**Table E9. Dat abstraction of systematic reviews of antidepressants for low back pain**

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| **Author, Year** | **Comparison** | **Databases Searched, Date of Last Search** | **Number and Type of**  **Studies** | **Interventions and Number of**  **Patients** | **Methods for Rating Methodological Quality of Primary Studies** |
| Urquhart, 2010 | Antidepressant vs.  placebo | MEDLINE, EMBASE,  PsycINFO and CCRCT  through November 2008 | 10 RCTs; 9 trials  conducted in pts with chronic low back pain; 1 trial duration of low back pain not reported. Duration of followup 10 days to 12 weeks. | A. Antidepressants (n=315):  paroxetine (3 studies); desipramine (3 studies); imipramine (2 studies); maprotiline (2 studies); fluoxetine  (2 studies); bupropion, trazodone, amitriptyline, nortriptyline and clomipramine IV (1 study each)  B. Placebo (n=252) | Cochrane Back Review  Group criteria (2003) |

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| **Author, Year** | **Methods for Synthesizing Results of Primary Studies** | **Results** | **Adverse Events** | **Quality** |
| Urquhart, 2010 | Random effects model assessing  standardized mean differences (SMD) | A vs. B  Pain (9 studies): SMD -0.04 (95% CI -0.25 to 0.17; I2=0%)  -Pain, SSRIs (3 studies): SMD 0.11 (95% CI -0.17 to 0.39; I2=0%)  -Pain, tricyclic antidepressants (4 studies): SMD -0.10 (95% CI -0.51 to  0.31; I2-32%)  Depression (2 studies): SMD 0.06 (95% CI -0.29 to 0.40) Functional status (2 studies): SMD -0.06 (95% CI -0.40 to  0.29) | Not reported | Good |

**Please see Appendix C. Included Studies for full study references.**