

Back In Action

Randomized Controlled Trial of Acupuncture for Chronic Low Back Pain in Older Adults

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Low Back Pain In Older Adults (the What)

- Leading cause of disability worldwide
- High cost-burden (>\$100B/yr in the U.S.)
- Older adults at higher risk for complications
 - Opioids and other pain medications
 - Back imaging is unreliable
 - Effect of other common health conditions



4 Main Study Goals

To test the effectiveness of acupuncture needling among older adults with chronic low back pain to:

- 1. Improve back pain-related disability
- 2. Learn how many acupuncture sessions are needed
- 3. Help CMS to plan for coverage
- 4. Determine the cost of acupuncture

Acupuncture for Low Back Pain In Older Adults (the Why)

- Safe and effective
- Also helps with other pain conditions
 - sleep problems,
 - fatigue,
 - emotional well-being
- Personalized treatment
- Medicare coverage





The Traditional Research Model

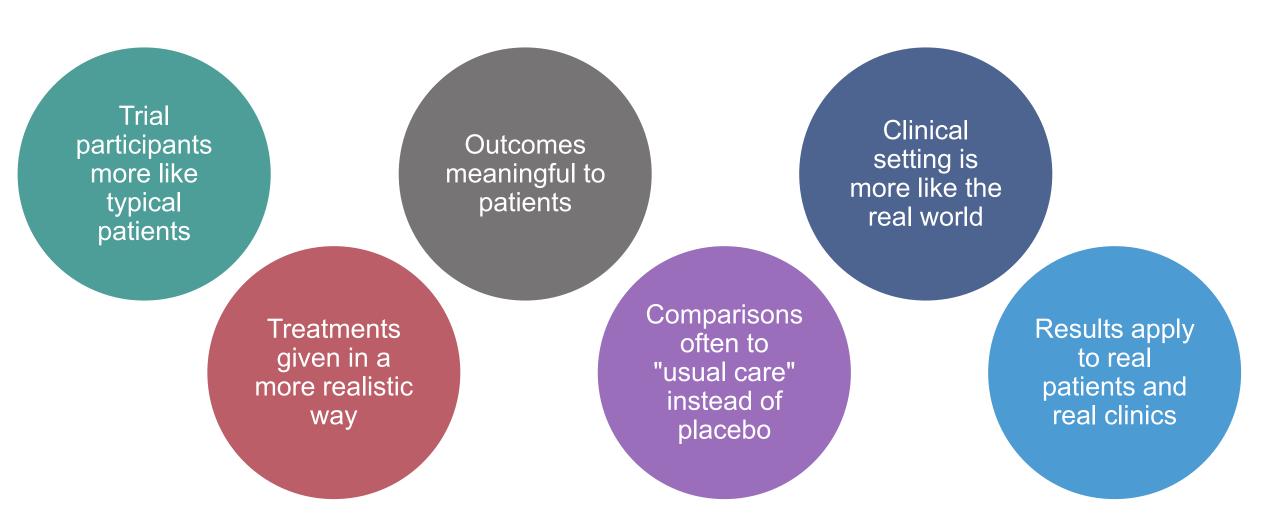
- Designed to answer scientific question
- Usually in academic centers
- Highly selected participants
- Placebo/sham-controlled
- Treatment best for research
- NOT "real-world" clinical settings



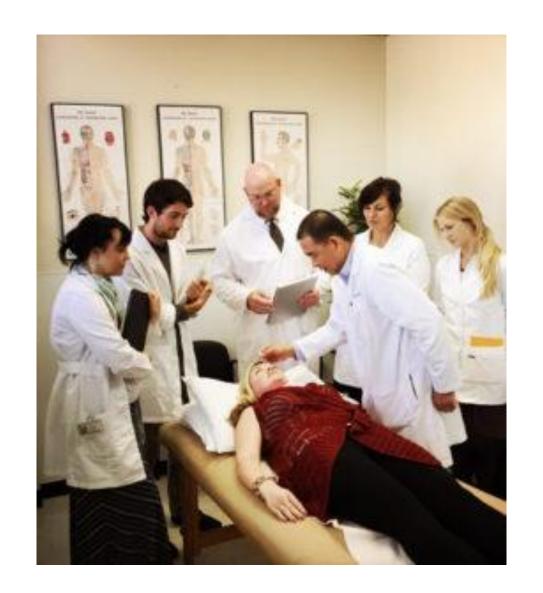
Problems with the Traditional Research Model

- Study participants unlike typical patients
- Treatments unlike what real patients might expect
- Placebo/sham controls are problematic
- Treatment outcome measurements often good for research but not what patients care most about

The "Pragmatic Trial" Model



Traditional vs. Pragmatic





A Tale of Two Studies

Acupuncture for chronic low back pain

The "SPINE Study"

ORIGINAL INVESTIGATION

A Randomized Trial Comparing Acupuncture, Simulated Acupuncture, and Usual Care for Chronic Low Back Pain

Daniel C. Cherkin, PhD; Karen J. Sherman, PhD; Andrew L. Avins, MD, MPH; Janet H. Erro, RN, MN; Laura Ichikawa, MS; William E. Barlow, PhD; Kristin Delaney, MPH; Rene Hawkes, BA; Luisa Hamilton, MD; Alice Pressman, MS; Partap S. Khalsa, DC, PhD; Richard A. Deyo, MD, MPH

• JAMA Internal Medicine 2009; 169:858-866

Characteristics of the SPINE study

- Unique participants
- Sham-acupuncture control group
 - Fake needles were toothpicks!
- Separated "diagnosing" practitioner from "treating" practitioner
- Participants (literally) blinded to treatment
- No communication allowed between participant and practitioner
- Not a real-life acupuncture experience



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Who is in the study?

Patients

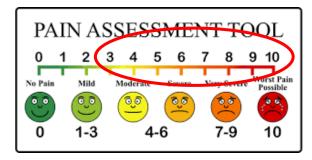
• ≥ 65 years of age





• with low back pain (LBP) for ≥ 3 months in the prior year

with pain-related general activity interference
(≥ 3 on PEG)





 who had primary care at one of the four health systems





Design





Kaiser Permanente Washington Health Research Institute

KPNC



SUTTER



IFH



KPNC and Sutter Health – Northern Californian



Usual Care

Standard Acupuncture

Recruited

N=807

Enhanced Acupuncture IFH – New York City



Treatment Arms

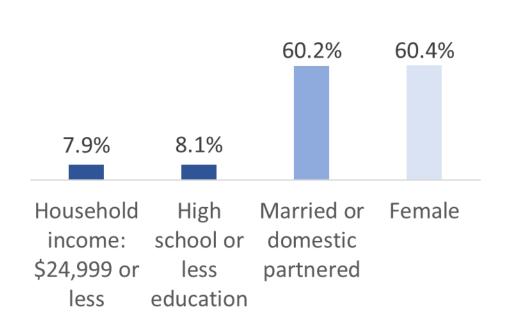
Standard acupuncture: 8-15 treatment sessions over 12 weeks

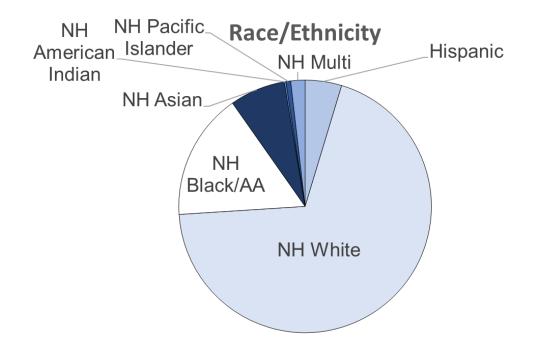
Enhanced acupuncture: Standard plus up to 6 extra



California Participants: baseline demographic characteristics







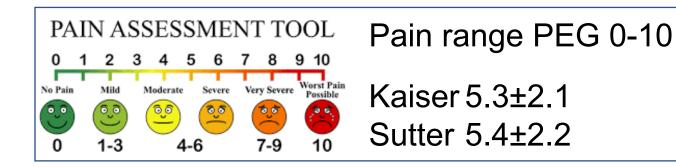
California Participants: baseline clinical characteristics

Primary outcome

Back-Related Disability Roland Morris Disability Questionnaire range 0-24

Kaiser 12.6±5.3 Sutter 12.5±5.2

Secondary outcomes



PROMIS physical function range 0-100

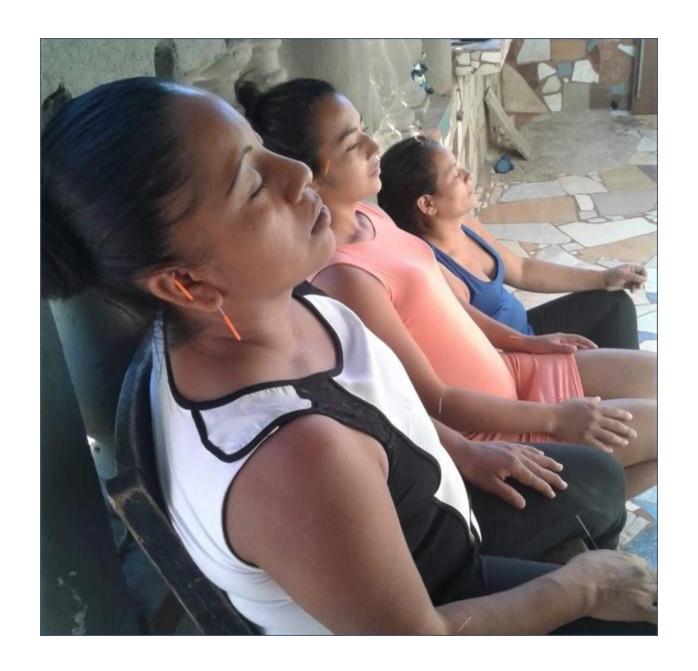
Kaiser 40.2±6.4 Sutter 38.0±6.6 What is Acupuncture?



Chinese Medicine Philosophy



Bliss...







Questions and Discussion

