



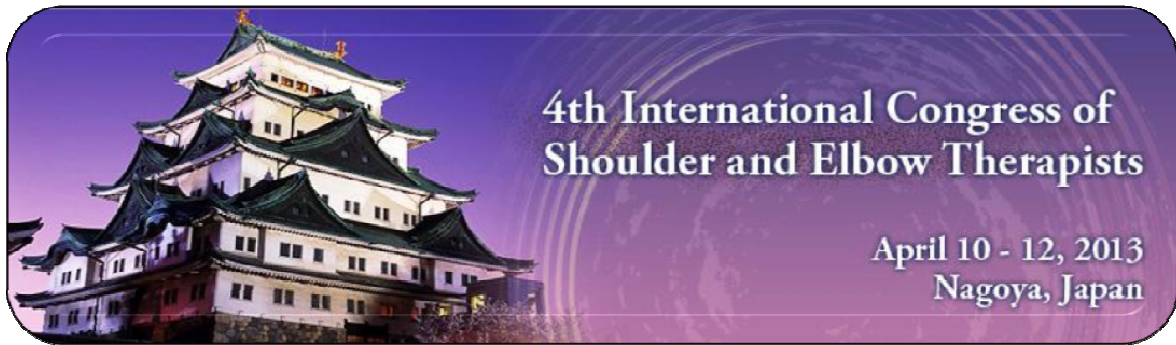
MACP Bursary Award 2013

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Carol Payne, a physiotherapy shoulder specialist from Norwich was awarded an MACP bursary of £500 to support her attendance at the 4th International Congress of Shoulder and Elbow Therapists (ICSET) in Nagoya, Japan where she presented a paper entitled "Patient reported outcome measures for the standardised assessment of shoulder dysfunction: an international expert consensus", co-authored by Dr Lori A Michener, Virginia Commonwealth University, USA.

The theme of ICSET2013 was "From Lab Bench to Bedside: Making Basic Science Clinically Relevant" and I have been able to update my knowledge on the evidence underpinning commonly used rehabilitation programmes for different types of shoulder dysfunctions, along the whole of the kinetic chain. Giles Walch gave the Kessel lecture, uncharacteristically on shoulder instability, and Christian Gerber gave a heartfelt Neer lecture on the surgical management of rotator cuff tears. The first ever joint ICSET/ ICSES symposium, on the role of the scapula in shoulder injuries with Ben Kibler, Ann Cools Tim Uhl and Jed Kuhn, was well received by the surgeons. I particularly enjoyed a therapy symposium on the conservative management of rotator cuff tears; Takayuki Muraki reviewed cadaveric biomechanical studies, Ameer Seitz explored the relationship of biomechanical impairments supporting extrinsic mechanisms, Lori Michener reviewed evidence on the use of manual therapy, and Ingrid Hultenheim Klintberg reported the development of expert consensus guidelines for the treatment of cuff tears.

Most delegates travelled to Nagoya specifically to give papers to an audience of "critical friends", and it was lovely to catch up with folks whether over our bento lunchboxes, at formal events or local restaurants. Nagoya Castle with its cherry blossoms was particularly splendid.

What else did I learn? Don't jaywalk, a man carrying a light sabre will politely point out the error of your ways; escalators are not broken just sleeping, until you approach and then they wake up as if by magic; and that the toilets (not the traditional Japanese ones) are a feat of engineering far beyond the capabilities of the average westerner! A taste of Japanese hospitality, food and culture is highly recommended!

ICSET2013 Abstract:
Physiotherapists' perspectives on the use of patient reported outcome measures for shoulder dysfunction.

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Introduction: Evidence for the effectiveness of common interventions for shoulder dysfunctions is inconclusive. Systematic reviews, meta-analysis, and the development of clinical practice guidelines have been impeded by the lack of consistent use of outcome measures across clinical trials. Accumulating evidence suggests that patient reported outcome measures (PROs) are able to differentiate between different types of shoulder pathology and interventions, across a variety of clinical and research settings. However the large number and wide range of validated shoulder region-specific measures available present dilemmas in PRO selection. This study set out to determine which patient reported outcome measures (PROs) are currently used by shoulder therapists in clinical practice and research, and which psychometric criteria are considered important in PRO selection.

Methods: Delegates at the International Congress of Shoulder and Elbow Therapists 2010 were invited to participate in this cross sectional observational study. Research Electronic Data Capture (REDCap) web based tools were used to design an on-line questionnaire. Anonymised numerical survey data were tallied and frequency counts reported descriptively.

Results: Participants submitted 101 questionnaires; an 84% response rate. Most commonly used as a primary outcome by clinicians (n=96) were the Disabilities of the Arm, Shoulder and Hand questionnaire (DASH) (39%) and Oxford Shoulder Score (OSS) (36%), and by the 50 participants involved in research the DASH (43%); OSS (22%); and Shoulder Pain and Disability Index (SPADI) (12%). The DASH (n=52; 31%), OSS (n=23; 14%), SPADI (n=18; 11%) and American Shoulder and Elbow Surgeons assessment form (ASES) (n=17; 10%) were most commonly used by clinicians and researchers as secondary outcomes. Reliability (96%), interpretability of change scores (91%); relevance of content (90%), practicability (90%), and responsiveness (87%) were rated as "extremely" or "very" important criterion, in PRO selection.

Conclusion: The DASH, OSS or SPADI are the most common primary outcome measures used and the DASH, OSS, SPADI or ASES are the most commonly used secondary measures of shoulder functioning and disability. Consistent use of such a core set of PROs across clinical trials may facilitate the pooling of data in future meta-analyses, which is integral to evidence-based practice.