



Letter to the Editor

Response to Letter to the Editor re Patient and public beliefs about the role of imaging in the management of non-specific low back pain: a scoping review

Dear Editor,

We thank the authors of this letter for their interest in our review of patient and public beliefs about imaging for low back pain (LBP).

Our review [1] identified that there is a lack of evidence regarding patient and public beliefs about imaging in LBP, particularly more up to date evidence examining modern imaging techniques such as MRI. We concluded that studies from more contemporary practice are needed to update this information.

It was not within the scope or intention of this review to examine whether the use of imaging is appropriate for the management of LBP. In the UK, clinical practice guidelines do not recommend imaging apart from in interface or hospital settings where findings may change management [2]. NICE uses only high-quality evidence when developing guidelines. Multiple international guidelines make similar recommendations. Therefore, imaging is not currently recommended for the large majority of patients with LBP that are classified, according to these guidelines, as non-specific.

The recommendation from our study is that more evidence is needed on the way patients and the public perceive imaging. The authors of this letter make a different point that imaging may be useful in some patients with non-specific LBP, but this position is not currently supported by the recommendations of multiple national guidelines.

References

- [1] Taylor S, Bishop A. Patient and public beliefs about the role of imaging in the management of non-specific low back pain: a scoping review. *Physiotherapy* 2020;107:224–33.
- [2] NICE. *Low back pain and sciatica in over 16s: assessment and management*; 2016.

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Available online at www.sciencedirect.com

ScienceDirect

DOI of original article: <https://doi.org/10.1016/j.physio.2020.08.004>.

<https://doi.org/10.1016/j.physio.2020.08.005>

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