

## Unclear role for lumbar supports in low back pain

<b>Clinical question</b>	How effective are lumbar supports for prevention and treatment of non-specific low back pain (LBP)?
<b>Bottom line</b>	There is moderate evidence that lumbar supports are no more effective in preventing LBP than no intervention or training, and conflicting evidence whether they are effective supplements to other preventive interventions. It remains unclear whether lumbar supports as a treatment for LBP are more effective than no or other interventions.
<b>Caveat</b>	Assessment of clinical relevance found many of the trial publications provided inadequate information, eg, in the description of the study population and reporting of both pain and functional status. No trial specifically evaluated lumbar support for acute LBP. Conclusions from this review should be viewed with caution due to the low quality of many of the studies.
<b>Context</b>	LBP is a major health problem in western industrialised countries. Seventy to 85% of the population has LBP at some time in their life. Most patients recover quickly and without residual functional loss - 60-70% recover within 6 weeks and 80-90% recover within 3 months. <sup>1</sup> Lumbar supports (braces or corsets) are used in the treatment of patients with LBP, to prevent the onset of LBP (primary prevention) or to prevent recurrences of a LBP episode (secondary prevention).
<b>Cochrane Systematic Review</b>	van Duijvenbode ICD et al. Lumbar supports for prevention and treatment of low back pain. Cochrane Reviews 2008, Issue 2. Article No. CD001823. DOI: 10.1002/14651858.CD001823.pub3. This review contains 7 preventive studies involving 14,437 participants and 8 treatment studies involving 1361 participants.
<b>PEARLS 117, October 2008, written by Brian R McAvoy</b>	

### [References]

1. Krismer M et al. Best Pract Res Clin Rheumatol 2007;21:79-91.

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