46%	Recommend that patients consider the helpfulness of individual treatment components.
Prescription medications	45%	Used with caution and for a short duration under doctor's care. Significan side effects possible.
Acupuncture/ acupressure	41%	To little research. For chronic lower-back pain, may be more effective for pain relief than no treatment.
Electrotherapy/ TENS	34%	There is not enough research to say if electrotherapy/TENS is beneficial for lower-back pain.
Special chair	32%	Not found helpful by respondents.
Special pillow or mattress	30%	Neither the evidence nor survey respondents found this to be especially helpful.
Ice pack or other cold- therapy product	27%	Neither the evidence nor survey respondents found this to be especially helpful for acute back pain.
Back belt or brace	26%	Neither the evidence nor survey respondents found this to be especially helpful.
Shoe-related product	24%	Neither the evidence nor survey respondents found this to be especially helpful.
Heat-therapy product	23%	May be worth a try for acute lower-back pain since it is not likely to cause side effects.
Over-the-Counter Medication	22%	Some evidence that acetaminophen (Tylenol and generic) are moderately effective for acute lower-back pain.
Ointment	15%	Comparatively few survey respondents found this treatment helpful.
Dietary supplements/herbal	11%	Neither the evidence nor our survey respondents found this treatment to be especially helpful.

Source material courtesy of Consumer Reports.

Complete results, including full details are available to subscribers.

Note: all percentages are of those who were given prescription medicine, not the entire survey population.

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