

Classification-based therapy no better for back pain

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Treatment of patients with lower back pain using a classification-based physical therapy approach shows no statistically significant superiority to treatment with usual physical therapy care, according to a study published online Feb. 13 in *Spine*.

(HealthDay) -- Treatment of patients with lower back pain (LBP) using a classification-based physical therapy approach shows no statistically significant superiority to treatment with usual physical therapy care, according to a study published online Feb. 13 in *Spine*.

Adri T. Apeldoorn, of the VU University Medical Center in Amsterdam, and colleagues compared outcomes of classification-based physical therapy treatment to those of usual physical therapy care for 156 patients with sub-acute or chronic LBP. All participants were classified by research [physical therapists](#) using a modified version of Delitto's classification-based system, and were then randomly allocated to receive Delitto's classification-based treatment approach (74 patients) or usual

physical therapy (82 patients). Patients underwent follow-up at eight, 26, and 52 weeks.

The researchers found that there were no statistically significant differences between the two groups for outcomes at any time points. After eight weeks, patients in the classification-based group had increased global perceived effect scores (adjusted odds ratio, 1.01; 95 percent confidence interval, 0.31 to 3.28). They also had higher adjusted Oswestry Disability Index scores and [pain intensity](#) (numerical rating scale) scores (0.48 and 0.49 points, respectively). None of the differences were found to be statistically significant.

"The classification-based system as used in this study was not effective for improving physical therapy care outcomes in a population of patients with sub-acute and chronic LBP," the authors write.

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