

**Title of Intervention and Website:** A fitness program for patients with chronic low back pain

**Intervention Strategies:** Group Education

**Purpose of the Intervention:** To manage pain in patients with low-back pain and reduce disability by implementing fitness programs

**Population:** Patients referred to the Physiotherapy Department of Nuffield Orthopedic Center

**Setting:** The Physiotherapy Department of the Nuffield Orthopedic Centre; healthcare facility-based

**Partners:** None mentioned

**Intervention Description:**

- Group Education: Participants were taught 4 basic exercises and told to do them twice daily. Participants were then randomized into two groups: Group 1 – Back-school only and Group 2 – Back-school and fitness program. Back-school is an educational program that includes discussion of the patient's main problem, functional anatomy, simple applied body mechanics, and advice regarding functional activities and exercises, relaxation techniques, ergonomic advice and a video on back injury prevention. The fitness program included 8 one-hour sessions over 4 weeks. Each session included warm-up and stretching followed by a circuit of 15 progressive exercises. The sessions finished with a stretching routine and light aerobic exercise. The classes were supervised by a physiotherapist.

**Theory:** Not mentioned

**Resources Required:**

- Staff/Volunteers: physiotherapist, back-school instructor
- Training: not mentioned
- Technology: audio-visual equipment
- Space: classroom and gym space
- Budget: not mentioned
- Intervention: back injury prevention video and educational materials for fitness program and back-school
- Evaluation: Revised Oswestry low back pain disability index questionnaire, pain diaries, pain locus of control questionnaire, pain self efficacy questionnaire, shuttle walking test, timer and telemetry device.

**Evaluation:**

- Design: Randomized Controlled Trial
- Methods and Measures: Revised Oswestry low back pain disability index (subjective measure of disability), pain diaries, pain locus of control questionnaire (assessed patient pain control), pain self-efficacy questionnaire (assessed patient confidence in ability to carry out normal activities), general health questionnaire (measure of general psychological state) and the shuttle walking test (measured walking capacity) were all used to evaluate intervention program.

**Outcomes:**

- Short term Impact: There was a significant reduction in sensory and affective pain in patients attending the fitness program. Patients attending the fitness program also increased walking capacity significantly.
- Long Term Impact: At the 6-month follow-up assessment, many patients who attended the fitness program reported that they were continuing with exercises as it helped them to cope with their back problem and remain active.

**Maintenance:** Not mentioned

**Lessons Learned:** Simply advising patients with low back pain to exercise is not effective in reducing disability and pain. Supervised fitness programs can help reduce pain and disability and improve patients' confidence.

**Citation(s):**

Frost, H., J. A. Klaber Moffett, et al. (1995). "Randomised controlled trial for evaluation of fitness programme for patients with chronic low back pain." *Bmj* 310(6973): 151-4.