

NKR 30 PICO 1 Fysisk aktivitet

Characteristics of studies

Characteristics of included studies

Hofstee 2002

Methods	<p>Study design: Randomized controlled trial</p> <p>Study grouping: Parallel group</p> <p>Open Label: YES</p> <p>Cluster RCT:</p>
Participants	<p>Baseline Characteristics</p> <p>Rest Advice Exercise</p> <p>Included criteria: radicular pain had to be of less than 1 month's duration, and patients had to be younger than 60 years of age</p> <p>Excluded criteria: cauda equina syndrome or severe weakness (Medical Research Council grade < 3) or if they had previously undergone bed rest or physiotherapy or were unwilling to comply with one of the three treatment strategies</p>
Interventions	<p>Intervention Characteristics</p> <p>Rest Advice Exercise</p>
Outcomes	<p><i>Bensmerte</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Rygsmerte</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Funktionsevne</i></p>

	<ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Arbejdsevne (antal dage siden debut)</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Arbejdsevne (andel tilbage til arbejde)</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Arbejdsevne (andel m. Sygemelding)</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Neurologiske udfald</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Dropout</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Antal lumbale operationer</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Blodpropper</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"]
<p>Identification</p>	<p>Sponsorship source: not reported</p> <p>Country: The Netherlands</p> <p>Setting: outpatient clinic</p> <p>Comments:</p> <p>Authors name: Hofstee</p> <p>Institution: Departments of Neurology, Radiology, Neurosurge1y, and Physiotherapy, Medical Center Haaglanden,</p>

	<p>Westeinde, The Hague Email: DJ.Hofstee@StJansdal.nl Address: Derk J. Hofstee, M .D., Department of Neurology, St. Jansdal Hospital, P.O. Box 138, 3840 AC, Harderwijk, The Netherlands.</p>
Notes	<p><i>Birgitte Holm Petersen</i> on 10/08/2015 12:28 Intervention Characteristics There is no space for describing the interventions</p> <p><i>Birgitte Holm Petersen</i> on 10/08/2015 12:50 Continuous Outcomes Radicular leg pain on visual analog pain scale (VAPS) Quebec Disability Scale (QDS) Jeg har brugt change scores og SD fra baseline (selv om det er af to forskellige ting - ved ikke om man kan det?), men man kan også regne baglæns og rapportere mean i grupperne (her er problemet bare at bed rest gruppen scorer 5 point højere ved baseline). Men forfatterne angiver at data er noget skævfordelte ved opfølgningerne, så derfor er changes scores vel bedre?</p>

Risk of bias table

Bias	Authors' judgement	Support for judgement
Sequence Generation	Low risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)
Allocation concealment	Low risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)
Blinding of participants and personnel	High risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)
Blinding of outcome assessors	High risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)
Incomplete outcome data	Low risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)
Selective outcome reporting	Unclear risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)
Other sources of bias	Low risk	Judgement Comment: From Dahm 2010 (Cochrane Systematic Review)

Vroemen 1999

Methods	<p>Study design: Randomized controlled trial</p> <p>Study grouping: Parallel group</p> <p>Open Label: YES</p> <p>Cluster RCT:</p>
Participants	<p>Baseline Characteristics</p> <p>Rest Advice Exercise</p> <p>Included criteria: patients who presented with back pain radiating into one leg below the gluteal fold to the neurology department of Maastricht University/Hospital. Patients were eligible for the study if the intensity of pain was sufficient to justify two weeks of bed rest as therapy.</p> <p>Excluded criteria: previously undergone spinal surgery, were pregnant, had pending workers' compensation claims, were unavailable for follow-up (i.e., planned to move), or had severe coexisting illnesses.</p>
Interventions	<p>Intervention Characteristics</p> <p>Rest Advice Exercise</p>
Outcomes	<p><i>Bensmerte</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Rygsmerte</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Funktionsevne</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Arbejdsevne (antal dage siden debut)</i></p> <ul style="list-style-type: none"> ● Outcome type: ContinuousOutcome

	<ul style="list-style-type: none"> ● Measure names: ["Korttid (op til 12 uger fra baseline)", "Langtid (3-6 mdr.)"] <p><i>Arbejdsevne (andel tilbage til arbejde)</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Arbejdsevne (andel m. Sygemelding)</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Neurologiske udfald</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Dropout</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Antal lumbale operationer</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"] <p><i>Bloddropper</i></p> <ul style="list-style-type: none"> ● Outcome type: DichotomousOutcome ● Measure names: ["Op til 12 uger ", "op til 6 måneder", "indenfor 12 måneder"]
<p>Identification</p>	<p>Sponsorship source: Supported by Maastricht University and Maastricht University Hospital</p> <p>Country: The Netherlands</p> <p>Setting: Hospital, outpatient clinic</p> <p>Comments:</p> <p>Authors name: P ATRICK C.A.J. V ROOMEN</p> <p>Institution: Departments of Neurology and Radiology, Maastricht University Hospital; and the Departments of Methodology and Statistics and Family Practice, Maastricht University — both in Maastricht, the Netherlands</p> <p>Email: pvr@sneu.azm.nl</p> <p>Address: Dr. Vroomen at the Department of Neurology, Maastricht University Hospital, P. Debyealaan 25, P.O. Box 5800, 6202 AZ Maastricht, the Netherlands</p>

Notes	<p><i>Birgitte Holm Petersen on 10/08/2015 13:56</i> Baseline Characteristics Boxes to describe the interventions are lacking</p> <p><i>Birgitte Holm Petersen on 10/08/2015 13:57</i> Intervention Characteristics Boxes to describe the interventions are lacking</p>
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Risk of bias table

Bias	Authors' judgement	Support for judgement
Sequence Generation	Low risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review
Allocation concealment	Low risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review
Blinding of participants and personnel	High risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review
Blinding of outcome assessors	High risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review
Incomplete outcome data	High risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review
Selective outcome reporting	Unclear risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review
Other sources of bias	Unclear risk	Judgement Comment: Dahm 2010, Cochrane Systematic Review

Footnotes

Characteristics of excluded studies

Wilkinson 1995

Reason for exclusion	Wrong patient population
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*Footnotes***Characteristics of studies awaiting classification***Footnotes***Characteristics of ongoing studies***Footnotes***Summary of findings tables****Additional tables****References to studies****Included studies*****Hofstee 2002***

Hofstee,D.J.; Gijtenbeek,J.M.; Hoogland,P.H.; van Houwelingen,H.C.; Kloet,A.; Lotters,F.; Tans,J.T.. Westeinde sciatica trial: randomized controlled study of bed rest and physiotherapy for acute sciatica. 2002;96(1 Suppl):45-49. [DOI:]

Vroomen 1999

Vroomen,P.C.; de Krom,M.C.; Wilmink,J.T.; Kester,A.D.; Knottnerus,J.A.. Lack of effectiveness of bed rest for sciatica. 1999;340(6):418-423. [DOI:]

Excluded studies***Wilkinson 1995***

Wilkinson,M.J.. Does 48 hours' bed rest influence the outcome of acute low back pain? 1995;45(398):481-484. [DOI:]

Studies awaiting classification**Ongoing studies****Other references****Additional references****Other published versions of this review****Data and analyses****4 PICO****1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?**

Outcome or Subgroup	Studies	Participants	Statistical Method	Effect Estimate
4.1 Bemsmerete VAS (op til 12 uger)	2	421	Mean Difference (IV, Random, 95% CI)	-0.72 [-6.16, 4.73]
4.2 Rygsmerete VAS (op til 12 uger)	1	183	Mean Difference (IV, Fixed, 95% CI)	3.00 [-4.54, 10.54]
4.3 Funktionsevne (op til 12 uger)	2	421	Std. Mean Difference (IV, Random, 95% CI)	-0.03 [-0.23, 0.16]
4.4 Funktionsevne (3-6 md)	1	225	Mean Difference (IV, Fixed, 95% CI)	-2.31 [-8.90, 4.28]
4.5 Arbejdsevne (Median no. of days of work missed, 12 uger)	1	183	Mean Difference (IV, Fixed, 95% CI)	1.00 [-11.94, 13.94]
4.6 Arbejdsevne (andel tilbage til arbejde, 12 uger)	1	189	Risk Ratio (IV, Fixed, 95% CI)	1.01 [0.84, 1.21]
4.7 Dropout (op til 12 uger)	2	433	Risk Ratio (IV, Random, 95% CI)	1.23 [0.56, 2.71]
4.8 Antal lumbale operationer (op til 6 md.)	2	433	Risk Ratio (IV, Random, 95% CI)	0.89 [0.59, 1.36]
4.9 Blodpropper (op til 12 uger)	1	250	Risk Ratio (IV, Fixed, 95% CI)	0.17 [0.01, 4.12]

4.10 Neurologiske udfald (op til 12 uger)	0	0	Odds Ratio (M-H, Fixed, 95% CI)	Not estimable
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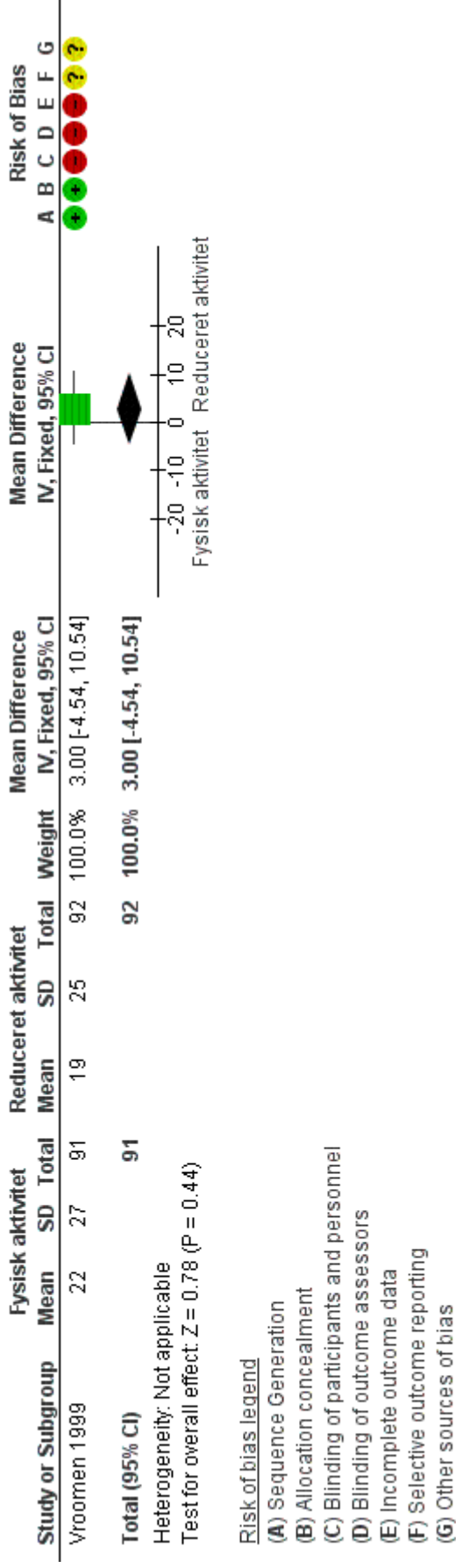
Figures

Figure 1

	Sequence Generation	Allocation concealment	Blinding of participants and personnel	Blinding of outcome assessors	Incomplete outcome data	Selective outcome reporting	Other sources of bias
Hofstee 2002	+	+	-	-	+	?	+
Vroomen 1999	+	+	-	-	-	?	?

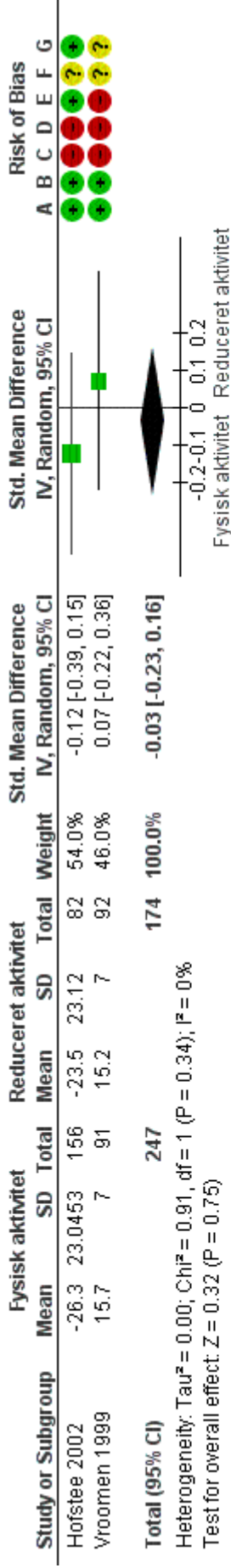
Risk of bias summary: review authors' judgements about each risk of bias item for each included study.

Figure 2 (Analysis 4.2)



Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.2 Rygsmerter VAS (op til 12 uger).

Figure 3 (Analysis 4.3)

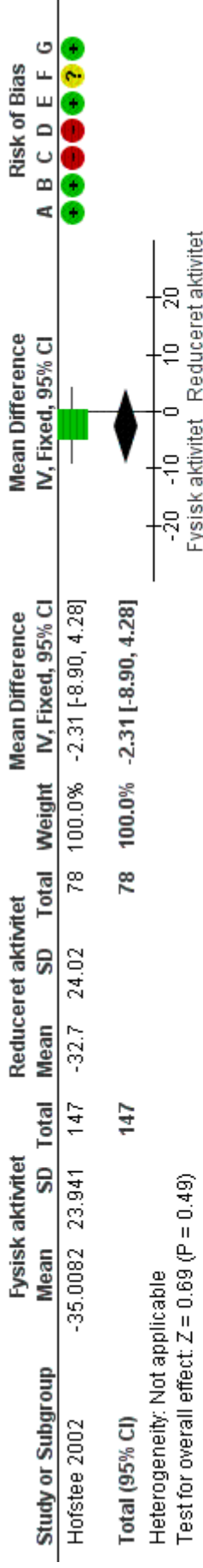


Risk of bias legend

- (A) Sequence Generation
- (B) Allocation concealment
- (C) Blinding of participants and personnel
- (D) Blinding of outcome assessors
- (E) Incomplete outcome data
- (F) Selective outcome reporting
- (G) Other sources of bias

Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.3 Funktionsevne (op til 12 uger).

Figure 4 (Analysis 4.4)

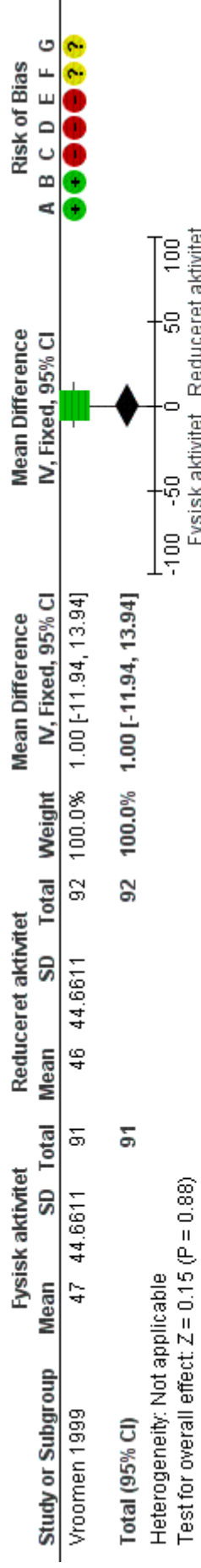


Risk of bias legend

- (A) Sequence Generation
- (B) Allocation concealment
- (C) Blinding of participants and personnel
- (D) Blinding of outcome assessors
- (E) Incomplete outcome data
- (F) Selective outcome reporting
- (G) Other sources of bias

Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.4 Funktionsevne (3-6 md).

Figure 5 (Analysis 4.5)

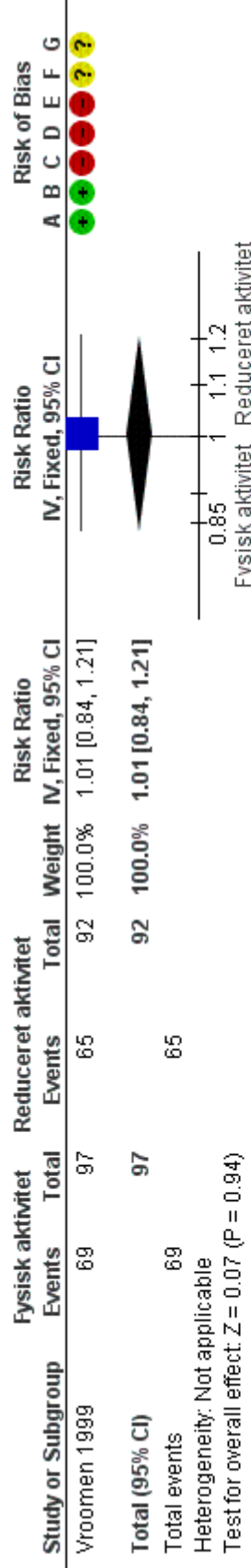


Risk of bias legend

- (A) Sequence Generation
- (B) Allocation concealment
- (C) Blinding of participants and personnel
- (D) Blinding of outcome assessors
- (E) Incomplete outcome data
- (F) Selective outcome reporting
- (G) Other sources of bias

Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.5 Arbejdsevne (Median no. of days of work missed, 12 uger).

Figure 6 (Analysis 4.6)

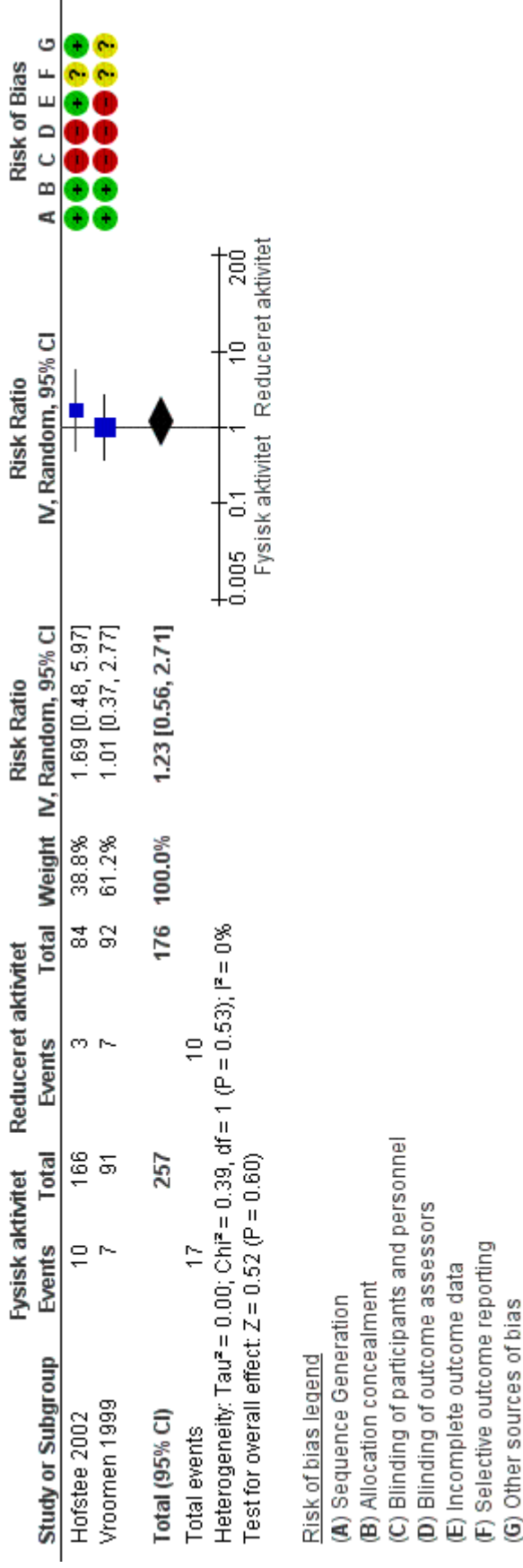


Risk of bias legend

- (A) Sequence Generation
- (B) Allocation concealment
- (C) Blinding of participants and personnel
- (D) Blinding of outcome assessors
- (E) Incomplete outcome data
- (F) Selective outcome reporting
- (G) Other sources of bias

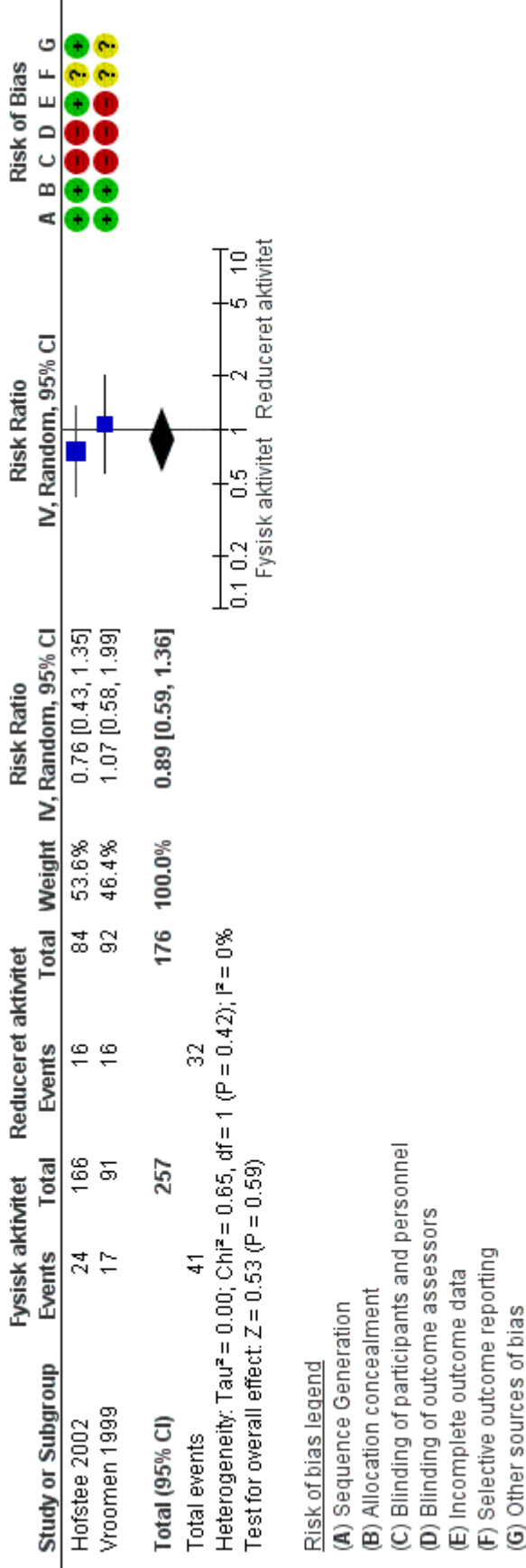
Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.6 Arbejdsevne (andel tilbage til arbejde, 12 uger).

Figure 7 (Analysis 4.7)



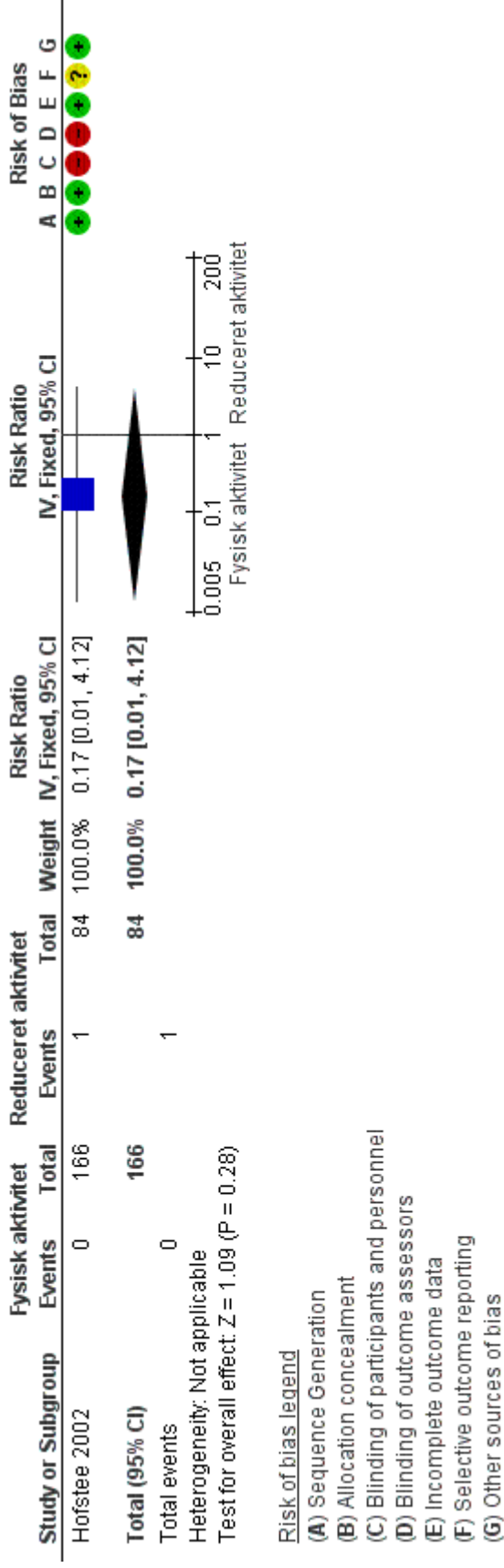
Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.7 Dropout (op til 12 uger).

Figure 8 (Analysis 4.8)



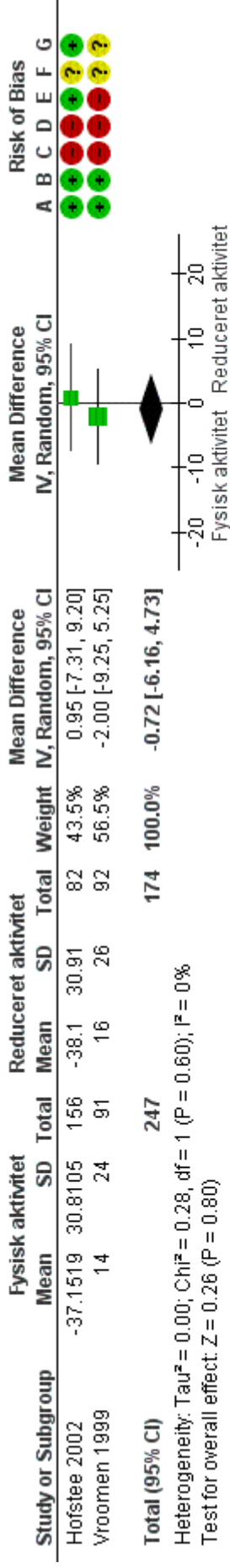
Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.8 Antal lumbale operationer (op til 6 md.).

Figure 9 (Analysis 4.9)



Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.9 Blodpropper (op til 12 uger).

Figure 10 (Analysis 4.1)



Risk of bias legend

- (A) Sequence Generation
- (B) Allocation concealment
- (C) Blinding of participants and personnel
- (D) Blinding of outcome assessors
- (E) Incomplete outcome data
- (F) Selective outcome reporting
- (G) Other sources of bias

Forest plot of comparison: 4 PICO 1 Bør patienter med nylig opstået lumbal rodpåvirkning opfordres til fysisk aktivitet frem for reduceret aktivitet?, outcome: 4.1 Bemsmerede VAS (op til 12 uger).