Rehabilitation following surgery for lumbar spinal stenosis (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 determine whether active rehabilitation programmes following primary surgery for lumbar spinal stenosis have an impact on functional outcomes and whether such programmes are superior to 'usual postoperative care‘

Methods

- Evidence current up to 1 March 2013
- Participants: Adults (> 18 years old) who had spinal decompression surgery for central or lateral stenosis at single or multiple levels
- Intervention: Active rehabilitation after surgery
- Outcomes measured
  - Primary outcomes: function and QoL
  - Secondary outcomes: pain severity, global improvement/overall health

Results & Conclusion

- Three trials (373 participants) included

Intervention	Evidence	Quality of evidence
Active rehabilitation	More effective than usual care for functional status and for reported low back pain in short term	Moderate
	No more effective than usual care for leg pain in short term	Low
	No additional benefit on general health status compared to usual care in short term	Low
	More effective than usual care for functional status for reported low back pain in long term	Moderate
	No more effective than usual care for general health improvement	Low

⇨ Evidence suggests that active rehabilitation is more effective than usual care in improving both short- and long-term (back-related) functional status. The clinical relevance of these effects is medium to small