Botulinum toxin for subacute/chronic neck pain (2011)


COCHRANE BACK REVIEW GROUP
The best evidence in back and neck pain care

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Overview of the study

Objectives
• To systematically evaluate the literature on the treatment effectiveness of botulinum toxin (BoNT) for neck pain

Methods
• Evidence current up to 20 September 2010
• Participants: Adults with subacute or chronic neck pain*
• Intervention: BoNT intra-muscular injections
• Outcomes measured
  - Primary outcomes: pain relief, disability and function
  - Secondary outcomes: patient satisfaction, global perceived effect, quality of life

*neck pain without radicular findings, including non-specific neck pain of unknown etiology; mechanical neck pain, neck pain associated with myofascial pain syndrome, neck pain with degenerative change, and cervicogenic headache
Results & Conclusion

- 9 trials (530 participants) included:

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Evidence</th>
<th>Quality of evidence</th>
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</thead>
<tbody>
<tr>
<td>BoNT type A</td>
<td>Little or no difference in pain between the treatment and saline injections at four weeks and six months for chronic neck pain</td>
<td>High</td>
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<tr>
<td></td>
<td>Little or no difference between the treatment and placebo at four weeks and six months for chronic cervicogenic headache</td>
<td>Very low</td>
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<tr>
<td>BoNT-A combined with physiotherapeutic exercise and analgesics</td>
<td>Little or no difference in pain between the treatment and saline injection with physiotherapeutic exercise and analgesics for patients with chronic neck pain</td>
<td>Very low</td>
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</tbody>
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⇒ No evidence confirms either a clinically important or a strategically significant benefit of BoNT-A injection for chronic back pain associated with or without cervicogenic headache.