E-Poster

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Chronic Low Back Pain: Therapeutic Strategies and Clinical Outcomes in Physical Medicine and Rehabilitation Department

Topic: Integrative Medicine

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BACKGROUND

Low back pain (LBP) is an extremely common patient complaint. Most cases resolve quickly after the acute episode. However, a significant number of patients develop chronic low back pain; a persistent disabling condition. Patients suffer from unremitting pain and often become functionally impaired. The aim of this study is to describe the characteristics of chronic LBP, physical examination abnormalities and treatment strategies.

METHODS

It was a an analytical cross-sectional study including 50 patients with at least three months of LBP, in the department of physical medicine and rehabilitation (PRM) between July 1st and October 31, 2024. All patients had a standardized investigation and clinical assessment.

RESULTS

The study included 60% of active profession and 40% of administrative officers. The mean age of the patients was 39 ± 8.4 years and the sex ratio was 4.5. All the patients were suffering from chronic LBP lasting for an average of 40.6 months. LBP was associated with radicular pain in 56% of the cases. The main triggering factors were: carrying heavy loads in 80% of the cases, standing or sitting for long periods in 72% and 79% of the cases, tremors in 30% of the cases. Physical examination showed paravertebral muscle tenderness in 56% of the cases and slack abdominal muscles in 56% of the cases. The extension of lumbar spine was painful in 80% of the cases. A trigger point was found in 40% of the cases. Required treatments during the last episode of LBP were: Paracetamol (70%), nonsteroidal antiinflammatory drugs (20%), tramadol (5%), myorelaxant (7%). More than half of the patients needed functional rehabilitation; acupuncture, mesotherapy and dry needling was used respectively in 45%, 20%; and 10% of the cases. Sixty percent of the patients reported improvement; 46% of them reported improvement then recurrence of the pain, 10% of them reported no improvement.

CONCLUSION

Chronic LBP can cause significant functional disability, and commonly becomes frustrating for both patients and physicians. There is still no consensus on the best way to manage chronic low back pain, and clinical guidelines are scarce. A combination of conventional and non-conventional treatment is the most appropriate therapeutic regimen.

Statement of Disclosures

None

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