

Individual patient education is effective for acute or subacute low-back pain

Clinical question	How effective is individual patient education in the treatment of non-specific low-back pain?
Bottom line	People with low-back pain who received an individual patient education session, lasting at least 2 hours, in addition to their usual care had better outcomes than people who only received usual care. Shorter education sessions, or providing written information by itself without an individual education session, did not seem to be effective. People with chronic (long-term) low-back pain were less likely to benefit than people with acute or subacute (short-term) low-back pain. The outcomes measured included pain, function and return to work.
Caveat	Patient education was no more effective than other interventions, such as cognitive behavioural group therapy, work-site visits, x-rays, acupuncture, chiropractic treatment, physiotherapy, massage, manual therapy, heat-wrap therapy, interferential therapy, spinal stabilisation, yoga or Swedish back school. Studies that compared different types of individual patient education did not find clear results on which type was the most effective. Most individual treatments were only tested by one or two studies. Fifty-eight percent of the studies in the review were judged to be of high quality (ie, met at least 50% of the quality criteria).
Context	Patient education may include written or oral information, may be provided as a separate intervention or as part of a group programme. It may also be provided to an individual or to groups of patients. Patient education can mean a discussion with a health professional, a special class, written information (such as a booklet to take home), or other formats such as a video.
Cochrane Systematic Review	Engers A et al. Individual patient education for low-back pain. Cochrane Reviews 2008, Issue 1. Art. No.: CD004057. DOI: 10.1002/14651858.CD004057.pub3. This review contains 24 trials involving 7,139 participants.
Pearls No. 77, July 2008, written by Brian R McAvoy	

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