P96 - INTERDISCIPLINARY FASCIA THERAPY (IFT METHOD) IN CHRONIC LOW BACK PAIN: AN EFFECTIVENESS TRIAL WITH 206 OUTPATIENTS

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Introduction: Low back pain (acute and chronic) is difficult to treat and outcomes are quite varied, even when multicomponent approaches are utilized. This state of affairs necessitates continued exploration of ways to improve upon existing outcomes.

Purpose/Aim: The aim of this study was to explore the preliminary outcomes of a novel application of myofascial triggerpoint therapy, administered in a community-based (as opposed to a university-based research) setting, with a large sample of patients, all treated in a common manner. The data reported here were collected over 6 years (from 2011 until 2016). Exclusionary criteria were minimal. Thus, this study is best conceived as an effectiveness rather than an efficacy trial.

Materials and Methods: 206 patients (93 men, 113 women) with chronic low back pain (average pain=7.2 years) were recruited and treated at the Center for Integrative Therapy, Stuttgart, Germany. All patients received a standardized course of IFT, which is a manual and a tool assisted myofascial trigger point release (MTPR) method that is augmented with heart rate variability (HRV) training. Number of sessions completed by patients ranged from 8 to 12, with an average of 10 treatments. Prior to and following treatment completion all patients filled out the Brief Pain Inventory (BPI) and the Pain Disability Index (PDI). The BPI and PDI assess pain intensity and reduction of life quality, respectively. Statistical analyses included the paired t-test and Cohen's d-test. The study was undertaken in accordance with the Declaration of Helsinki and was financed through patient donations.

Results: Scores on the BPI and PDI questionnaires indicated significant reductions ($p<0.001$) in pain (momentary, strongest, minimal, and average pain of the last 24 hours), as well as significant improvements ($p<0.001$) in disturbances of general activity, mood, normal working, relationship to other humans, sleep, walking ability and zest for life. Paired t-tests and Wilcoxon signed rank tests sum scores of four questions concerning pain intensity (65% reduction) and of seven questions concerning pain disability (69% reduction) also revealed significant reductions ($p<0.001$). Cohen's d revealed large effect sizes for these 2 primary measures of outcome; 1.6 and 1.5, respectively.

Conclusions: IFT shows promise of being an effective therapy modality for the treatment of chronic low back pain. The findings are strengthened by using standard, accepted measures of pain outcome (the BPI and PDI questionnaires) and administering treatment in a workday clinic, with no special patient selection or staff training procedures. Although promising, more controlled investigations are needed in order to document the role and value of this newer, integrative approach to management of recurrent back pain.

Keywords: Chronic Low Back Pain; Interdisciplinary Fascia Therapy; Effectiveness Trial; Brief Pain Inventory; Pain Disability Index

References:
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