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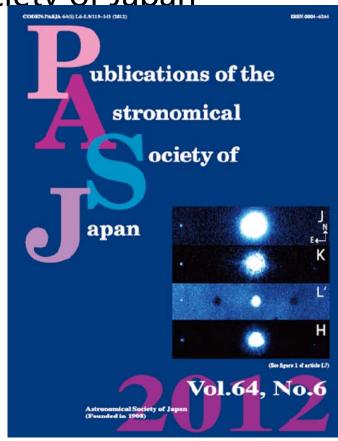
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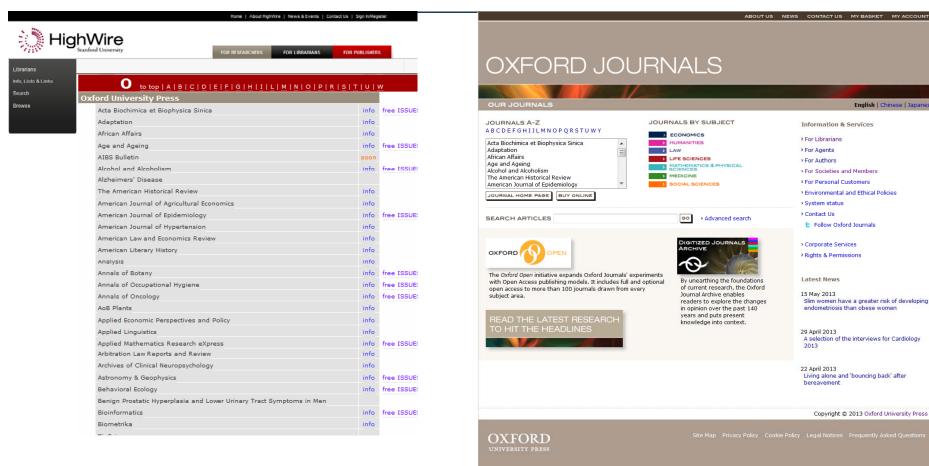
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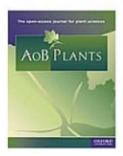
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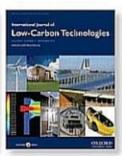










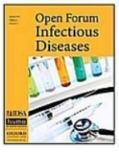




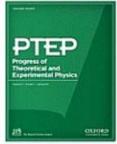








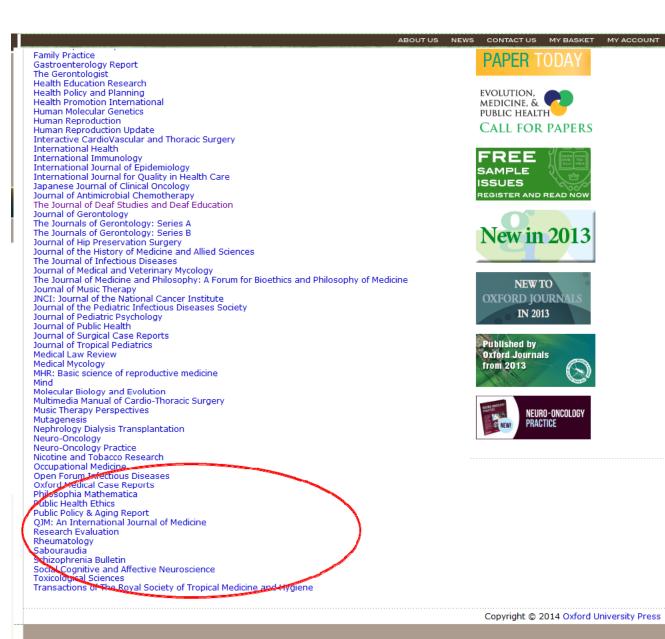






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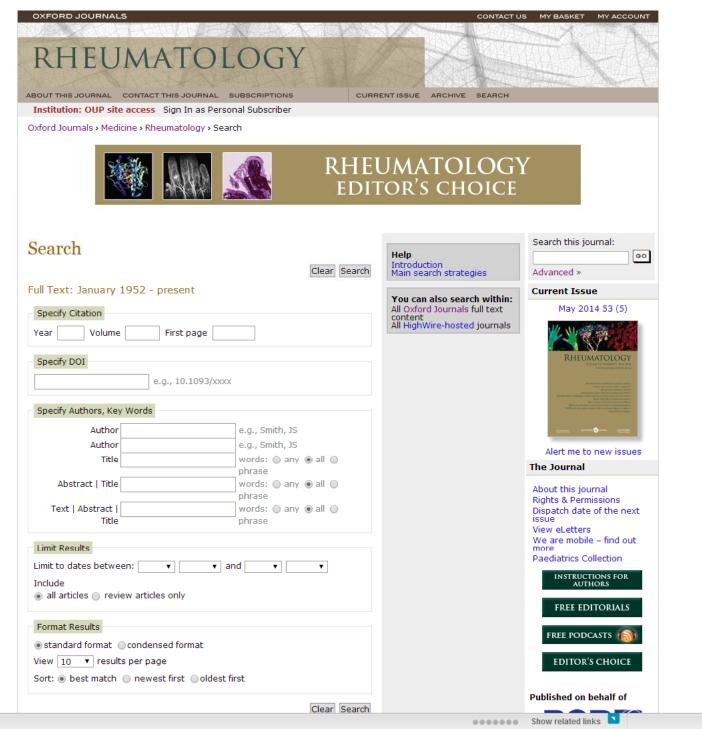


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## Acupuncture for chronic low back pain in older patients: a randomized, controlled trial

C. F. Meng, D. Wang  $^3$  , J. Ngeow  $^1$  , L. Lao  $^4$  , M. Peterson  $^2$  and S. Paget

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C. F. Meng, Hospital for Special Surgery, Rheumatology, 535 E. 70th Street, New York, NY 10021, USA. E-mail: mengc@hss.edu

Received August 7, 2002. Accepted April 17, 2003.

#### Abstract

*Objective.* To determine if acupuncture is an effective, safe adjunctive treatment to standard therapy for chronic low back pain (LBP) in older patients.

Methods. The inclusion criteria for subjects were: (i) LBP ≥12 weeks and (ii) age ≥60 yr; the exclusion criteria were (i) spinal tumour, infection or fracture and (ii) associated neurological symptoms. The subjects were randomized to two groups. The control group of subjects continued their usual care as directed by their physicians, i.e. NSAIDs, muscle relaxants, paracetamol and back exercises. Subjects in the acupuncture group in addition received biweekly acupuncture with electrical stimulation for 5 weeks. Outcome was measured by the modified Roland Disability Questionnaire (RDQ) at weeks 0, 2, 6 and 9. The primary outcome measure was change in RDQ score between weeks 0 and 6.

Results. Fifty-five patients were enrolled, with eight drop-outs. Twenty-25 Presentation name Presenter Name and Date four subjects were randomized to the acupuncture group and 23 were

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Results. Fifty-five patients were enrolled, with eight drop-outs. Twentyfour subjects were randomized to the acupuncture group and 23 were randomized to the control group. Acupuncture subjects had a significant decrease in RDQ score of 4.1  $\pm$  3.9 at week 6, compared with a mean decrease of  $0.7 \pm 2.8$  in the control group (P=0.001). This effect was maintained for up to 4 weeks after treatment at week 9, with a decrease in RDQ of  $3.5 \pm 4.4$  from baseline, compared with  $0.43 \pm 2.7$  in the control group (P=0.007). The mean global transition score was higher in the acupuncture group,  $3.7 \pm 1.2$ , indicating greater improvement, compared with the score in the control group,  $2.5 \pm 0.9$  (P < 0.001). Fewer acupuncture subjects had medication-related side-effects compared with the control group.

Conclusions. Acupuncture is an effective, safe adjunctive treatment for chronic LBP in older patients.

Acupuncture, Chronic low back pain, Elderly patients, Randomized controlled trial

Back pain is a common disorder, affecting 65-80% of the population [1] and is a major item in health-care expenditure, costing the United States \$25 billion annually [2]. Back pain is common in the elderly, with a prevalence of up to 49% of the population [3]. Patients aged 75 and over reported back pain as the third most common complaint overall and their most common musculoskeletal symptom [4]. Back pain is a prevalent, significant cause of morbidity in older patients, including depression [5], functional disability [6] and decreased quality of life [7].

Chronic, non-specific back pain refers to back pain not due to a specifically recognized disease process [8]. The literature describes inflammatosyndagen erative pstructural on traumaticaetiologies. Conclusive causal evidence, however, is lacking.

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#### Study population

Subjects were recruited from July 2000 until April 2001. A total of 205 subjects were screened and 55 (26.8%) were enrolled. The major reasons for exclusion from the study included the presence of associated neurological abnormalities (n= 30, 20%), the primary complaint of pain not in the low back area (n= 23, 15%), prior history of lumbar surgery (n= 15, 10%), prior use of acupuncture for low back pain (n= 10, 6%) and the presence of inflammatory arthritis (n= 10, 6%) (Fig. 2). Other reasons for exclusion included planned lumbar surgery, the presence of a cardiac arrhythmia, having a pacemaker, the current use of anticoagulants and not being willing to be randomized.

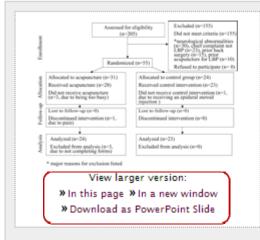


FIG. 2.
Flowchart of phases of randomized trial.

Of the 55 subjects who enrolled in the study, 31 subjects were randomized to the acupuncture group and 24 were randomized to the control group. There were no significant differences in the demographic and clinical characteristics between the acupuncture and control groups (Table 1). Eight patients dropped out of the study. When subjects who completed the study were compared with those who dropped out, the only significant differences that emerged were in the location of back pain.

More subjects who completed the study tended to be on NSAIDs than these who dropped out, seven were from the acupuncture group and one from the control

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C. F. Meng, D. Wang <sup>3</sup>, J. Ngeow <sup>1</sup>, L. Lao <sup>4</sup>, M. Peterson <sup>2</sup> and S. Paget + Author Affiliations

C. F. Meng, Hospital for Special Surgery, Rheumatology, 535 E. 70th Street, New York, NY 10021, USA. E-mail: mengc@hss.edu

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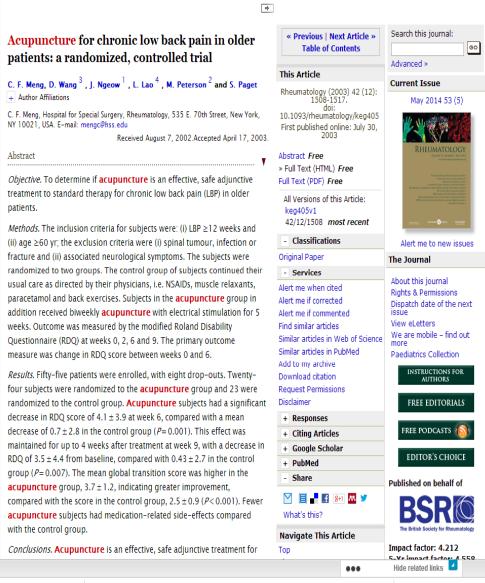
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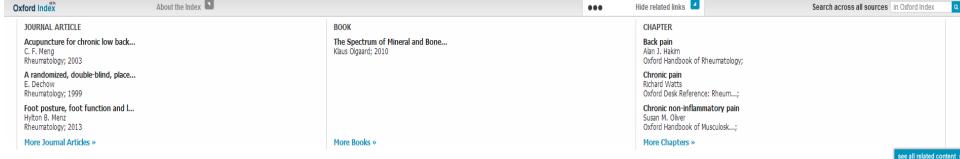
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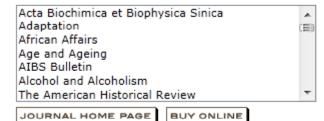




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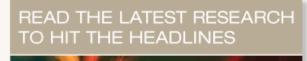
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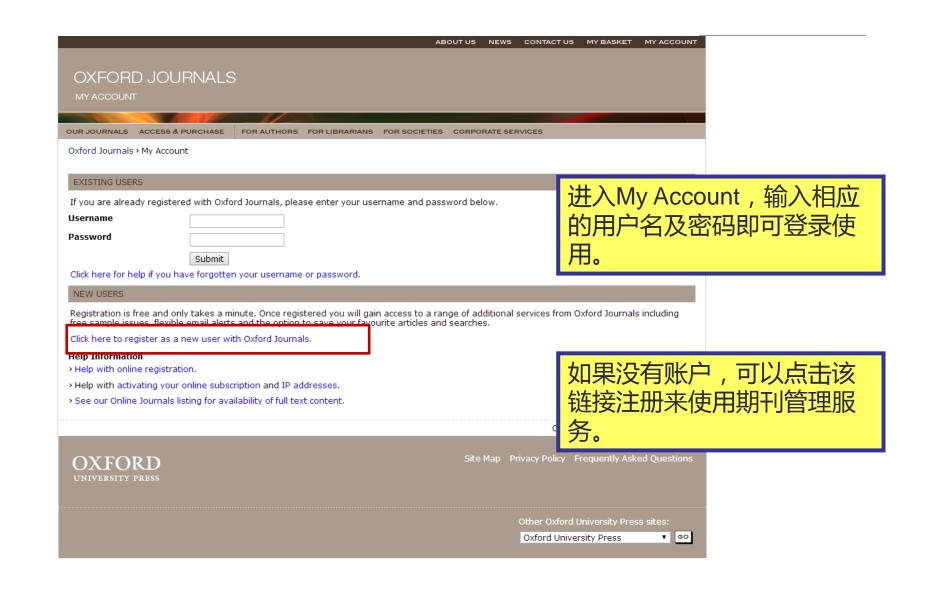


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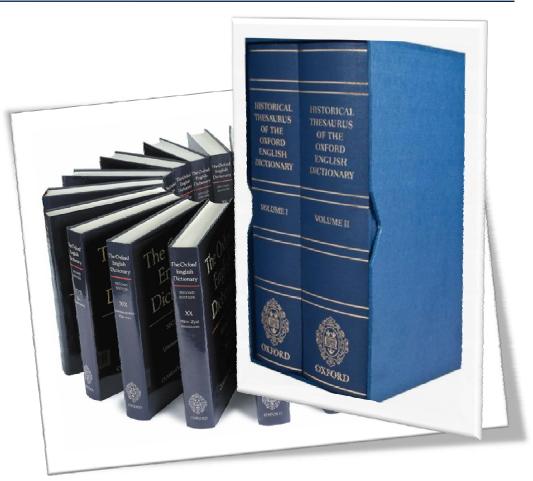
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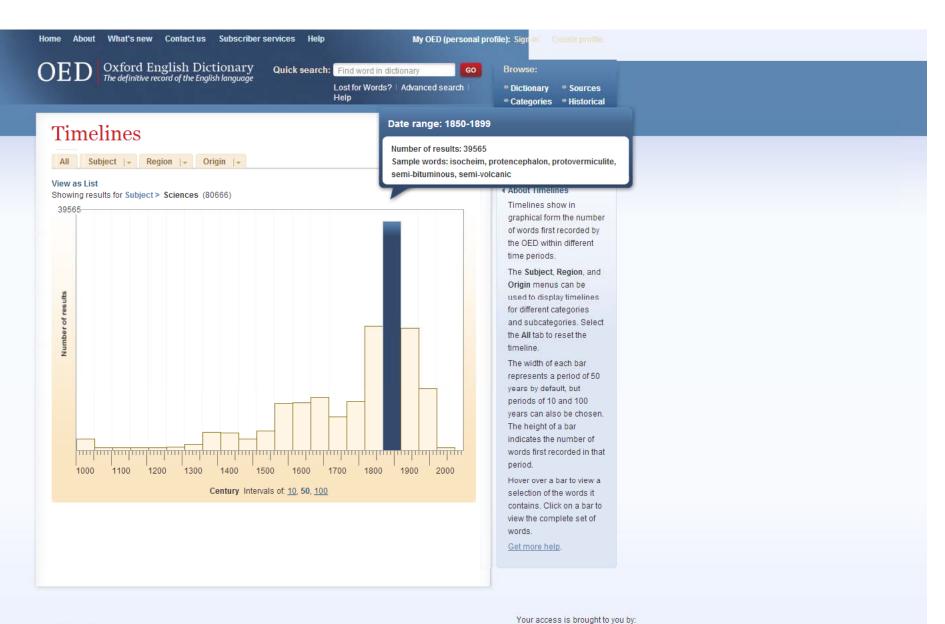
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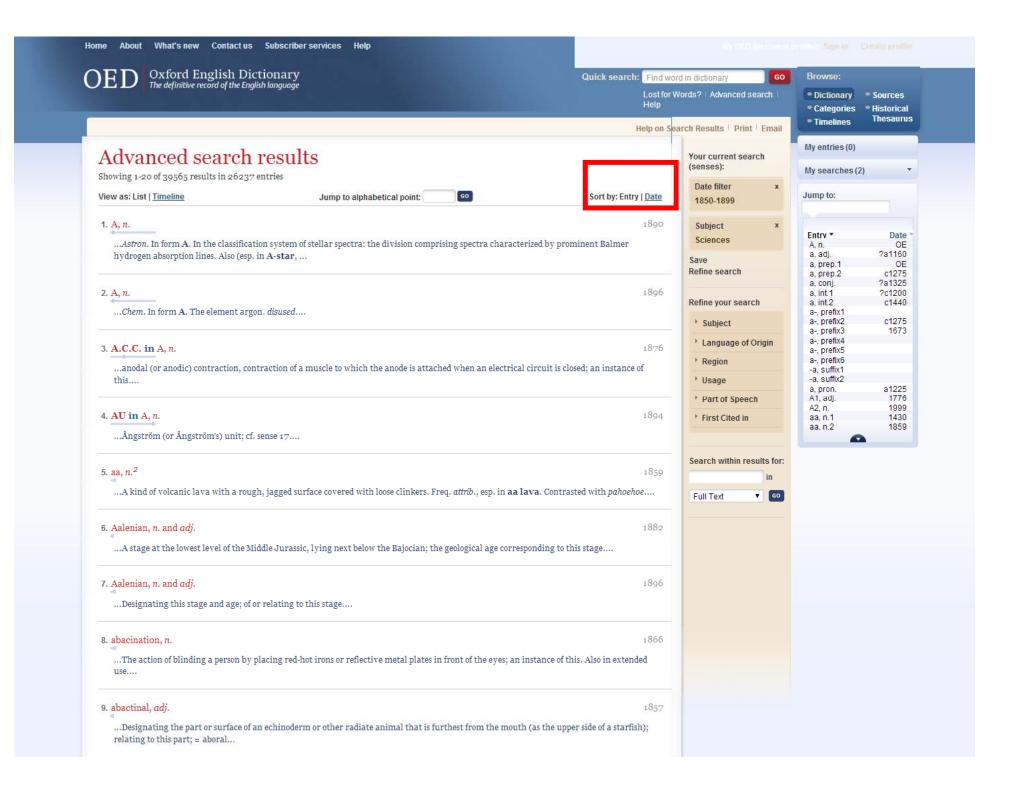
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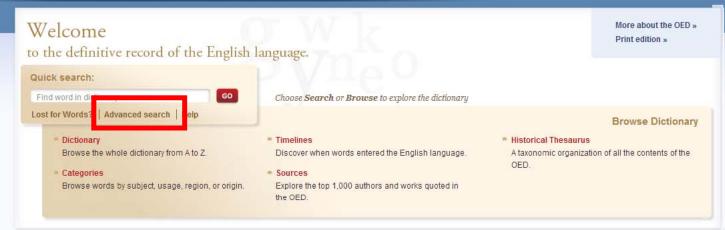
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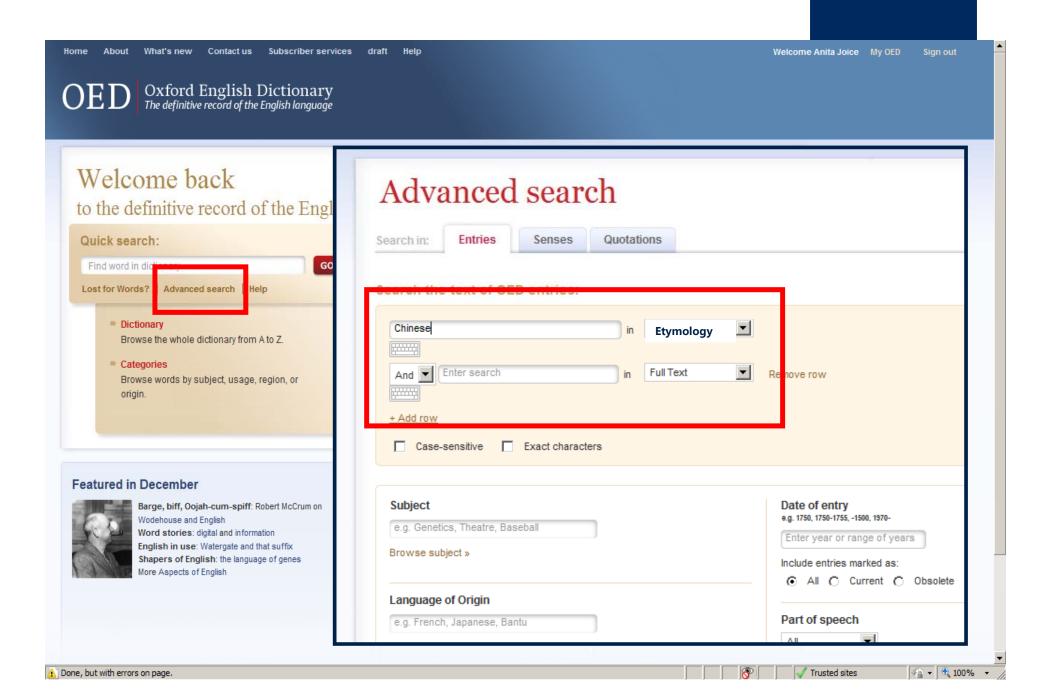
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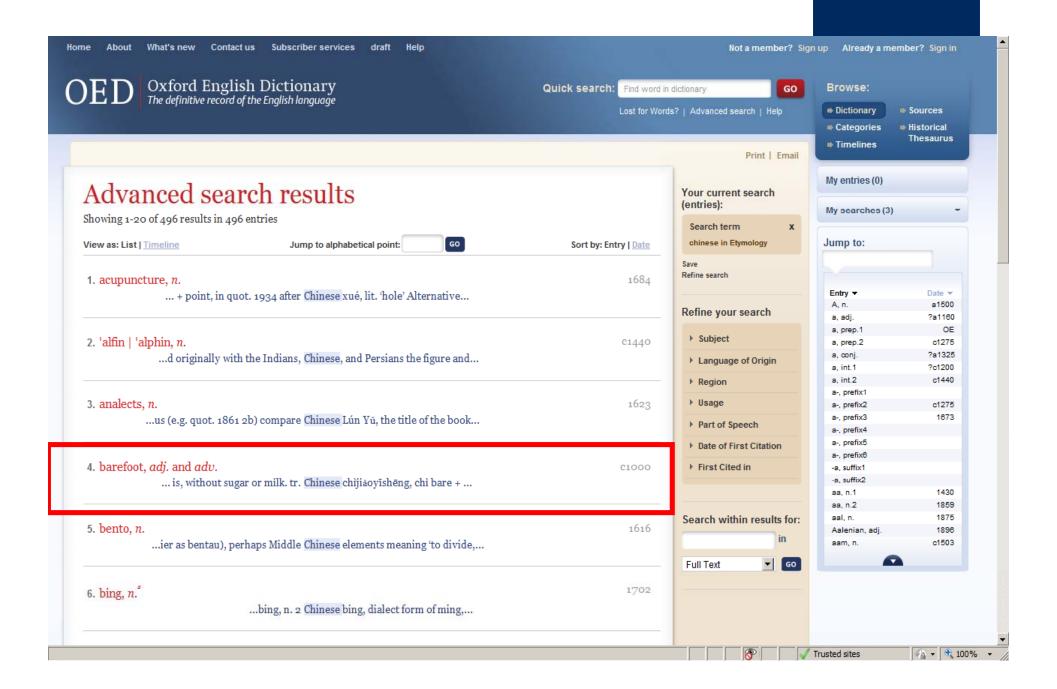
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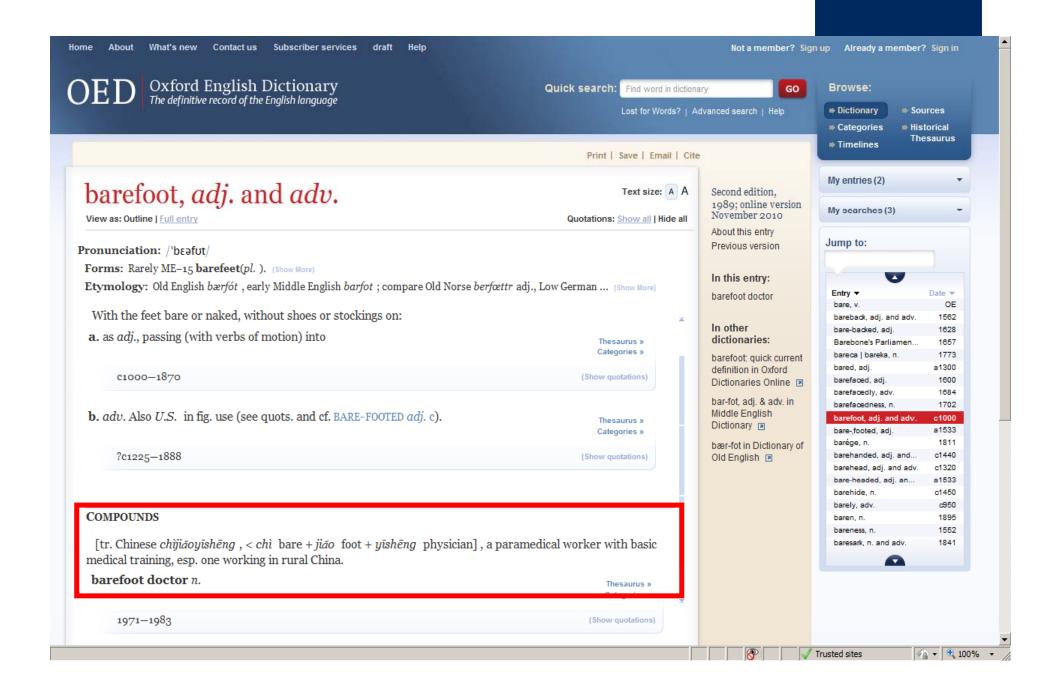


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