FOR WEBSITE (SUPPLEMENTARY DATA):

Supplementary Table  Result of structured evaluation of the methodological quality of the 16 different RCTs. A-Q represents the items according to Appendix 2

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A = homogeneity, B = comparability of relevant baseline data, C = adequate randomisation, D = drop out described separately, E = drop out %, F = number of subjects, G = interventions described, H = placebo controlled, I = adequate control group, J = co-interventions avoided or similar, K = compliance measured and adequate in all groups, L = blinded subjects, M = relevant outcome measures, N = blinded assessments of outcome, O = adequate exercise period, P = intention to treat analysis, Q = statistical frequencies of most important outcomes presented for each treatment group.

Appendix 1 – for website

Study population 30 points
A. Homogeneity (2 points)
   - description of inclusion and exclusion criteria
   - restriction to a homogenous study group
B. Comparability of relevant baseline data (5 point)
- duration of complaints
- outcome measures
- age
- recurrences
- radiating complaints
C. Adequate randomisation (4 point)
- description of randomisation procedure
- randomisation procedure excludes bias
D. Dropout and causes for dropout described separately for each study group (3 points)
E. Total dropout for all groups (4 points)
- < 20 %
- < 10 %
F. Number of subjects (12 points)
- > 50 in the smallest group remains after first follow-up
- > 100 in the smallest group remains after first follow-up

**Intervention 30 points**
G. Description of intervention (10 points)
- Specific treatment explicitly described
- All reference intervention explicitly described
H. Comparison with placebo-treatment (5 points)
I. Adequate control group (5 points)
J. Co interventions avoided or similar between groups (5 points)
K. Compliance measured and adequate in all groups (5 points)

**Evaluation 30 points**
L. Blinded subjects (5 points)
- Attempt to blind the subjects (3 points)
- Blinding evaluated and successful (2 points)
M. Relevant outcome measures (10 points)
- pain
- global measure of improvement
- functional status or activities of daily living (ADL)
- spinal mobility
- return to work/employment or normal activities
N. Blinded evaluator (10 points)
O. Adequate follow-up time ≥ 6 months after treatment

**Data presentation and analysis 10 points**
P. Intention to treat analysis (5 points)
Q. Frequency of main outcome measures, presentation of mean or median with a standard error or percentiles/range or confidence interval (5 points)
Appendix 2 – for website

Study population 30 points
A. Homogeneity (2 points)
   - description of inclusion and exclusion criteria
   - restriction to a homogenous study group
B. Comparability of relevant baseline data (5 point)
   - diseases
   - outcome measures
   - age
   - type of living
   - personal aid/technical aid
C. Adequate randomisation (4 point)
   - description of randomisation procedure
   - randomisation procedure excludes bias
D. Dropout and causes for dropout described separately for each study group (3 points)
E. Total dropout for all groups (4 points)
   - < 20 %
   - < 10 %
F. Number of subjects (12 points)
   - > 50 in the smallest group remains after first follow-up
   - > 100 in the smallest group remains after first follow-up

Intervention 30 points
G. Description of intervention (10 points)
   - Physical training intervention explicitly described
   - All reference intervention explicitly described
H. Comparison with placebo-treatment (5 points)
I. Adequate control group (5 points)
J. Co interventions avoided or similar between groups (5 points)
K. Compliance measured and adequate in all groups (5 points)

Evaluation 30 points
L. Blinded subjects (5 points)
   - Attempt to blind the subjects (3 points)
   - Blinding evaluated and successful (2 points)
M. Relevant outcome measures (10 points)
   - Muscle strength
   - Balance
   - Gait
   - Endurance
   - ADL / mobility
N. Blinded evaluator (10 points)
O. Adequate training period ≥ 10 weeks

Data presentation and analysis 10 points
P. Intention to treat analysis (5 points)
Q. Frequency of main outcome measures, presentation of mean or median with a standard error or percentiles/range or confidence interval (5 points)

REFERENCES – FULL LIST FOR WEBSITE ONLY


52. World Health Organisation: International Classification of Functioning, Disability and Health. ICF Introduction. 54th World Health Assembly for international use 2001 May.


