We’ve Got Your (Low) Back
Collaborative Partnership Between Family Physicians and Chiropractors

Aim Statement
- Improve access to and care for patients with low back pain (LBP) in the community.
- Implement collaborative partnership between family physicians and chiropractors in the care for patients with LBP

Context
Musculoskeletal (MSK) disorders account for more than 27% of ambulatory physician visits in a given year. Low back pain is the most common MSK disorder and is the leading cause of short-term and long-term disability worldwide.
- More than one million British Columbians visit their chiropractor each year.
- Most common type of MSK pain experienced was low back pain (62%)

Respondents to a national survey found that chiropractic care helped with their muscle and joint pain, and reduced need for pain medication. However many face hurdles in seeking non-pharmaceutical options and often turn to painkillers as a first step.

First Line Therapy for MSK Pain
72% of BC respondents indicate they have taken medication (either over the counter or prescription as a front-line therapy for MSK pain

Barriers to seeking non-medication alternatives

The Problem
Pain is real, complex and can be difficult to manage. Chronic pain can adversely affect an individual’s ability to carry out daily activities, work productively, and maintain family commitments.

Referrals to community-based providers are not commonly chosen as first option for MSK conditions.
Conservative care options, like manual therapies for back pain, generally fall outside the publicly-funded system, making access challenging for many people – particularly in vulnerable and marginalized populations.

Opioids have emerged as one of the main interventions used to manage chronic, non-cancer pain, with back pain being one of the leading reasons.

In BC, 41% of patients with long-term opioid prescription had low back pain as a co-morbidity

Trends in dispensing of all opioids in BC by income quintile (Q1=lowest, Q5=highest), 2005-2013

The new 2017 Canadian guideline for opioid therapy and chronic non-cancer pain recommends optimization of non-pharmacological and non-opioid pharmacotherapy rather than a trial of opioids. First-line options for the management of back pain and other MSK conditions, such as chiropractic care, offer a safe, effective, non-invasive alternative to opioids.

Conclusions
Family physician practices will continue to experience great pressure for appointments and this is expected to be exacerbated in future with increased retirement of family physicians from the full service primary care workforce.
As team-based care becomes more well-established in the primary care sector, chiropractors are ideally positioned to play a key role in the management of MSK disorders, which will become increasingly prevalent with a growing and aging population.

Immediate Impact
Referrals include all low back pain patients, except WorkSafeBC and ICBC claims.
- Family physicians are very busy, and initially, the referral rates have been quite low.
- Some chiropractors reported that they had capacity to take a greater number of patients from referrals than were initially made.

Measurement of Improvement
Clinical outcomes measures include the numeric rating pain scale and the Oswestry composite score (measuring level of functional ability). These clinical scores are collected at the initial visit, and the first visit of every month for the duration of the project. Clinical outcomes are monitored in real-time using tracking spreadsheets.

Oswestry Composite Score
Numeric Pain Scale

Note: Data is presented as 100% stacked bar chart, with missing values indicated. Data from project is not yet available - sample data presented here is for illustration purposes only

Economic aspects will be evaluated by measuring changes in utilization, including referral rates and prescribing rates.
Qualitative evaluation surveys will be used to measure family physician satisfaction and professional relationships and assess inter-professional communication and shared responsibilities for LBP patient care and management.

Strategy for Change
As health care in BC shifts to a more integrated system of care, the BC Chiropractic Association is undertaking a partnership initiative to support collaboration between family doctors and chiropractors in a patient medical home setting.
Family physicians are very busy and despite the many initiatives to increase access, there are still many unattached patients in BC, resulting in great pressure for access to physician appointments.
Chiropractors represent a resource that is available in every community in BC: they are trained in the diagnosis, treatment and prevention of MSK disorders and are uniquely positioned to address the MSK patient population.

References