

Summaries for Patients are a service provided by *Annals* to help patients better understand the complicated and often mystifying language of modern medicine.

The full report is titled “Spinal Manipulation, Medication, or Home Exercise With Advice for Acute and Subacute Neck Pain. A Randomized Trial.” It is in the 3 January 2012 issue of *Annals of Internal Medicine* (volume 156, pages 1-10). The authors are G. Bronfort, R. Evans, A.V. Anderson, K.H. Svendsen, Y. Bracha, and R.H. Grimm.

Is Spinal Manipulation an Effective Treatment for Neck Pain?

What is the problem and what is known about it so far?

Neck pain is very common. Usual treatments include drugs (painkillers, anti-inflammatory drugs, and muscle relaxants) and, once the pain is less acute, exercising the neck and learning ways to prevent injuries that cause pain. Because medicines do not always work, some people use alternative treatments, such as spinal manipulation. This treatment consists of physical maneuvers to adjust and mobilize bones in the neck and back. It is used by chiropractors, physical therapists, and osteopaths. Spinal manipulation relieves pain in many persons, and it has been shown to help with acute lower back pain. However, it has not been compared with medicine or exercise as a treatment for neck pain.

Why did the researchers do this particular study?

To measure the effect of spinal manipulation compared with medicine or exercise for neck pain.

Who was studied?

272 adults with neck pain lasting at least 2 weeks and no longer than 3 months.

How was the study done?

The researchers first asked each participant to rate the severity of their neck pain. They then randomly divided the participants into 3 groups. The first group received spinal manipulation from experienced chiropractors, the second received pain medications from a medical doctor, and the third attended 2 sessions with therapists to learn about home exercises that might help them. Each treatment lasted 12 weeks. The researchers measured participants' pain throughout the treatment, at its end, and then at 6 and 12 months after the start of treatment. They also measured the participants' disability levels, overall improvement, medication use, general health, and satisfaction with care.

What did the researchers find?

Spinal manipulation was more effective than medication at improving neck pain by the end of 12 weeks of treatment and 1 year later. However, participants who did home exercises experienced improvement in their pain similar to that achieved with spinal manipulation. Participants who received spinal manipulation were more satisfied with their care.

What were the limitations of the study?

Participants knew which treatments they were getting. Participants who received spinal manipulation may have been more likely to experience pain improvement and satisfaction with their care because the treatment involved more frequent interactions with a provider than medication or exercise.

What are the implications of the study?

Spinal manipulation therapy seems more effective than medication for neck pain present for less than 12 weeks. However, a series of home exercises (**Supplement**, available at www.annals.org) provided similar improvements in pain.

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