

Hoving et al. A Randomized Controlled Trial of Manual Therapy. *Ann Intern Med.* 2002;136:713-722. Manual Therapy, Physical Therapy, or Continue Care by a General Practitioner for Patients with Neck Pain, A Randomized, Controlled Trial, Pages 713-722

“Conclusion: In daily practice, manual therapy is a favorable treatment option for patients with neck pain compared with physical therapy or continued care by a general practitioner.”

Background: Neck pain is a common problem, but the effectiveness of frequently applied conservative therapies has never been directly compared.

Objective: To determine the effectiveness of manual therapy, physical therapy, and continued care by a general practitioner.

Design: Randomized, controlled trial.

Setting: Outpatient care setting in the Netherland.

Patients: 183 patients, 18070 years of age, who had had nonspecific neck pain for at least 2 weeks.

Intervention: 6 weeks of manual therapy (specific mobilization techniques) once per week, physical therapy (exercise therapy) twice per week, or continued care by a general practitioner (analgesics, counseling, and education).

Measurements: Treatment was considered successful if the patient reported being “completely recovered” or “much improved” on an ordinary six-point scale. Physical dysfunction, pain intensity, and disability were also measured.

Results: At 7weeks, the success rates were 68.3% for manual therapy, 50.8% for physical therapy, and 35.9% for continued care. Statistically significant differences in pain intensity with manual therapy compared with continued care or physical therapy ranged from 0.9 to 1.5 on a scale of 0-10. Disability scores also favored manual therapy, but the differences among groups were small. Manual therapy scored consistently better than the other two interventions on most outcome measures. Physical therapy scored better than continued care on some outcome measures, but the differences were not statistically significant.