

## **Clinical Pilates for the management of chronic low back pain: a randomised controlled trial**

**Objective:** Clinical Pilates has entered mainstream physiotherapy practice as a popular choice of exercise therapy for CLBP, but the evidence base is marginal. A six-week clinical pilates program was compared with a general exercise program on outcomes such as back disability, pain and function in adults with CLBP.

**Methods:** 87 (39 M, 48 F) adults aged 18 – 70 were assessed at baseline by a blinded outcome assessor and randomised to clinical pilates or general exercise groups. Both groups had exercise programs prescribed by a project physiotherapist and attended supervised group sessions for one hour twice weekly for 6 weeks. The clinical pilates group received an individualized program. The general exercise group were all given the same exercises. Both groups were given home exercises. The primary outcome was back pain/disability, measured with the Quebec Back Pain Disability Questionnaire. Secondary outcomes were pain, patient-specific function, pain self-efficacy, quality of life and global perceived effect of treatment. Participants kept a diary of home exercises, adverse events, change in medications or co-interventions. Data were analysed in blinded fashion after the intervention with independent t-tests using intention-to-treat.

**Results:** There were four withdrawals. For the Quebec score, both groups showed significant improvements, but there was no significant difference between the groups, the difference being -3.5 (95%CI -7.3, 0.3,  $p=0.07$ ) in favour of the clinical pilates group. The results were similar for the secondary outcomes.

**Conclusions:** An individualised, 6-week Clinical Pilates program is as effective as traditional, general exercises used by physiotherapists for the management of CLBP.