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P75-PAIN TREATMENT (CONSERVATIVE): PHYSIOTHERAPY**Abstract: 714****SUCCESSFUL PAIN RELIEF IN CHRONIC LOW BACK PAIN PATIENTS UNDERGOING MULTIMODAL PHYSIOTHERAPY ARE ASSOCIATED WITH AN EARLY RESPONSE TO TREATMENT**

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Background and aims: Recent studies with non-specific chronic low back pain (CLBP) patients suggest that an early response to treatment might be a relevant prognostic indicator of a successful response to physiotherapy treatment. This study aimed to investigate the prognostic value of an early clinically important change, defined as a decrease in pain intensity of $\geq 30\%$ in the first two weeks of treatment, on the achievement of a successful response to physiotherapy treatment.

Methods: A prospective cohort study was conducted on 102 consecutive CLBP patients (>12 weeks' duration) undergoing a multimodal physiotherapy treatment. All participants were assessed at baseline and at 3-months follow-up. A successful response to physiotherapy treatment was determined by a decrease of $\geq 50\%$ in the Numeric Pain Rating Scale comparing to the baseline score. The association between an early clinical relevant change ($\geq 30\%$) in pain intensity in the first two weeks of treatment and an improvement of $\geq 50\%$ at 3-months follow-up was modeled with logistic regression.

Results: After adjusting for age, sex, pain duration, pain medication, kinesiophobia, depressive symptoms, catastrophization and pain intensity and disability scores at the baseline, the odds ratio for early response to treatment was 5.45 (95% CI: 1.83 to 16.24). Participants who had a pain relief $\geq 30\%$ in the first two weeks of treatment were 445%, more likely to achieve an important benefit from pain compared with those without this characteristic.

Conclusions: Early response to treatment may help clinicians to recognize CLBP patients more likely to experience poor outcomes and adjust their treatment.