WIP-0452 LOOKING FOR CHRONIC NECK PAIN RESPONDERS TO PHYSICAL THERAPY MULTIMODAL TREATMENT

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Objectives: This study aimed to identify predictors of short-term functional recovery in chronic neck pain (CNP) patients undergoing a multimodal physical therapy (PT) treatment.

Methods: A prospective cohort study with 112 CNP patients referred to PT treatment. Patients were assessed at baseline and 7-weeks after starting a multimodal PT treatment. Sociodemographic and clinical characteristics at baseline were included as potential outcome predictors. Based on a previous study, functional recovery was defined as a change in the Neck Disability Index of ≥ 6 (minimal clinically important difference). Logistic regression (backward conditional) was used to find associations between predictors and functional recovery ($p < 0.05$). The multivariate model was submitted to a clusters analysis, highlighting the post-test probability of functional recovery after treatment.

Results: Of the 112 participants enrolled, 108 completed the follow-up (mean age: 51.76 ± 10.19). 58 patients reported functional recovery, and 50, treatment failure (pre-test probability: 54%). In the multivariate model, functional recovery was associated with high levels of disability at baseline (OR = 1.123; 95% CI 1.056–1.194) and pain duration for less than 12 months (OR = 2.704; 95% CI 1.138–6.424). For a positive likelihood ratio of 3.57, the probability of obtaining

functional recovery increases from 54 to 81% in the presence of these two predictors at baseline.

Conclusion: CNP patients with a score higher than 19 on NDI-PT and with pain complaints for less than 12 months at baseline are more likely to benefit from a multimodal PT treatment to achieve functional recovery.