Low back pain outcome

Outcome measurement has been shown to improve performance in several fields of healthcare. This understanding has driven a growing interest in value-based healthcare, where value is defined as outcomes achieved per money spent. While low back pain (LBP) constitutes an enormous burden of disease, no universal set of metrics has yet been accepted to measure and compare outcomes. Here, we aim to define such a set.

An international group of 22 specialists in several disciplines of spine care was assembled to review literature and select LBP outcome metrics through a 6-round modified Delphi process. The scope of the outcome set was degenerative lumbar conditions.

Results: Patient-reported metrics include Numerical Pain Rating Scale (NPRS), lumbar-related function using the Oswestry disability index, health-related quality of life using the EQ-5D-3L questionnaire, and questions assessing work status and analgesic use. Specific common and serious complications are included. Recommended follow-up intervals include 6, 12, and 24 months after initiating treatment, with optional follow-up at 3 months and 5 years. Metrics for risk stratification are selected based on pre-existing tools.

Interpretation: The outcome measures recommended here are structured around specific etiologies of LBP, span a patient's entire cycle of care, and allow for risk adjustment. Thus, when implemented, this set can be expected to facilitate meaningful comparisons and ultimately provide a continuous feedback loop, enabling ongoing improvements in quality of care. Much work lies ahead in implementation, revision, and validation of this set, but it is an essential first step toward establishing a community of LBP providers focused on maximizing the value of the care we deliver [1].

A standardized set of outcome measures for use in patients with back pain was proposed by a multinational group of experts [2].

The domains recommended for inclusion were pain, back-specific function, generic health status (well-being), work disability, social disability, and patient satisfaction.

[1]
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[2]
Deyo RA, Battie M, Beurskens AJHM, Bombardier C, Croft P, Koes B, Malmivaara A, Roland M, Korff M, Waddell G. Outcome measures for low back pain research: a proposal for standardized use. Spine. 1998;23:2003–2013. doi: 10.1097/00007632-199809150-00018.

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