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I) Lower back pain: a biopsychosocial disease

When one looks at the biopsychosocial model of disease, we realize that biopsychosocial is a construct, not an actual model which can be measured and tested. Nevertheless, the biopsychosocial construct offers key insights into lower back pain and a good deal of clinical research has evolved from this theory. Given the failure of the biomedical model to adequately describe/define lower back pain, the biopsychosocial construct has risen out of necessity to provide a framework for understanding back pain. The real challenge may not be in disseminating this information, but in using this information to change

physician behavior. A novel solution used in Australia was to engage in a multi-media campaign to educate the public at large about appropriate management of lower back pain and then let the public help to drive physician behavior.

Jacobs, G. Biopsychosocial perspective on back pain: patient provider communications. J Min Invasive Spinal Tech. 2003 Vol 3.

II) ACOEM recommendations for chronic pain.

The American College of Occupational and Environmental Medicine have released their most recent version of chronic pain guidelines. The evidence based guidelines were developed by a multidisciplinary expert panel and included over 1,500 references. With reference to chronic neck or back pain the guidelines suggest:

-A brief course of manipulation/mobilization which also includes instruction in aerobic and strengthening exercises

-These recommendations were also included for recurrent episodes of neck

and lower back pain and for cervicogenic headaches.

The ACOEM occupational medicine practice guidelines.

B. Office News

The doctors of Shoreline Spine & Pain Associates were recently recognized by the **National Committee for Quality Assurance (NCQA)** for providing superior care to patients suffering from low back pain.



NCQA is a private, non-profit organization dedicated to improving health care quality. NCQA accredits and certifies a wide range of health care organizations and recognizes physicians in key clinical areas.



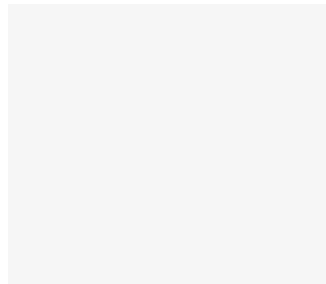
“Specializing in the evaluation, treatment, and rehabilitation of musculoskeletal conditions.”

C. Question of the month

What is functional restoration?

Functional restoration begins with functional assessment, a thorough screening of the locomotor system looking for structural/functional weak areas. The initial screen is to look for movements and positions which reproduce the patient's pain. The second part of the screen is to evaluate the patient's functional capacity – are certain movements or positions restricted? The functional assessment then becomes the basis for a treatment program of

functional restoration – returning the patient to their baseline status in the most pain free state possible, utilizing patient goals and as much as possible, self care.



D. Contact Us

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Please be aware that Drs. Coulis and Furtado are available to give a 20 minute lunchtime presentation on how a medical

physician can best collaborate with a chiropractor. They are also available to give 45 minute grand round type lectures on Introduction to Chiropractic and Non-Surgical Management of Lower Back Pain. Please contact our office to schedule either Dr. Coulis or Dr Furtado to come to your office.

If you would like some additional literature about our office and the services we

provide, please contact our office and request our Introduction to the Shoreline Spine & Pain Associates package.