DEVELOPMENT OF A QUESTIONNAIRE FOR PATTERN DIFFERENTIATION OF CHRONIC LOWER BACK PAIN IN TRADITIONAL CHINESE MEDICINE

A Capstone Project

Presented to the

Faculty of Pacific College of

Oriental Medicine

In Partial Fulfillment

of the Requirements for the Degree of

Doctorate of Acupuncture and Oriental Medicine

---

by

Lauren M. Hayden, L. Ac

San Diego, 2015

ABSTRACT

INTRODUCTION: Chronic lower back pain (cLBP) is a common and costly reason for physician visits and a major health concern in Western industrialized societies. Diagnosis of cLBP by Traditional Chinese Medicine (TCM) is based on patterns of disharmony, which categorize groups of clinical manifestations. Current literature shows high inter-practitioner agreement on TCM diagnosis for combined patterns of cLBP; however, there is relatively poor consistency with sub-group pattern diagnosis. In addition, there is a lack of assessment tools for differentiating patterns of cLBP in terms of TCM.

PURPOSE: The objective of this study is to develop a questionnaire that will reliably differentiate the major patterns of cLBP in TCM.

METHODS: A review of TCM textbooks, peer-reviewed journal articles, and biomedical assessment tools were utilized to compile questions. The questionnaire was administered to Pacific College of Oriental Medicine San Diego (PCOMSD) patients with a chief complaint of cLBP. The questionnaire was analyzed with a scoring method based on textbook signs and symptoms. Pattern diagnosis based on questionnaire analysis was compared to the practical diagnosis of a PCOMSD clinic supervisor using the statistical measure Cohen's kappa.

RESULTS: Results from this study show the most common patterns of cLBP in TCM are Kidney deficiency, blood stasis in the channels, binding depression of Liver Qi, and cold-damp retention in the channels. Agreement between diagnoses by analysis of the questionnaire versus by practitioner was moderately poor (Kappa Value of 0.32). This result cannot verify the questionnaire as valid tool to diagnose cLBP in TCM. Lack of agreement may also be due to differences in practitioner background.

CONCLUSION: Since the questionnaire analysis did not have high agreement with practitioner

diagnosis the questionnaire can be modified to include a thorough systematic review as well as Likert scale responses to increase validity. This research may be applied in distance diagnosis and treatment of cLBP especially with regard to herbal prescription writing.

KEYWORDS: chronic lower back pain, Traditional Chinese Medicine, inter-practitioner agreement