

Book Reviews: Rapidly Reversible Low Back Pain

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Rapidly Reversible Low Back Pain: an evidence-based pathway to widespread recoveries and savings, Ronald Donelson, 2007, Self Care First, ISBN 9780979038709; Softcover, 233 pages, \$30US

This book is a must-read for clinicians caring for back pain patients, writers of clinical guidelines, funding agencies, and those involved in the creation of public policy. It is organized into six parts and 16 chapters. It is thoroughly indexed and contains numerous references. Parts 1 and 2 (Chapters 1-6) introduce the current status of the low back pain problem from a number of different perspectives, and elegantly buries some persistent and unjustified notions that bedevil research endeavours and current clinical guidelines. Dr Donelson exposes the weaknesses of depending on international clinical guidelines and their reliance on the randomized controlled trial paradigm. He also successfully puts the diagnostic triage in perspective, and exposes the fact that 85% of LBP patients are considered 'non-specific', which has led to many RCTs inappropriately lumping these cases together as though they were a homogeneous group. His discussion of these issues is not done in a negative or nihilistic fashion, but in a way that offers practical solutions to investigating and managing back pain. He uses the Assessment-Diagnosis-Treatment-Outcome model of research that Dr Kevin Spratt proposed for guiding future research endeavours, so that the problem of heterogeneity is not perpetuated.

Parts 3-6 provide an accurate report on the current status of research in McKenzie's mechanical diagnosis and therapy (MDT) system. As Dr Spratt has stated in his forward, Dr Donelson does not attempt to camouflage his advocacy of the McKenzie MDT system, but uses the literature in a logical and reasonable way. Specifically he carefully limits his advocacy to a clearly defined group of patients – a subgroup of the total LBP population, and does not claim to have the answer for every LBP sufferer.

Dr Donelson has written this book for the world market, but his comments on how and why guideline writers, clinicians and researchers ignore the large body of high quality research supporting the McKenzie MDT paradigm is particularly relevant to the New Zealand environment. It has always seemed ironic to me that New Zealand medical and physiotherapy practitioners seem to be slower than others in acknowledging the importance and value of a system developed by a New Zealander.

There are weaknesses and omissions in the text that are important to mention. For example, the author repeats that mantra that a patho-anatomic diagnosis is not available for the majority of patients with LBP. In this he commits the same error, and possibly for the same reasons, as the writers of clinical guidelines on low back pain that he criticizes so well. I also feel that he is rather repetitive in his descriptions of specific pieces of research supporting the McKenzie MDT paradigm. Despite this, the book is very readable, does not get bogged down in technicalities, it is coherent, and a worthy addition to the bookshelves of all involved in managing back pain. In my view, this book should be required reading for all post graduate physiotherapy students.

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Reviews posted on Amazon.com

Dr. Donelson's book is a MUST read for physicians, therapists, nurses, chiropractors – any professional who is interested in helping their patients with their lower back pain (LBP). Additionally, this book is a MUST read for patients like myself who was searching, searching and searching for cutting-edge information on LBP. For four months I suffered with extreme over-the-edge pain from a nerve impingement caused by an L5-S1 bulging disc. I was prescribed medication and physical therapy with no relief. I then proceeded to have two epidural treatments – but again, with no relief. Fortunately I bumped into a Mechanical Diagnosis and Therapy (MDT)-credentialed Physical Therapist who scheduled me for an assessment and then treatment. Next I found out about this book – and information is power! I poured through the content and in a short time became more and more confident and motivated to do everything under my power to get well. Close to scheduling surgery at one point, I am now symptom-free.

From my LBP journey, I am encouraged that the medical community seems to be leaning towards recommending least invasive strategies for their patients including medication, Physical Therapy and advice to stay active. However, after reading this book, it should become rapidly apparent that an additional recommendation of an MDT assessment should be given. By doing so, weeks and months of endless pain may be averted – not to mention the endless dollars necessary for medication and medical procedures and the dollars spent on Worker's Compensation and Medical Disability. Are you listening insurance industry?

C.R., low back pain victim

I've spent more than twenty years in a profession that is so misunderstood, not only by its own (PTs), but by all other medical professionals, insurance companies and through them - the public.....

Knowing how to systematically evaluate and treat non-specific low back pain, educating patients and involving them in the process of helping them to help themselves, understanding pain patterns and knowing when conservative care is sufficient and when it has been exhausted, all this and more are introduced in Dr Donelson's book.

J.R., physical therapist

Low back pain is one of the most common causes of visits to family doctors. One in eight adults will experience an episode of low back pain in a lifetime. And yet, there are a bewildering array of treatments available. How is one to make sense of the options? In Rapidly Reversible Low Back Pain, Dr. Donelson has written a superbly readable guidebook. He looks at the latest scientific evidence with fresh insight and writes in a clear and compelling style, with special emphasis on evaluating the method of back care known as the McKenzie method.

The McKenzie method, practiced worldwide, has attracted the most scientific scrutiny of any form of non-surgical back care. Dr. Donelson, an orthopedic surgeon and McKenzie method specialist, is uniquely qualified to discuss the benefits and risks of the various back care options. Who should read this book? Anyone who suffers with significant lower back pain (with or without leg pain) and anyone who pays for the treatment of such conditions.

M.M., chiropractor

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This was a brilliant book. Although I have read the McKenzie Texts cover to cover, it is only through the information in this book that I now truly understand the research and guideline dilemmas that exist in LBP management. In turn, I understand why it is taking so long for MDT to be more widely accepted, and how approaches lacking any significant evidence have been able to flourish, in particular, related to the field practice of manual therapy and alternative treatment approaches, never mind the pervasiveness of surgical intervention, etc. You have also presented some innovative ways of trying to spread the word and make MDT more accepted.

A. M., physical therapist

This is a book that should be read by everyone involved in low back pain care. Dr. Donelson uses great analogies to question past research methodologies and has compiled all the evidence that supports Mechanical Diagnosis and Therapy (MDT) in an easy to read format. Insurance companies and employers involved in paying into the \$90 billion a year low back dilemma should be particularly aware of the lack of evidence for very expensive and often ineffective diagnostic testing and treatments. Donelson's analogy of how these costs could be significantly reduced simply by using MDT as a presurgical gold standard is enlightening.

The study cited in Denmark was quite impressive by showing the reduction in surgical rates by two thirds when simply utilizing MDT. For our patients, this book will allow them to make informed decisions regarding low back care. With "centralization" and "directional preference" occurring in 75 - 85 % of individuals with low back and leg pain, and 50% with chronic low back pain why would you not demand that this be your first course of treatment?

For Physical Therapists who are not trained in MDT, this an excellent reason to begin training. Very often physical therapists are looking for studies to support what they do and they are often frustrated by the lack of valid research. Donelson's book is an almanac of relevant literature and scientific studies that confirm the importance of Mechanical Diagnosis and Therapy.

For those of us who have received the advanced training in MDT, it is a wonderful read as it validates what we see in the clinic on an everyday basis. I am personally very appreciative of the effort that has gone into this book. It is an excellent reference book that helps explain to industry, insurance carriers, referral sources, and patients that what we do as clinicians not only produces extremely good results with minimal expense but has a wealth of scientific data to support it as well.

J.M., physical therapist

Recent posts held on the MDT listserv (<http://groups.yahoo.com/group/McKenzieStudy>)

This book is a refreshing insight into the management of LBP. Although the term a "must read" is a cliché, it absolutely applies to this book. Having purchased this book last week, I finished reading it within 4-5 days. Although I am not a credentialed therapist, perhaps my comments of this book may not hold much weight. Having only graduated from physiotherapy schooling less than 3 years ago, perhaps I have not the experience to persuade anyone to purchase and read this book. *Continued on pg 4*

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What I do know, however, is that I have experienced hardships of being misunderstood in the way I practice and use MDT. My attempt to convince a group of local doctors about MDT turned out to be an almost complete failure which eventually resulted in me having to leave my job. Above all things, my "passion for McKenzie and inability to use other forms of treatment" (as stated by my manager at that time) was likely the main reason in me having to leave. Within such a comment lies the misunderstanding of what MDT really is. There is no doubt that this book would have been a great help to me then.

What I enjoyed is the book's simplicity and how Dr. Donelson presents the literature in such an understandable way. By reading with an open mind and open ear, it becomes easier to see the importance of sub-classification. The problem with managing LBP is not with finding the best treatment, but with finding a way to validate and subgroup those with non-specific LBP (this is described by the Assessment-Diagnosis-Treatment-Outcome model in the book).

What a marvelous revelation! I knew there was something unique about the MDT method, when I started using it two years ago, that caused me to almost abandon any other form of assessing and treating. And even after having completed courses A thru D, I am almost ashamed to say that I still needed Dr. Donelson's book to reveal to me how MDT evolved and what it is truly all about.

So this I say to the proverbial elephant in the room, "You can't hide from me anymore. The curtains have been lifted, the veils have been removed, and I can see you."

Sean Gupta, PT

Thanks for a superbly readable book. I have read it twice. Its concepts are powerful and easy to convey in a presentation. I have done two presentations using your material, one to a family practice group and another to a Workers Comp managed care group of physicians. The two groups had slightly different needs, but I found ample material from your work to tailor each talk to their specific interests and needs. In addition, one of the family docs referred a patient to me whom I treated with MDT. The result was rapid reversal of LBP and antalgia, such that he was able to play an important golf tournament after 3 treatments. Turns out he was the president of a large employer's health management system. He was quite curious about the McKenzie method and I gave him a copy of your book. He read it in one weekend, and he says he would like to meet in the near future about corporate back care strategies.

Rapidly Reversible Low Back Pain has enabled me to take my McKenzie training to a higher conceptual level. Grasping the bigger picture has given me additional confidence in using MDT as well as a greater ability to explain it whenever I can. Thanks again for an outstanding contribution to back care.

Mitch Miglis, DC, Cert MDT