- Psychotherapy

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Health

Psychotherapy relieves lower back pain

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A SHORT-TERM course of a type of psychotherapy was nearly three times more effective at relieving chronic lower back pain than standard treatments, even years later.

Cognitive functional therapy (CFT) provides people with personalised programmes that teach them to manage their pain through movement and lifestyle changes. In 2023, researchers found it relieved chronic lower back pain for at least a year after just eight sessions.

Now, the researchers have found those sessions continued to bring about relief three years later – almost tripling the improvement in pain and its associated disability levels compared with the care people were already on, such as painkillers or physical therapy.

"It seems to produce a lasting difference in patients who are very disabled from back pain, many of whom were, for all practical purposes, treatment resistant," says Jan Hartvigsen at the University of Southern Denmark.

"It seems to produce a lasting difference in people who were treatment resistant"

Back pain is a leading cause of disability globally, with treatments often providing only short-term relief. For the earlier work, Hartvigsen and his colleagues recruited 492 people with chronic lower back pain, defined as rating at least 4 on a pain scale of 0 to 10 and that had been moderately to severely limiting their physical activity for three months or more.

The researchers had one-third of the participants continue with their typical care routine. The other two-thirds stopped their regular care to engage in seven CFT sessions over 12 weeks, with a final session at 26 weeks.

During those sessions, physiotherapists examined each individual's posture, thoughts about pain, emotions and lifestyle factors. They aimed to help the participants view their pain differently, retrain their movement patterns and adopt healthier diets, rest strategies, stress management and exercise plans.

Half of those in the CFT group also had biofeedback, a sensor-based technique that allows them to track movement patterns in real time to help retrain their posture and motion.

At one year, both pain intensity and disability levels – measured according to the Roland Morris Disability Questionnaire – improved about three to four times as much in the CFT groups compared with those receiving usual care. Biofeedback only slightly increased the efficacy of CFT.

In the three-year follow-up, Hartvigsen's team obtained updated feedback from 312 of the participants, who were evenly distributed across the treatment groups.

They found those who received CFT still had a nearly three-fold improvement in both pain and disability compared with the usual care group (*The Lancet Rheumatology*, doi.org/pz39). Plus, about three times as many people in the CFT groups had disability scores so low on the questionnaire their pain was no longer considered functionally disabling.

However, participants were all free to seek additional care after the first year, but whether they did wasn't recorded. ▮