PRIMARY CARE MANAGEMENT OF LOW BACK PAIN: A NOVEL INTERDISCIPLINARY APPROACH

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POSTER ABSTRACT

Low back pain (LBP) remains the most common pain pathology seen in primary care, and is associated with enormous direct and indirect costs to patients and society. While algorithms for the management of acute LBP (<6 weeks duration) have been established, the management of patients whose pain continues is challenging, and the subsequent development of chronic LBP (>6 months) is associated with considerable comorbidities. We present the outcomes of a four year evaluation of a novel interdisciplinary primary care LBP management program, developed and implemented as part of the McGill Réseau Universitaire Intégré de Santé (RUIS) Centre of Expertise in Chronic Pain in the province of Quebec.

Following extensive stakeholder consultation with experts in pain management, nursing, primary care, physiotherapy, rehabilitation and psychology, a 6 month interdisciplinary pain program was created based on the Wagner chronic care model and incorporating the McKenzie approach to LBP along with self-management principles. Four primary care public clinical sites within the McGill RUIS implemented the program from 2012-2016. A formal evaluation of the program consisting of validated self-report measures of pain, disability, quality of life, mood, and other biopsychosocial variables was applied at baseline, 6 weeks, 3 and 6 month intervals.

We present data from the first 168 patients to have completed the program, and we show significant improvements in pain intensity, interference, disability and quality of life. We propose that this model is an effective and satisfactory approach to support primary care clinicians in the management of this complex condition.

OTHER AUTHORS

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