

A PHYSIOTHERAPY DELPHI CONSENSUS ON IMPORTANT DISCRIMINATORY FEATURES IN THE EXAMINATION OF NON-SPECIFIC LOW BACK PAIN.

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Introduction: Non-specific low back pain (NSLBP) is an extremely heterogeneous condition with many attempts at sub-classification having been made over the years⁽¹⁾. Sub-classification of this diverse syndrome has involved the use of discriminating features of the clinical examination. Unfortunately the examination features that are considered important in this process have not been established with any degree of consensus.

Background and Purpose of the Study: This study developed UK Physiotherapy consensus on the items to be included in a list of important “discriminatory” examination features. These features will be subsequently tested in a large cluster analysis with a view to generating valid sub-groups of NSLBP.

Material and Methods: Thirty UK Chartered Physiotherapists, representatives from Clinical Interest Groups such as the MACP, MIMDTP, PPA, ACPOM, ACPIN and others, attended a focus group and subsequently undertook a Delphi consensus technique. The focus group established the areas of the examination that were to be included in the Delphi process. The Delphi consensus process involved an initial round of statement generation. The physiotherapists were asked to list the examination items, from the history and physical examinations that they rated as important discriminators of different “types” of NSLBP. A content analysis was undertaken to establish common features (tests/questions) within the statements and following this the examination features were rated for inclusion in the list. A priori, consensus was considered to have been gained when >80% of participants agreed on inclusion of an examination feature and following a third round of rating consensus was achieved.

Results: Completion rates were excellent with 95% of questionnaires completed. Eighty examination items were included in the list by participants, following the three rounds of the Delphi technique. Fifty items were from the history and thirty items from the physical examination. Items included were from the biomedical, psychological and social domains.

Conclusion: This study provides valuable insight into the items of the clinical examination considered important in the discrimination of sub-groups of NSLBP by UK physiotherapists. The list of examination features will now be tested in a large-scale clinical study, with the reliability of the examination features and any evidence of sub-grouping of NSLBP being examined.

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Reference: McCarthy CJ, Arnall FA, Strimpakos N, Freemont AJ, Oldham JA. The bio-psycho-social classification of non-specific low back pain: A systematic review. Physical Therapy Reviews 2004; In Press.