

The Appropriateness Of Spinal Manipulation For Low-back Pain: Project Overview And Literature Review

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Effect of Neural Mobilization Versus Spinal Manipulation in Patients with Radicular Chronic Low Back Pain

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Abstract

Objective: to investigate the effects of neural mobilization and lumbar manipulation techniques on leg pain, functional disabilities, and degree of nerve root compression of chronic low back pain (CLBP) patients with sciatica resulted from lumbar disc herniation at L5-S1 level and also to determine which treatment was more effective than the other. Design: Randomized clinical trial. Materials and methods: Sixty patients with confirmed unilateral lumbosacral radiculopathy due to L5-S1 disc herniation from both sexes were involved, aged between 30 – 50 years. They were randomly divided into two equal groups, (group A) received neural mobilization techniques and (group B) received lumbar manipulation techniques. Main outcome measures: Visual analogue scale (VAS), Oswestry Disability Index (ODI), and degree of nerve root compression by grading system were measured for all patients before treatment, after 6 weeks of treatment. Results: There was a positive significant effect of both types of treatment on all outcome measures, however there was a significant difference between the (group B) and (group A) adjusted to baseline values and at 6 weeks post treatment in respect to: leg pain ($P=0.006$), Oswestry Disability Index ($P =0.001$), and degree of nerve root compression ($P=0.037$). Conclusion: The lumbar manipulation was more effective than neural mobilization; this may be due to direct influence of lumbar manipulation techniques on reduction of nerve root compression than neural mobilization techniques.

Keywords: Chronic low back pain, neural mobilization, lumbar manipulation.

Introduction

Chronic low back pain (CLBP) represents a significant health care burden resulting in substantial costs to society. It has been estimated that the 1-year prevalence for LBP ranges from 22% to 65%. A recent study found that the prevalence of LBP has remained consistent over the years in Spain suggesting that a better understanding for proper management of this condition is needed (Garcia et al., 2014). Sciatica is characterized by radiating pain in an area of the leg typically served by one nerve root in the lumbar or sacral spine; it is sometimes also associated with sensory and motor deficits. The most common cause of sciatica is a herniated disk. The estimated annual incidence of sciatica in Western countries is 5 cases per 1000 adults. The economic effect of lumbar-spine disorders is great. Spine disorders rank fifth among disease categories in the cost of hospital care and account for higher costs resulting in absent from work and disability than any other category (Wilco et al., 2007).

Management options for sciatica include analgesic medications, manipulation, surgical decompression, bed rest, and a variety of interventions provided by physical therapists. Physical

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