

## **Antidepressants for non-specific low back pain**

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#### FROM ABSTRACT

##### Background

Antidepressants are commonly used in the management of low-back pain. However, their use is controversial.

##### Objectives

The aim of this review was to determine whether antidepressants are more effective than placebo for the treatment of non-specific low back pain.

##### Search strategy

Randomised controlled trials were identified from MEDLINE and EMBASE.

##### Selection criteria

We included randomised controlled trials that compared antidepressant medication and placebo for patients with non-specific low back pain.

##### Main results

Ten trials that compared antidepressants with placebo were included in this review.

The pooled analyses showed no difference in pain relief or depression between antidepressant and placebo treatments.

##### Authors' conclusions

There is no clear evidence that antidepressants are more effective than placebo in the management of patients with chronic low back pain.

#### THESE AUTHORS ALSO NOTE:

"Low-back pain is a common condition affecting up to 80% of adults over their lifetime."

"In the vast majority of cases, low-back pain has no identifiable cause and is termed 'non-specific'."

"Up to 30% of individuals who report low-back pain go on to have recurrent or persistent symptoms. As a result, low-back pain is one of the most common reasons for medical visits and it results in huge economic losses across developed nations because of reduced productivity, work absence and early retirement."

All patients in the studies reviewed for this article had low back pain as a primary complaint.

“The review could find no convincing evidence that antidepressants relieve back pain or depression more effectively than placebo.”

“Antidepressants did not result in any other apparent benefits in the treatment of back pain.”

Antidepressant medication has been used in the management of patients with low-back pain for many decades.

Studies in the United States show that up to 23% of primary care physicians prescribe antidepressants for low-back pain.

“This review indicates that there is currently no clear evidence to support the prescription of antidepressants in the treatment of low-back pain.”

“Our conclusion, that there is no clear evidence that antidepressants reduce pain, depression or functional status in patients with chronic low-back pain.”

Adverse effects from taking antidepressants included dry mouth, constipation, tachycardia, sedation, orthostatic hypotension and tremor, and were commonly reported.

“The current review is the most up-to-date, high quality meta-analysis on antidepressants and has included all available randomized controlled trials. We found no clear evidence to support the clinicians’ prescription of antidepressants in reducing pain and depression for patients with chronic low-back pain.”

#### KEY POINTS FROM DAN MURPHY

- 1) Although antidepressants are commonly used in the management of low-back pain, this current, most up-to-date, high quality meta-analysis found no evidence that they offer any benefit.
- 2) “There is no clear evidence that antidepressants are more effective than placebo in the management of patients with chronic low back pain.”
- 3) “Low-back pain is a common condition affecting up to 80% of adults over their lifetime.”
- 4) “In the vast majority of cases, low-back pain has no identifiable cause and is termed ‘non-specific’.”

- 5) "Up to 30% of individuals who report low-back pain go on to have recurrent or persistent symptoms. As a result, low-back pain is one of the most common reasons for medical visits and it results in huge economic losses across developed nations because of reduced productivity, work absence and early retirement."
- 6) Studies in the United States show that up to 23% of primary care physicians prescribe antidepressants for low-back pain.
- 7) "This review indicates that there is currently no clear evidence to support the prescription of antidepressants in the treatment of low-back pain."
- 8) "Our conclusion, that there is no clear evidence that antidepressants reduce pain, depression or functional status in patients with chronic low-back pain."
- 9) Adverse effects from taking antidepressants included dry mouth, constipation, tachycardia, sedation, orthostatic hypotension and tremor, and were commonly reported.
- 10) "The current review is the most up-to-date, high quality meta-analysis on antidepressants and has included all available randomized controlled trials. We found no clear evidence to support the clinicians' prescription of antidepressants in reducing pain and depression for patients with chronic low-back pain."