



Psychosomatic

Reassurance for acute low back pain

...does it help?

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Clinicians often spend time reassuring patients with low back pain to reduce their fears about their condition and to reduce future self-reported disability and healthcare use.

Primary care guidelines for the management of low back pain advise clinicians to focus on providing reassurance that back pain is benign and on advice that encourages self-management, and there is evidence that patient education does increase feelings of reassurance among these patients.

Despite this neat story, a group of researchers in Australia and the UK have shown that feeling reassured after a consultation did not lead to improvements in disability and healthcare use for people with acute LBP. They determined this with sophisticated analysis of how much of the overall treatment effect on these outcomes could be attributed to feeling reassured.

The authors of the study conclude that comprehensive attempts to remove a patient's fear of serious illness (e.g., through extended consultations) are unlikely to improve outcomes and therefore may be unwarranted.

Although reassurance is a core aspect of clinical practice, clinicians should consider reallocating time to other aspects of the consultation that could reduce disability and future healthcare use. For example, clinicians could focus more on listening to their patient's story, estimating and discussing their prognosis, and matching their preferences with recommended non-pharmacological treatment options and self-management strategies.

Want to read deeper into this topic? Have a look at the free full text version of this article published in [Journal of Physiotherapy](#)!



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