

Analysis of the report of the information necessary for the interpretation of the results in randomized clinical trials in manual therapy.

Núñez-Cortés R, Álvarez G, Pérez-Bracchiglione J, Urrútia G

Objectives

To describe the reports of the information necessary for the interpretation of the results in RCTs in MT and to compare the RCTs' reports before and after the publication of CONSORT standards for non-pharmacological clinical trials.

Methods

- ✓ **Search strategy:** PubMed and CENTRAL.
- ✓ **Eligibility criteria:** RCT design, MT intervention, English language.
- ✓ We took a random sample of 100 trials.
- ✓ We designed and piloted a data extraction form.
- ✓ For each RCT we identified the primary variable. If this was not an explicit statement, we considered the variable used for the calculation of the sample size, or the first reported in the results section.

Results	Total (n=100)	Pre-CONSORT (n=50)	Post-CONSORT (n=50)	P value
The hypothesis is explicitly stated.	38% [28.5 to 48.3]	19% [24.7 to 52.8]	38% [24.6 to 52.8]	1.000
The primary variable is explicitly described	38% [28.5 to 48.3]	36% [22.9 to 50.8]	40% [26.4 to 54.8]	0.680
Sample size calculation	48% [37.9 to 58.2]	38% [24.7 to 52.8]	58% [43.2 to 71.8]	0.045
Complete loss report	78% [68.6 to 85.7]	72% [57.5 to 83.8]	84% [70.8 to 92.8]	0.148
Intra-group effect measure	50% [39.8 to 60.2]	60% [45.1 to 73.6]	40% [26.4 to 54.8]	0.051
Complete comparative measure between groups	35% [25.7 to 45.2]	38% [24.7 to 52.8]	32% [19.5 to 46.7]	0.529
Clinical Relevance Threshold	45% [35.0 to 55.3]	44% [30.0 to 58.7]	46% [31.8 to 60.7]	0.841

Conclusions

There is an important deficit in reporting the information necessary for a correct interpretation of the results in RCTs in MT, despite the recommendations published by CONSORT. Improvements in reporting are necessary to generate advances in physiotherapy practice.

Introduction:

The number of randomized controlled trials (RCTs) in manual therapy (MT) has increased exponentially. However, the quality of the reports remains heterogeneous.

Methodological quality:

PEDro Item (n=100)	%
Eligibility Criteria and Source	97%
Random Allocation	99%
Concealed Allocation	51%
Baseline Comparability	88%
Subject Blinding	32%
Therapist Blinding	3%
Assessor Blinding	57%
>85% Follow-up	84%
Intention-to-treat Analysis	73%
Between-group Comparisons	96%
Point Measures and Variability	92%



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