Evidenstabeller

Author(s): Inge Ris og Per Kjær
PICO 2: Stabilitetstræning for nakken sammenlignet med standard care for Cervical Radiculopathy

Quality assessment							№ of patients		Effect		Quality	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Motor Control Exercise	Standard Care	Relative (95% CI)	Absolute (95% CI)		
Pain (numeric rating scale/pain/neck pain) SMD (follow up: mean 3 weeks)												
3 (1-3)	randomised trials	serious 1,2	serious 5	serious 3,4	not serious	none	93	90	-	SMD **0.44 lower** (1.08 higher to 0.2 higher)	⨁□□□ VERY LOW	
Neck disability (Northwick Park Questionnaire/NDI) (follow up: mean 3 weeks)												
3 (1-3)	randomised trials	serious 1,2	serious 5	serious 3,4	not serious	none	93	90	-	SMD **0.93 lower** (2.03 higher to 0.16 higher)	⨁□□□ VERY LOW	

MD – mean difference, RR – relative risk

1. small study samples
2. uncertainty in completeness of data
3. differences in the interventions
4. differences in comparisons
5. Heterogeneity in studies (i squared 0>65%)

Author(s): Alice Kongsted og Per Kjær
PICO 4: Manual Therapy + Exercise compared to Exercise for Cervical Radiculopathy

Quality assessment							№ of patients		Effect		Quality	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Manual Therapy + Exercise	Exercise	Relative (95% CI)	Absolute (95% CI)		
Pain (0-10) - end week 3 (follow up: mean 4 weeks; assessed with: Numeric Pain Rating Scale)												
1 (2)	randomised trials	serious 1,2,3	serious 3	not serious	serious 3	none	10	10	-	SMD **0.49 higher** (0.4 higher to 1.39 higher)	⨁◯□□ VERY LOW	CRITICAL
Neck Disability Index - end week 3 (follow up: mean 4 weeks; assessed with: patient reported outcom)												
1 (2)	randomised trials	serious 1,2,3	serious 3	not serious	serious 3	none	10	10	-	MD **2.4 higher** (3.17 higher to 7.97 higher)	⨁□□□ VERY LOW	CRITICAL

MD – mean difference, RR – relative risk

1. Small study sample
2. Missing data not reported
3. Large confidence intervals

Author(s): Jesper Nørregaard og Per Kjær
PICO 9: Physiotherapy/Exercise/ + traction compared to Physiotherap/exercise/sham for cervical radiculopathy (tow studies not in evidense table[4,5])

Quality assessment							№ of patients		Effect		Quality	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Physiotherapy/Exercise/ + traction	Physiotherap/exercise/sham	Relative (95% CI)	Absolute (95% CI)		
NPRS (0-10) - 4 weeks												
2 [6,7]	randomised trials	serious [1]	serious [2]	not serious	serious [3]	none	96	58	-	MD **0.44 lower** (1.45 higher to 0.56 higher)	⨁□□□ VERY LOW	Critical
NDI (0-50) - 4 weeks												
2 [4,5]	randomised trials	serious [1]	serious [2]	not serious	serious [3]	none	96	58	-	SMD **0.04 lower** (0.36 higher to 0.29 higher)	⨁□□□ VERY LOW	Critical

MD – mean difference, RR – relative risk

1. Small study samples
2. Difference in application of intervention
3. Conflicting evidence

References

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