Overview of
COST EFFECTIVENESS and EFFICACY Associated With Chiropractic Care

Highlights from a Research Reference Review prepared by the International Chiropractors Association Council on Applied Chiropractic Sciences

THE CHIROPRACTIC PROFESSION HOLDS A UNIQUE ABILITY TO SIGNIFICANTLY REDUCE THE COSTS OF HEALTH CARE:

As primary contact providers to patients of all ages, the chiropractic profession, through its focusing primarily on (but not limited to) care of neuro-musculo-skeletal disorders, has the unique ability to effectively address corrective care with many of the health concerns relating to the most costly conditions afflicting our communities — including low back pain, neck pain, headaches, and other issues.

Research in a growing assortment of health care studies demonstrates that when we encourage conservative care of health concerns, utilizing chiropractic’s unique interventions, it will, among other benefits, help offset the main cost drivers (drugs, surgery, and hospital-based rehabilitation) that tend to be predominantly emphasized and promoted in our current healthcare system.
Highlighting Benefits of Care and Improved Outcomes with Cost-Effectiveness:

United Kingdom Back Pain, Exercise and Manipulation Randomized Trial: Cost Effectiveness of Physical Treatments for Back Pain In Primary Care.


A comparison was conducted that compared the benefits of spinal manipulation and exercise to “best care” in general practice and showed these approaches to be cost-effective additions. Out of a population of 1,287 patients consulting for back pain divided into treatment groups, after following them for over one year, those patients receiving manipulation alone and manipulation combined with exercise had lower relative treatment costs and experienced more treatment benefits compared to those treated with general medical care.

Primary Care - Cost Effectiveness of Physiotherapy, Manual Therapy and General Practitioner Care for Neck Pain: Economic Evaluation Alongside a Randomized Controlled Trial.


This study reports the ratings of patients for their intensity of pain, functional disability and perceived recovery while receiving either “manual therapy” (spinal mobilization), “physiotherapy” (mainly exercise) or “general practitioner care” (counseling, education and drugs). The ratings indicated spinal mobilization, or manual therapy as the most effective approach for neck pain. The clinical outcome measures indicated faster recovery for spinal mobilization/manual therapy than the physiotherapy and general practitioner care categories. In addition, the costs of care for the spinal mobilization/manual therapy patients ranged around one-third of the physiotherapy and general practitioner patient groups.

A Randomized Clinical Trial Comparing Chiropractic Adjustments to Muscle Relaxants for Sub-Acute Low Back Pain.


This randomized clinical trial compared chiropractic adjustments with muscle relaxants and placebo/sham care for sub-acute low back pain (duration two to six weeks’ time). The study found chiropractic adjustments to be more beneficial than placebo in pain reduction, and more beneficial than either placebo/sham or muscle relaxant findings. The researchers compared the relative efficacy of chiropractic adjustments with muscle relaxants and placebo/sham for sub-acute low back pain (two- to six-weeks duration). Utilizing a Global Impression of Severity (GIS) scale, they found chiropractic was more beneficial than placebo in reducing pain and more beneficial than either placebo or muscle relaxants.

Chronic Spinal Pain - A Randomized Clinical Trial Comparing Medication, Acupuncture and Spinal Manipulation.


This study assessed patients with chronic lower back pain of at least 13 weeks duration who were randomly grouped for medication, needle acupuncture or spinal manipulation. The manipulation group experienced greater short-term improvement compared to acupuncture or medication. These patients also reported a much higher full recovery rate (27%) than either those receiving acupuncture (9%) or medication (5%).

Cost Comparison of Chiropractic and Medical Treatment Of Common Musculoskeletal Disorders: A Review Of The Literature After 1980.


In the course of reviewing a series of studies, the comparison of costs between care provided by Doctors of Chiropractic and care provided by either general medical doctors or specialists involving individuals with musculoskeletal conditions indicated that there was a significant finding of positive results and cost-effective findings for those patients undergoing chiropractic care.
Highlighting Cost Effectiveness Features of Chiropractic Care:

Costs And Recurrences Of Chiropractic And Medical Episodes Of Low Back Care.
A comparison study relating patterns of patient utilization and health insurance payments found a significant and positive difference for individuals suffering from recurring low back pain who visited doctors of chiropractic. For medically initiated interventions, insurance payments were higher; patients undergoing care with chiropractors incurred lower costs and also reported greater satisfaction with the care provided. The authors of the study indicated employers utilizing gate-keeper strategies should carefully consider the benefits of chiropractic care.

Economic Case for the Integration of Chiropractic Services into the Health Care System.
A series of studies demonstrating the effectiveness of chiropractic care for neuromusculoskeletal disorders, including data showing patients often prefer chiropractic care to taking a medical approach, provides context to the discussion over anticipated benefits of integrating chiropractic care -- including reduced costs and improved outcomes -- into the health care system.

The Economic Role of Chiropractic- Further Analysis of Relative Insurance Costs for Low Back Care.
Comparison of costs of care for common low back conditions in this retrospective study indicated that total payments for inpatient procedures were higher for medical doctor-initiated care, especially for episodes that lasted longer than a single day. Outpatient payments were much higher for medical doctor-initiated treatments as well. The statistical analysis of the findings noted that out of 7077 patients in the study, payments were nearly twice as great for the medically initiated cases and their outpatient payments were nearly 50% higher. The conclusion reached noted that, based on costs of care for common low back disorders using a chiropractor as first-contact provider, the use of chiropractic care could help control health care spending.

Chiropractic And Medical Costs Of Low Back Care.
Stano M, Smith M. Medical Care 1996; 34(3): 191-204.
This review of insurance claims data covering a two-year period compares health insurance payments and patient utilization patterns for common lumbar and low back conditions treated by doctors of chiropractic and medical providers. The researchers reported that out of the patient episodes with a medical first-contact provider, the total insurance payments were substantially greater for medical providers than for a chiropractic first-contact provider. Out of the 6,183 patients in the study, the mean total payment was $518 when doctors of chiropractic were the first providers, in contrast with the mean total payment of $1,020 in cases involving a medical doctor as first provider.

Comparative Analysis Of Individuals With And Without Chiropractic Coverage.
Analysis of the cost effects of inclusion of chiropractic in HMO insurance plan benefits in a four-year retrospective review. Data drawn from claims for 1.7 million health plan members indicated that members with a chiropractic benefit had lower overall total annual health care costs. In a particular clinical focus area, there were especially notable differences for patients undergoing care for back pain: patients with chiropractic coverage showed lower utilization of plain radiographs, MRI studies, low back surgery, and hospitalizations. Overall the back pain episode-related costs were reported 25% lower for those with chiropractic coverage.
Cost minimization analysis of low back pain claims data for chiropractic vs medicine in a managed care organization.


Differences in allowed cost for managing low back pain in an integrated care environment were assessed for medical providers and chiropractors. The cumulative health care costs experienced during the two years of the study indicated that the management of back pain, when care extends beyond primary care, was less expensive for chiropractic management than with medical management.

**Do Chiropractic Physician Services for Treatment of Low Back and Neck Pain Improve the Value of Health Benefit Plans? An Evidence-Based Assessment of Incremental Impact on Population Health and Total Health Care Spending.**


This report assesses studies of chiropractic care in relation to the cost-effectiveness of providing chiropractic insurance coverage. While it finds that cost-effectiveness of chiropractic care is advantageous but remains incompletely evaluated in the US, it notes that in the process of comparing effectiveness and cost with low back pain and neck pain, chiropractic care is found to be very cost-effective.

**Cost of Care for Common Back pain Conditions Initiated with Chiropractic Doctor vs. Medical Doctor/Doctor of Osteopathy as First Physician: Experience of One Tennessee-Based General Health Insurer.**


This retrospective claims analysis reviewed episodes of care for low back pain, with paid claims and risk adjusted costs for care initiated with DC providers compared with MD/DO providers. Lower overall episode costs of low back pain care was reported if the patient initiated care with a DC. The paid costs for care were almost 40% less than with medical care and even after risk adjusting each patient’s costs, the episodes of care with a DC were 20% less expensive.

**Clinical Utilization and Cost Outcomes From an Integrative Medicine Independent Physician Association: An Additional 3-Year Update**


This update study includes revisiting and refreshing an Alternative Medicine Integration Study conducted several years earlier and reports that records over seven years with an even larger population than originally reported were analyzed for clinical and cost utilization in the same health maintenance organization and showed significant decreases in care and costs with non-conventional approaches to care, including chiropractic. The utilization of nonsurgical/nonpharmaceutical approaches such as chiropractic care showed decreases of 60.2% in-hospital admissions, 59.0% hospital days, 62.0% outpatient surgeries and procedures, and 85% pharmaceutical costs when compared with conventional medicine.

The Council on Applied Chiropractic Sciences is an international specialty council that is committed to enhancing clinical excellence, cultivating educational growth, and expanding communication and networking resources to better serve and enrich the capability of the doctor of chiropractic and the capacity of the chiropractic profession to provide optimal care to patients of all ages, everywhere in the world.