

Massage Therapy May Relieve Chronic Back Pain

Laurie Barclay, MD

July 7, 2011 — Massage therapy may effectively reduce or relieve chronic back pain for 6 months or more, according to the results of a parallel-group, [randomized controlled trial](#) reported in the July 5 issue of the *Annals of Internal Medicine*.

"Recent reviews have found limited evidence that massage is an effective treatment for chronic back pain, and no studies have compared relaxation massage with structural massage, which focuses on correcting soft-tissue abnormalities," write Daniel C. Cherkin, PhD, from the Group Health Research Institute, Seattle, Washington, and colleagues. "We therefore conducted a trial to determine whether relaxation massage reduces pain and improves function in patients with chronic low back pain and compared relaxation and structural massage for treating this condition."

Computer-generated randomization and centralized allocation concealment were used, with blinding of participants to massage type, but not to assignment to massage vs usual care. Although the massage therapists could not be blinded, the study personnel who evaluated outcomes were blinded to treatment allocation.

At an integrated healthcare delivery system in Seattle, 401 participants were randomly assigned to receive structural massage (n = 132), relaxation massage (n = 136), or usual care (n = 133). Participants had nonspecific chronic low back pain and were aged 20 to 65 years. The main study endpoint was Roland Disability Questionnaire (RDQ) and symptom bothersomeness scores at 10 weeks, and secondary endpoints were these scores at 26 and 52 weeks. Clinically meaningful differences were defined as mean group differences of 2 or more points on the RDQ and 1.5 or more points on the symptom bothersomeness scale.

At 10 weeks, functional outcomes were similar in both massage groups. Compared with the usual care group, the relaxation group had an adjusted mean RDQ score that was 2.9 points lower (95% confidence interval [CI], 1.8 - 4.0 points), and the structural massage group had an adjusted mean RDQ score that was 2.5 points lower (95% CI, 1.4 - 3.5 points). Adjusted mean symptom bothersomeness scores were 1.7 points lower with relaxation massage (95% CI, 1.2 - 2.2 points) and 1.4 points lower with structural massage (95% CI, 0.8 - 1.9 points).

At 52 weeks, there were persistent but small benefits of relaxation massage for function, but not for symptom reduction.

"We found that patients receiving massage were twice as likely as those receiving usual care to report significant improvements in both their pain and function," Dr. Cherkin said in a news release. "After 10 weeks, about two-thirds of those receiving massage improved substantially, versus only about one-third in the usual care group."

A study limitation was the lack of blinding of massage therapists and the only partial blinding of participants to treatment assignment. In addition, the exercises recommended in the 2 massage groups differed slightly, and the massage therapists were atypical, in that they had practiced for at least 5 years and had learned structural massage techniques. Generalizability of the findings is limited because the trial included mostly women with nonspecific chronic low back pain who were enrolled in a single healthcare system that serves a mostly white and employed population.

"Massage therapy may be effective for treatment of chronic back pain, with benefits lasting at least 6 months," the study authors conclude. "No clinically meaningful difference between relaxation and structural massage was observed in terms of relieving disability or symptoms."

The National Center for Complementary and Alternative Medicine supported this study. One of the authors received an honorarium for presenting the keynote presentation at the Highlighting Massage Therapy in CIM Research Conference. The authors have disclosed no other relevant financial relationships.

Ann Intern Med. 2011;155:1-9. [Abstract](#)

Medscape Medical News © 2011 WebMD, LLC
Send comments and news tips to news@medscape.net.