

Electrotherapy for neck pain (2013)

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COCHRANE BACK REVIEW GROUP
The best evidence in back and neck pain care



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Overview of the study

Objectives

- To assess the short, intermediate, and long-term effects of electrotherapy on neck pain with and without radiculopathy or cervicogenic headache.

Methods

- Evidence current up to 15 August 2012
- Participants: Adults (aged 18 or older) who suffered from acute, sub-acute, or chronic neck pain*
- Intervention: Electrotherapy
- Outcomes measured
 - Primary outcomes: pain relief, disability, function including work-related outcomes
 - Secondary outcomes: patient satisfaction, global perceived effect and quality of life

*Categorized as non-specific mechanical neck pain including WAD category I, II, and myofascial neck pain, and degenerative changes including osteoarthritis and cervical spondylosis; cervicogenic headache; and neck disorders with radicular findings

Results & Conclusion

- 20 trials (1239 participants) included.

Treatment	Evidence	Quality of evidence
Pulsed electromagnetic field therapy (PEMF), Repetitive magnetic stimulation(rMS), Transcutaneous electrical nerve stimulation (TENS)	More effective than placebo	Very low
Modulated galvanic current, Iontophoresis, Electric muscle stimulation (EMS)	No more effective than placebo	Very low
Permanent magnets (necklace)	No more effective than placebo	Low

⇒ Current evidence for PEMF, rMS, and TENS shows that these modalities might be more effective than placebo, but the estimate of effect is uncertain due to low quality of evidence