



# Effective Health Care

## Effectiveness of Traction Devices for Management of Low Back Pain

### Nomination Summary Document

#### Results of Topic Selection Process & Next Steps

- The topic *Traction Devices for Low Back Pain* was addressed by an in-process AHRQ systematic review titled *Noninvasive Treatments for Low Back Pain*. Given that this in-process systematic review covers this nomination, no further activity will be undertaken on this topic.
- Agency for Healthcare Research and Quality. Noninvasive treatments for low back pain. Evidence-based Practice Center Systematic Review Protocol. Rockville, MD: AHRQ; 2014 Oct. Available at: <http://effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/?productid=1983&pageaction=displayproduct>
- To view a description and status of the research review, please go to: <http://www.effectivehealthcare.ahrq.gov/index.cfm/search-for-guides-reviews-and-reports/>

#### Topic Description

**Nominator(s):** Individual

**Nomination Summary:** The nominator is interested in having an auto-traction device he developed be reviewed and compared to other self-treatment devices for chronic low back pain (LBP); however the device was not specifically named in the topic nomination. The nominator indicated that the medical device is not currently approved for use in the US by the Food and Drug Administration but that the device (method) is patented in the UK. The nominator wants AHRQ to consider the topic because he believes chronic LBP from a herniated disc is a major problem in the US. He asserts that since the device can be self-managed in a patient's home at any time, it can lead to a decrease the number of hospital visits and reduce costs of care.

**Staff-Generated PICO**

**Population(s):** Adults with chronic LBP

**Intervention(s):** Traction devices to self-manage chronic LBP

**Comparator(s):** Traction devices compared to each other, other LBP treatments, placebo/sham, no treatment

**Outcome(s):** Reduction of pain; patient satisfaction; patient quality of life; need for invasive treatment; cost

**Key Questions from Nominator:** The nominator asked for traction methods to be compared to other treatments for LBP caused by a herniated disc.

### Revised Key Question

Although the original Key Question focused on LBP caused by a herniated disc, our initial scan for LBP specifically caused by a herniated disc showed that most literature either does not specify the cause of LBP or lists herniated disc with many other potential causes of LBP. In consultation with our clinical reviewer, the Key Question was expanded to also include a broader range of chronic LBP etiologies.

While we sought evidence related to the traction devices that can be self-managed by patients, as specified by the nominator, the scope was also expanded to include the effectiveness of traction in a clinical setting because most available literature we found involved a clinical setting, not a home setting.

The question was revised as follows:

What are the comparative benefits and harms of traction devices for the self-management of chronic LBP?

## Considerations

- The topic meets EHC Program importance criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- Low back pain (LBP) is experienced by approximately 80% of adults in the US at some point during their lifetime, and over one quarter of US adults report experiencing LBP in the last three months.<sup>1</sup> There are a variety of ways to manage LBP, including traction devices. However, the benefits and harms of traction may be uncertain.
- Topic was found to be addressed by an in-process AHRQ comparative effectiveness review titled *Noninvasive Treatments for Low Back Pain*. Nonpharmacological noninvasive interventions being examined include traction. Relevant key questions from this review include:
  - Key Question 2: What are the comparative benefits and harms of different nonpharmacological, noninvasive therapies, or combinations thereof (combinations may include both pharmacological and nonpharmacological components) for acute, subacute, or chronic nonradicular low back pain, radicular low back pain, or spinal stenosis, including but not limited to exercise and related interventions, complementary and alternative therapies, psychological therapies, physical modalities, and interdisciplinary rehabilitation?
  - Key Question 3: How do the benefits of pharmacological or nonpharmacological therapies for low back pain vary according to patient characteristics (e.g., demographic, clinical, and psychosocial risk factors)?

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<sup>1</sup> National Institute of Neurological Disorders and Stroke. Low back pain fact sheet. Bethesda, MD: NINDS; 2015 Nov.