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Evidence Synthesis of Shoulder Pain Among Canadian Firefighters

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Abstract

Injury or degeneration of rotator cuff tendon leads to rotator cuff disease (subacromial impingement syndrome and rotator cuff tears). Shoulder pain – pain in the upper arm close to the deltoid muscle insertion has been reported as the most common symptom for subacromial impingement syndrome and rotator cuff tears. However, the current state of evidence on treatment effectiveness of rotator cuff disease is indeterminate. The shoulder function is essential for many of the physically demanding tasks that firefighters perform on the fire ground. For fire services and firefighters, the preservation of active duty is critical for their continued service to their communities. However, the prevalence of shoulder pain among Canadian firefighters has not been synthesized. Further, high quality randomized clinical trials (RCTs) provide the highest level of evidence and assist in clinical decision making. The International Committee of Medical Journal Editors (ICMJE) recommendation of RCT trial registration in public trials registry has been made to improve the reporting, transparency, rigor and reproducibility in RCTs. However, there is a paucity of evidence on the proportion of RCTs with proper trial registrations in the field of rehabilitation therapy. Therefore, the purposes of this thesis were 1) to assess the effects of arthroscopic versus mini-open rotator cuff repair surgery on function, pain and range of motion at in patients with rotator cuff tears; 2) to quantify the effects of surgical vs conservative interventions on clinical outcomes of pain and function in patients with subacromial impingement syndrome; 3) to assess the prevalence of musculoskeletal disorders (MSDs) among Canadian firefighters, 4) to examine the proportion of RCTs that were reported to have been prospectively, retrospectively registered or not registered in the field of rehabilitation therapy, and 5) to use the synthesized evidence to inform the design of a single center (fire-station), investigator-blinded, randomized, 12-month, parallel-group, superiority trial for the evaluation of the efficacy of a shoulder exercises on clinical outcomes in firefighters with shoulder pain.

From the existing literature, we found evidence that both arthroscopic and mini-open techniques to rotator cuff repairs with post-operative rehabilitation exercises were effective in improving clinical outcomes of function, pain and shoulder range of motion in patients with rotator cuff tears. However, the between-group differences in outcomes were too small to be clinically important. The effects of surgery plus physiotherapy (exercises) vs physiotherapy

(exercises) alone on pain and function were too small to be clinically important at 3-, 6-months, 1-, 2-, 5- and ≥ 10-years follow up. This further highlighted that rehabilitation exercises be considered as the first treatment approach in patients with shoulder pain. We also identified high point-prevalence estimates (1 in 4 firefighters) of shoulder-, back-, and knee-related MSDs among Canadian firefighters (shoulder pain was 23%). Our review study indicated that fifteen years after the introduction of standards for RCT registration by ICMJE, only one-third of the RCTs in the field of rehabilitation therapy were prospectively registered. Subsequently, the emergence of further evidence (observational studies in firefighters and RCTs in active-duty military personnel) indicating the clinical effectiveness of occupation-specific rehabilitation exercises along with our evidence syntheses provided the rationale for the design and conduct of an RCT to assess the effectiveness of firefighter-specific rehabilitation exercises among Canadian firefighter with shoulder pain.

Keywords

Rotator cuff disease, subacromial impingement syndrome, rotator cuff tears, systematic reviews, meta-analysis, randomized clinical trials, prospective registration, ICMJE, firefighters, musculoskeletal disorders, rehabilitation programs.

Summary for Lay Audience

Inside the shoulder joint there is a small band which is called a tendon. This tendon in your shoulder allows your arm to move and do many things such as eating, brushing your teeth, combing your hair and dressing up. Pain in the shoulder is a very common problem that affects many people. This pain may be due to a tear (cut) in the shoulder tendon or the tendon could have become very sensitive (inflamed). It is not clear what type of surgery (arthroscopic or mini-open) is helpful for patients with a cut in their shoulder tendon. Also, for patients with inflamed (sensitive) tendon, it is not clear if surgery plus shoulder exercises or just shoulder exercises alone, is the best treatment option. This pain in shoulder is also very common in firefighters. We also don't know what percentage of research details published in physiotherapy was originally made available to the public before the start of the research itself. This is a very important step for researchers to do (make research details available to everyone before starting research) because only by making research details available to public can the researchers stay transparent with the public and other researchers. So, we reviewed many studies and found that both types of surgery (arthroscopic or mini-open) are helpful for patients with a cut in their shoulder tendons. Also, we found that there is no difference in improving shoulder pain when going for surgery and doing shoulder exercises vs only doing shoulder exercises alone for patients with inflamed (sensitive) tendon. Our research also showed that shoulder pain is very common in Canadian firefighters (1 in 4 firefighters have shoulder pain). Plus, only about 33% of research details published in physiotherapy were made available to the public and other researchers before the start of the research itself (this is very important for transparency reasons). So, we used all these results from our work and carefully designed a study with special exercises for firefighters to do to improve their shoulder pain.

Co-Authorship Statement

The thesis question and the design of the studies were formulated by Goris Nazari and by her supervisor, Dr. Joy C MacDermid. Co-investigators were recruited when additional expertise was required. The specific roles of each of the authors are listed below:

Chapter 1: Introduction

Goris Nazari – sole author

Chapter 2: Effects of Arthroscopic vs. Mini-open Rotator Cuff Repair on Function, Pain & Range of Motion. A Systematic Review and Meta-Analysis.

Goris Nazari – primary author, study design, data collection, data analysis, interpretation and manuscript drafting.

Joy C. MacDermid – co-author, involved in the conception and design of the study, drafting, and revised the manuscript for important intellectual content.

Dianne Bryant – co-author, involved drafting, and revised the manuscript for important intellectual content.

Neha Dewan – co-author, critical appraisal, revised the manuscript for important intellectual content.

George Athwal – co-author, revised the manuscript for important intellectual content.

Chapter 3: The effectiveness of Surgical vs Conservative Interventions on Pain and Function in Patients with Subacromial/Shoulder Impingement Syndrome. A Systematic Review and Meta-analysis.

Goris Nazari – primary author, study design, data collection, data analysis, interpretation and manuscript drafting.

Joy C. MacDermid – co-author, involved in the conception and design of the study, drafting, and revised the manuscript for important intellectual content.

Dianne Bryant – co-author, involved drafting, and revised the manuscript for important intellectual content.

George Athwal – co-author, revised the manuscript for important intellectual content.

Chapter 4: Prevalence of Musculoskeletal Disorders Among Canadian Firefighters: A Systematic Review and Meta-Analysis.

Goris Nazari – primary author, study design, data collection, data analysis, interpretation and manuscript drafting.

Joy C. MacDermid – co-author, involved in the conception and design of the study, drafting, and revised the manuscript for important intellectual content.

Heidi Cramm – co-author, content expert, manuscript drafting.

Chapter 5: Only One-third of Randomized Clinical Trials Published in Top Rehabilitation Therapy Journals were Prospectively Registered between 2015 – 2020. However, Trends Have Been Improving. A Systematic Review.

Goris Nazari – primary author, study design, data collection, data analysis, interpretation and manuscript drafting.

Joy C. MacDermid – co-author, involved in the conception and design of the study, drafting, and revised the manuscript for important intellectual content.

Dianne Bryant – co-author, involved drafting, and revised the manuscript for important intellectual content.

Steve (Ze) Lu – data extraction, revised the manuscript.

Dion Diep – data extraction, revised the manuscript.

Stephanie Reischl – data extraction, revised the manuscript.

Chapter 6: The Efficacy of Firefighter-specific Shoulder Exercises vs Standard Rehabilitation Exercises on Pain Intensity levels in Active Duty Firefighters with Subacromial Impingement Syndrome. A Protocol for a randomized controlled trial.

Goris Nazari – primary author, study design, statistical analysis plan and trial methodology.

Joy C. MacDermid – co-author, study design, consult in trial preparation.

Dianne Bryant – co-author, expert methodologist, protocol drafting.

George Athwal – co-author, Orthopedic surgeon, protocol drafting.

Chapter 7: General discussion and future direction.

Goris Nazari – sole author.

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This PhD thesis is dedicated to the Armenian soldier.

To the Armenian soldier…

If you are with your friends and family, enjoy.

If you are deployed, salute.

If you are gone, you are not forgotten.

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Chapter 1

1 Introduction

1.1 Rotator Cuff Disease

The SITS muscles – Supraspinatus, Infraspinatus, Teres minor and Subscapularis – constitute the rotator cuff.[1] The function of the rotator cuff is to provide dynamic stabilization and facilitate movement at the glenohumeral joint.[1] Rotator cuff disease is an umbrella term that encompasses the entire spectrum of symptomatic pathologies of rotator cuff irrespective of mechanism (acute injury, degenerative or inflammatory) or corresponding anatomical site (supraspinatus tendon versus subacromial bursa).[1] Subacromial/shoulder impingement syndrome and rotator cuff tears are the two most common clinical diagnostic terms that pertain to rotator cuff disease.[1] Shoulder impingement syndrome is defined as a set of clinical and radiological findings that relate to tendinitis and/or bursitis of the rotator cuff and adjacent tissues.[2] Rotator cuff tears are defined as partial or full tears of the rotator cuff tendon.[3] Partial (incomplete) tears damage the tendon, but do not completely sever the tendon, whereas, full-thickness (complete) tears separate all of the rotator cuff tendon from the bone.[3]

1.2 Etiology

The scientific consensus on rotator cuff disease etiology is the interplay between mechanical and biological factors.[1-3] The mechanistic theory postulates that pathophysiology begins from oedema and thickening of bursa (stage 1).[3] This process of oedema and thickening of bursa continues further and develops into fibrosis and inflammatory changes (stage 2 – shoulder impingement syndrome), which in turn leads to partial or complete tear of the tendon (stage 3 – rotator cuff tears).[3] In shoulder impingement syndrome, the mechanistic theory posits that the mechanical impingement – impingement of the rotator cuff tendon – takes place between undersurface of anterior acromion, coracoacromial ligament, and humerus during shoulder flexion or abduction.[4]

Empirical evidence supporting this mechanistic theory include: the higher prevalence of shoulder impingement syndrome in the dominant side,[5] increase in the subacromial (between acromion and the rotator cuff tendon) pressure at various abduction angles of the humerus in patients with shoulder impingement,[6] and the predisposition to subacromial impingement due to fatigue or imbalance in the rotator cuff muscle strength.[7] In rotator cuff tears, the mechanistic theory posits that the mechanical impingement of rotator cuff tendon is continued, and that this progression eventually leads to partial or complete tear of the tendon. Empirical evidence supporting the mechanistic theory of rotator cuff tears includes the association between shape of acromion (higher acromion indices, smaller lateral acromion angles, larger critical shoulder angles, anatomical type – hook shaped more than flat or curved) with the presence of tear,[8-9] and the location of typical tears – at the supraspinatus insertion – as it makes contact with the acromion in shoulder flexion.[3] From the biological perspective, it is believed that certain vascular, tendon matrix, cellular and extracellular changes impact the tendon structure and therefore, predispose individuals to the subacromial impingement syndrome and rotator cuff tears. However, the precise biological mechanism remains unclear.[4,10] Therefore, the interplay between mechanical and biological factors is suggestive of the cause for rotator cuff disease (subacromial/shoulder impingement syndrome and rotator cuff tears).

1.3 Diagnosis and Clinical Presentations

A comprehensive and precise patient history-taking is paramount to proper diagnosis of rotator cuff disease, impact and identification of personal and occupational needs, and ultimately tailoring of a personalized management program of the disease.[1] Pain in the upper arm close to the deltoid muscle insertion, which is aggravated by overhead activity and becomes worse at night (as a consequence of lying on the affected side), along with muscle weakness and loss of function have been described and reported to be consistent with subacromial impingement syndrome.[1] Furthermore, a painful arch – pain occurring between 60° and 120° of passive glenohumeral abduction – is a key characteristic of subacromial impingement syndrome an is nearly always present (positive likelihood ration

of 3.7, 95% CI: 1.9 to 7.0; negative likelihood ration of 0.36, CI: 0.23 to 0.54).[1] Similar range of symptoms including persistent shoulder pain (found to interfere with sleep), decrease/loss of muscle strength and/or range of motion have been identified and reported in patients with rotator cuff tears.[10-12]

1.4 Prevalence

Nearly 1 out of 50 adults seek medical care for new onset of subacromial impingement syndrome annually.[13] Additionally, the prevalence of rotator cuff tears is approximately 22%, which increases with every decade of life from 11% for individuals in their 50s, to 37% for those in their 80s or older.[14] Diseases of rotator cuff (subacromial impingement syndrome and rotator cuff tears) are considered the most common underlying causes of shoulder pain.[4] The monthly prevalence of shoulder pain in the general population ranges from 18% to 31%, while lifetime prevalence of shoulder pain is reported to be between 6.7% to 66.7% based on the setting (higher in primary care) and age (higher in elderly) of the study population.[1,4,15] The 1-year period prevalence estimate of shoulder pain in Canadian general population is 6.10%.[16] Shoulder pain is considered the third most common musculoskeletal disorder – reason to present to primary care,[17] with major declines in quality of life, capacity to work or perform household tasks.[18] Such activity limiting musculoskeletal disorders have been reported to pose a major economic burden of $7 billion to society as a consequence of direct health-care costs.[19] Approximately half of the individuals with shoulder pain are rehabilitated and fully recover in a period of six months. However, evidence indicates that up to 50% of the individuals continue to experience pain and limited functional output up to 2 years after the onset of the condition.[1,20]

1.5 Risk Factors

Considering the scientific consensus that the interplay between biological and mechanical factors is suggestive of the cause for rotator cuff disease, elements that impact the structural resilience of the rotator cuff tendon and/or lead to excessive mechanical force on the rotator cuff tendon are well considered as risk factors (intrinsic or extrinsic) for rotator cuff disease – subacromial impingement syndrome and rotator cuff tears.[1,21] The most critical intrinsic risk factor for subacromial impingement syndrome and rotator cuff tears is age. [1,21] Evidence indicates that age-related changes in collagen composition of the rotator cuff tendon are evident even in normal tendons. This finding assumes that the natural process of aging predisposes the rotator cuff tendon to inflammation (subacromial impingement syndrome) and eventually to its failure (rotator cuff tears). A multitude of other intrinsic/metabolic risk factors including obesity, smoking, diabetes mellitus, and anatomical factors such as hooked acromion – specifically believed to reduce the supraspinatus outlet space (subacromial space) – are all believed to contribute to rotator cuff tendon inflammation and its ultimate failure (tears). [1,21] Extrinsic factors include occupational and/or sporting activities.[22-24] In particular, those that involve repetitive over-head activities (musicians at an orchestra, welding, volleyball, tennis, swimming, gymnastics) or repetitive throwing activities (baseball, cricket).[22-23] Such activities 1) place a tremendous biomechanical load on the rotator cuff muscles and tendon at glenohumeral joint in abducted and externally rotated position straining the supraspinatus tendon as the tendon gets impinged on the inferior surface of the acromion, and 2) such activities are believed to lead to fatigue and/or imbalance in rotator cuff muscle strength, and therefore, contribute to subacromial impingement syndrome and rotator cuff tears.[22,24]

1.6 Treatment

Shoulder/subacromial impingement syndrome is surgically treated by performing a subacromial decompression surgery (acromioplasty/bursectomy).[4] The rate of subacromial decompression surgery in patients with subacromial impingement syndrome has increased seven-fold from the year 2000 to 2010.[4,10,25] Subacromial decompression surgery is

performed to halt the impingement syndrome as it involves the removal of the inflamed subacromial bursa – bursectomy – as well as removal of (some) bone from the anterior and/or lateral undersurface of the acromion – acromioplasty.[4,10] These procedures are performed to reduce the compressive forces on the previously impinged rotator cuff tendon and to provide a wider space for traversing of the rotator cuff tendon.[4,10] This is aimed to restore the normal function of the glenohumeral joint and prevent the progression of arthritic changes in this joint.[4,10]

The rate of surgical rotator cuff repairs (with subacromial decompression surgery) in patients with rotator cuff tears has increased ten-fold from the year 2004 to 2010 (from 1.4/100,000 people to 13.7/100,000 people).[4,10,25] Rotator cuff repair surgery is performed using a mini-open or an arthroscopic (less invasive) approach.[4,10] First the bursa is removed, second, the bone from the anteroinferior surface of acromion is removed and acromioclavicular ligament is released, then, the torn rotator cuff tendon is identified, and re-attached using sutures and bone anchors into its standard anatomical attachment in the humerus.[4,10] This procedure is (often) then followed by subacromial decompression (acromioplasty/bursectomy), to further minimize the likelihood of impingement of the newly re-attached rotator cuff tendon .[4,10] The mini-open approach for rotator cuff repairs is regarded as the gold standard technique and has been reported to yield favorable outcomes in 9 out of 10 patients with rotator cuff tears.[26-29] Alternatively, reports of lower postoperative pain as well as faster recovery have influenced surgeons' preferences to select an arthroscopic instated of a mini-open approach.[30-31] However, there is no consensus on whether mini-open or arthroscopic approach, offer superior outcomes. Infection, peripheral nerve injury, ongoing pain, failed rotator cuff repair (re-tears), complications associated to the anesthesia – pulmonary embolism and even death – have all been reported as potential risks of such surgery. [4,10]

Physiotherapy treatment options such as muscle strengthening, scapular stabilization, stretching/flexibility exercises [32-35], along with other conservative treatment options including glucocorticoid injection, nonsteroidal anti-inflammatory drugs or use of therapeutic modalities (ultrasound, transcutaneous electrical nerve stimulation) constitute

the non-operative treatment options for subacromial impingement syndrome.[36-42] However, there is insufficient evidence to demonstrate whether conservative treatment options – physiotherapy exercises alone in particular – can be considered no worse than to subacromial decompression surgery followed by physiotherapy exercises.[43]

Low-quality evidence has indicated that rotator cuff repair surgery provides no clinically meaningful effects on pain, function or quality of life outcomes in individuals (mean age range: 56 to 68 years) with symptomatic small degenerative (non-traumatic) rotator cuff (supraspinatus) tears when compared with non-operative treatment (physiotherapy exercises, glucocorticoid injections). Furthermore, it is important to note that well-designed and rigorous (placebo-controlled) clinical trials on effectiveness of rotator cuff repair surgery are lacking.[10]

1.7 Firefighters

Firefighting is considered as a very dangerous profession and an occupation that places tremendous stress on the musculoskeletal system with high risks of sustaining musculoskeletal injuries.[44-46] This is due to the fact that firefighters perform tasks in unfavorable working conditions at extreme levels of physical exertions over extended periods of time, all while carrying a heavy base load of personal protective equipment (45 – 80 Lbs.).[44-49] The National Fire Information Database (USA) has indicated that the total number of work-related injuries to the musculoskeletal system – musculoskeletal disorders (MSDs) – have decreased since 2005.[50] MSDs (sprains, strains, pain) are the leading type of injuries acquired during firefighting operations.[50] Tasks such as heavy lifting, awkward postures, combined with the unpredictable nature of firefighting occupation as well as the constant exposure to hostile environments have been reported as the likely contributing factors to such MSDs.[44,50] Identifying the prevalence of MSDs among Canadian firefighters is crucial to assist the development of injury prevention and treatment strategies which are currently almost non-existent.

1.8 Systematic Reviews and Meta-Analysis

A Systematic review is defined as study of studies that uses explicit methodology to identify, select, critically appraise, and summarize the findings of all individual studies that are relevant to a precise and clearly defined research question.[51] A meta-analysis is defined as the use of statistical methods to combine quantitative results from various individual studies – pooling of effect estimates.[51] Systematic reviews and meta-analyses are of great interest to and are read by researchers and clinicians to keep up to date with the latest state of evidence pertaining to a field of study/research question and are frequently used as a starting point for developing clinical practice guidelines.[52] More importantly, granting agencies as well as health care journals have begun to require systematic reviews and/or meta-analyses to ensure that there is adequate justification to warrant the need for further research and development of research programs.[52] However, not all published systematic reviews and meta-analyses provide valid effect estimates.[51-52] Inappropriately conducted systematic reviews and meta-analyses yield misleading results.[51] The inherent worth of a systematic review and meta-analysis largely depends on "what was done", "what was found", and "the clarity of its reporting".[52] Given the ever-growing accumulation and exponential increase of evidence (2000 – 2010), it is of paramount importance to have and adhere to a set of rigorous methodology and avoid the common pitfalls associated in conducting systematic reviews and meta-analyses.[51-52]

1.9 Randomized Clinical Trials

Randomized clinical trials (RCTs) with adequate randomization schemes offer the most rigorous methodology to establish a cause-effect relationship between a treatment and an outcome.[53-55] The purpose of such randomization is to prevent/minimize confounding by balancing all the prognostic factors except the one being tested – the "new" treatment.[53-56] RCTs (prospectively) provide the highest level of evidence and are second only to systematic reviews of such RCTs which occupy the top of the hierarchy of evidence.[54-55]

1.10 Randomized Clinical Trial Registration

The International Committee of Medical Journal Editors (ICMJE) recommendations, originally published in 2005, was aimed in enhancing the transparency, accountability as well as the reproducibly of publish RCTs.[57] The ICMJE has developed multiple recommendations to aid (bio)medical journals, editors and authors to create, publish and distribute highly accurate, transparent and reproducible RCTs.[57] ICMJE member and multiple non-member journals voluntarily and explicitly state the need to adhere to such recommendations in the "Instructions for Authors" sections of their respective journals.[57] ICMJE recommendations state that "ICMJE requires, and recommends that all medical journal editors require, registration of clinical trials in a public trials registry at or before the time of first patient enrollment as a condition of consideration for publication".[57] The underlying reasons for such recommendation are manifold. First, RCT registration minimizes selective publication and reporting of outcomes.[57] Second, it can minimize and potentially prevent the conduct of similar RCTs.[57] Furthermore, public trial registries provide a platform and allow patients to enroll in current or future trials of their interest.[57] Lastly, it provides authors of RCTs with further information to present to the ethics committees/review boards of similar previous work.[57] The ICMJE recommendations for RCT registration have been adopted by most (14 out of 16) of top rehabilitation therapy journals. However, the proportion of RCTs with adequate (prospective) registration in this field has not been reported.

1.11 The gaps in the knowledge

The mini-open approach for rotator cuff repairs is regarded as the gold standard technique and has been reported to yield favorable outcomes in 9 out of 10 patients with rotator cuff tears.[26-29] Alternatively, reports of lower postoperative pain as well as faster recovery have influenced surgeons' preferences to select an arthroscopic instead of a mini-open approach.[30-31] However, there is no consensus on whether mini-open or arthroscopic approach, offer superior outcomes. To date, two systematic reviews: Shan (2014) review

of 12 studies (3 RCTs, 9 observational),[58] and Huang (2016) review of 18 studies (4 RCTs, 14 observational),[59] have assessed the effectiveness of clinical outcomes in patients with rotator cuff tears undergoing arthroscopic vs mini-open rotator cuff repairs. Both the reviews reported that there were no between-group differences in outcomes among the two surgical techniques.[58-59] The results from these reviews greatly limit our confidence in the effect estimates mainly due to the fact that individual studies were pooled irrespective of their design (RCT and observational pooled together).[58-59] The Ji (2015) review of 5 RCTs reported that there were no between-group differences in outcomes at the end of follow-up between arthroscopic and mini-open rotator cuff repair surgery techniques in patients with rotator cuff tears.[60] However, the Ji (2015) review pooled effect estimates based on the last follow-up time points reported (range: 6 – 34 months) – a likely contributing factor to their high levels of heterogeneity, failed to assess clinical outcomes such as function, pain and range of motion, and did not provide ratings of the quality of the evidence across each outcome. Therefore, limiting our ability to make definitive conclusions in assessing the effectiveness of arthroscopic versus mini-open rotator cuff repair on important clinical outcomes.

Regarding subacromial/shoulder impingement syndrome, there is insufficient and conflicting evidence to indicate whether conservative treatment options – physiotherapy exercises alone in particular – can be regarded as effective as (no worse than) subacromial decompression surgery followed by physiotherapy exercises.[43,61] Saltychev (2015) review indicated that there is moderate quality evidence demonstrating that subacromial decompression surgery followed by active exercises is no more effective than active exercises alone in improving clinical outcomes in patients with subacromial impingement syndrome.[61] On the contrary, Steuri (2017) reported that there was insufficient evidence to indicate whether physiotherapy exercises is as good as (no worse than) surgery plus exercises in terms of improving clinical outcomes in patients with subacromial impingement syndrome.[43] Considering the conflicting insights on the current state of the evidence and the increase (six new trials; more than double) in the number of newly published RCTs on this topic and the fact that previous reviews synthesized only 5 trials, an up-to-date review incorporating the most recently published RCTs is warranted.

The primary step for development of firefighter-specific rehabilitation and injury prevention programs, is the conduct of reliable and valid individual epidemiologic studies – prevalence studies – or preferably, the synthesis of multiple prevalence studies to obtain prevalence estimates,[62] and contrast such estimates of MSDs across various populations. Prevalence estimates are required to highlight, justify and persuade policymakers, governmental and funding agencies to allocate substantial resources to enhance the development and delivery of programs – firefighter-specific rehabilitation and injury prevention programs – nationwide.[62] Synthesis of such prevalence studies are preferred over individual published reports due to the fact that individual prevalence studies fail to 1) entirely report both the geographical and anatomical distribution of the condition, 2) contrast subgroups, or 3) pool similar studies to provide an estimate from which inferences can be drawn.[62-66] Therefore, given the increase in the total number of individual studies examining the prevalence of MSDs among Canadian firefighters,[44,63-66] a systematic review and meta-analysis of such prevalence studies of MSDs among Canadian firefighters is warranted.

A recent systematic review reported that the publications of RCTs have more than doubled in the field of rehabilitation therapy – increased at much higher rates than in any other health/medical science fields.[56] However, the number of RCTs with adequate trial registrations in public trial registries – consistent with ICMJE recommendations – remain unclear. This makes it difficult to examine the level of transparency, reproducibility and the methodological rigor of such RCTs published in the field of rehabilitation therapy. A systematic review study to examine the percentage of RCTs published that were reported to have been registered (prospectively or retrospectively) or not registered, between 2015 – 2020 in the field of rehabilitation therapy is needed.

A recent review by Ramsden (2018) indicated that the risk of MSDs among Canadian firefighters should be a priority issue for researchers, employers and policymakers striving to improve firefighters' health.[67] Furthermore, evidence from previously conducted observational (effectiveness) studies have indicated that physical fitness and rehabilitation exercise interventions are effective in terms of improving clinical outcomes (muscle

strength, range of motion, function, muscle endurance, speed, whole-body coordination) and effective in reducing the rate of MSDs among firefighters.[68-72] However, there is a paucity of evidence from rigorously conducted RCTs to support the effectiveness of rehabilitation exercise interventions to improve clinical outcomes in Canadian firefighters with MSDs.

1.12 Objectives of this dissertation

Systematic reviews of RCTs provide the highest level of evidence and assist in clinical decision making. The state of evidence on treatment effectiveness of rotator cuff disease (subacromial/shoulder impingement syndrome and rotator cuff tears) is indeterminate and the level of transparency and reproducibility of RCTs published in the field of rehabilitation therapy remain unclear. Furthermore, synthesis of evidence on prevalence of MSDs among Canadian firefighters is needed. Therefore, in this dissertation we aimed to address the current gaps in the literature and provide the rationale for the design and conduct of an RCT to assess the effectiveness of firefighter-specific shoulder rehabilitation exercises in firefighters with shoulder pain. More specifically, a series of studies were conducted:

1. To quantify the effects of arthroscopic versus mini-open rotator cuff repair surgery on function, pain and range of motion in patients with rotator cuff tears.
2. To assess the effects of surgical vs conservative interventions on clinical outcomes of pain and function in patients with subacromial impingement syndrome.
3. To quantify the point- and period-prevalence estimates of anatomical regions of MSDs among Canadian firefighters.
4. to examine the percentage of RCTs published in top rehabilitation therapy journals that were reported to have been registered (prospectively or retrospectively) or not registered between 2015 – 2020.
5. To design a single center, investigator-blinded, randomized, 12-month, parallel-group, superiority trial for the evaluation of the efficacy of occupation-specifc shoulder exercises on clinical outcomes in firefighters with shoulder pain.

1.13 Overview of this dissertation

Chapter 2 is a systematic review and meta-analysis of the effectiveness of arthroscopic versus mini-open rotator cuff repair surgery on clinical outcomes at 3-, 6- and 12-month follow ups. Chapter 3 is an evidence synthesis that aimed to investigate the effectiveness of surgical vs conservative interventions on clinical outcomes in patients with subacromial impingement syndrome. A meta-analysis of all the eligible RCTs was also performed to pool all the extracted clinical outcomes on pain and function. Chapter 4 is a systematic review and meta-analysis of the point- and period-prevalence estimates of anatomical regions of MSDs among Canadian firefighters. Chapter 5 is a review study that examines the percentage of RCTs published in top rehabilitation therapy journals that were reported to have been registered (prospectively or retrospectively) or not registered between 2015 – 2020, to provide the level of adherence of rehabilitation therapy journals to ICMJE recommendations. Chapter 6 is the design of a superiority trial that integrates all the information from the previous studies in this thesis as well as the current evidence and aims to assess the efficacy of the firefighter-specific shoulder rehabilitation exercises in firefighters with shoulder pain. Chapter 7 is a discussion section and an overview of this thesis. In this chapter we discuss the clinical and research implications of our work, future research directions, strengths, limitations and the conclusions.

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Chapter 2

2 Effects of Arthroscopic vs. Mini-open Rotator Cuff Repair on Function, Pain & Range of Motion. A Systematic Review and Meta-Analysis.

Abstract

Objective: To assess the effectiveness of arthroscopic versus mini-open rotator cuff repair on function, pain and range of motion.

Design: Systematic review and meta-analysis of randomized controlled trials.

Setting: Clinical setting.

Participants: Patients 18 years and older with a rotator cuff tear.

Intervention/Comparison: Arthroscopic/mini-open rotator cuff repair surgery followed by post-operative rehabilitation.

Main Outcome Measures: Function, pain and range of motion.

Results: Six RCTs (n=670) were included. The pooled results, demonstrated no significant difference between arthroscopic and mini open approach to rotator cuff repair on function (very low quality, 4 RCTs, 495 patients, SMD 0.00, 3-month; very low quality, 4 RCTs, 495 patients, SMD -0.01, 6-month; very low quality, 3 RCTs, 462 patients, SMD -0.09, 12-months). For pain, the pooled results were not statistically different between groups (very low quality, 3 RCTs, 254 patients, MD -0.21, 3-month; very low quality, 3 RCTs, 254 patients, MD -0.03, 6-month; very low quality, 2 RCTs, 194 patients, MD -0.35, 12-months).

Conclusion: The effects of arthroscopic compared to mini-open rotator cuff repair, on function, pain and range of motion are too small to be clinically important at 3-, 6- and 12-month follow ups.

2.1 Introduction

Across the general population, rotator cuff tears impact 1 in 5 individuals, and 1 in 3 of those with shoulder symptoms.[1] Rotator cuff tears are more prevalent in older adults, those involved in heavy labor, males as well as individuals with previous history of injury.[1] Studies have demonstrated that surgical interventions including mini-open or arthroscopic repairs to offer satisfactory outcomes.[2-4] The mini-open has been considered the gold standard technique, costs significantly less, and proved to attain good to excellent outcomes in 90% of patients.[5-8] On the other hand, factors such as lower postoperative pain, quicker recovery time, and superior cosmetic results have steered surgeons' preferences to choosing an arthroscopic technique based on the to emerging evidence.[9-11] However, there is no consensus on whether one technique offers superior outcomes.

To date, three systematic reviews (SRs) have examined the effectiveness of clinical outcomes in patients with rotator cuff tears undergoing arthroscopic vs mini-open rotator cuff repairs.[2-4] The Shan (2014) review of 12 studies (3 RCTs, 9 observational), and the Huang (2016) review of 18 studies (4 RCTs, 14 observational), both concluded that there were no differences in outcomes between the arthroscopic and mini-open rotator cuff repair techniques.[2,4] However, in these reviews, studies were pooled irrespective of their design (RCT and observational), which greatly limits our confidence in its effect estimates. [2,4] Furthermore, the risk of bias in the included studies were not assessed.[2,4] A third review by Ji (2015), included 5 RCTs and again concluded that there were no differences in outcomes at the end of follow-up between the arthroscopic and mini-open rotator cuff repair techniques.[3]

While the review by Ji (2015) provides valuable insights, it has important limitations. For example, trials were pooled and meta-analyses conducted based on the last follow-up time point reported that ranged from 6 to 34 months, which might have in turn contributed to the high levels of heterogeneity in the pooled analyses.[13] The effectiveness of arthroscopic versus mini-open rotator cuff repair on outcomes function, pain and range of motion, at 3-, 6- and 12-month follow ups were not assessed. Furthermore, the review failed to provide ratings of the quality of the evidence across each outcome, according to Grading of

Recommendations, Assessment, Development and Evaluation (GRADE) guidelines.[13] Therefore, the purpose of this review was to conduct a systematic review with meta-analysis that addresses the reported limitations of the aforementioned reviews.

The objectives of this review were:

1. to quantify the effects of arthroscopic versus mini-open rotator cuff repair on function, pain and range of motion at 3-, 6- and 12-month follow ups,
2. to rate the quality of the body of literature that compares the effectiveness of arthroscopic versus mini-open rotator cuff repair according to GRADE guidelines across each outcome.

2.2 Methods

We followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) and Cochrane collaboration guidelines.[14-15] PROSPERO registration number: CRD 42018097325.

2.2.1 Eligibility Criteria

Studies were included in this systematic review if the below criteria were met: [2-4]

- Design: randomized controlled trial (RCT) in English published in a peer reviewed journal between January 1998 – July 2019,
- Participants: patients 18 years and older with a rotator cuff tear,
- Intervention/Comparison: trials that compared patients who underwent arthroscopic or mini-open rotator cuff repair followed by post operative rehabilitation,
- Outcomes: function, pain and shoulder range of motion.

Studies that included patients with degenerative arthritis, rheumatoid arthritis of glenohumeral joint, adhesive capsulitis/ shoulder fractures / previous surgery, that were conference abstract and posters were excluded from this systematic review. [2-4]

2.2.2 Information Sources

We conducted systematic electronic searches to identify relevant randomized controlled trials in MEDLINE, EMBASE, CINAHL and Google scholar from January 1998 to July 2019. Several different combinations of keywords were used, such as: “rotator cuff repair”, “randomized controlled trials”, “arthroscopic surgery”, “mini-open surgery”, “rehabilitation after arthroscopic”, “rehabilitation after mini-open”, “effectiveness of arthroscopic”, “effectiveness of mini-open”. In addition, we also performed a search in the clinical trial registers catalogues (ClinicalTrials.gov, EU registry and ISRCTN registry), and carried out a manual search of the reference lists of the previous systematic reviews and the references of all the included articles.

2.2.3 Study Selection

Two independent reviewers carried out the systematic electronic searches in each database. Duplicate studies were identified and removed. Next, we independently screened the titles and abstracts and retrieved in full text any article marked include or uncertain by either reviewer. Finally, we conducted an independent full text review to determine final eligibility. In case of disagreement, a third reviewer; the most experienced member, provided a consensus through discussion.

2.2.4 Data Collection Process

Two independent researchers extracted the data from the eligible trials. In case of disagreement, a third reviewer, provided a consensus through discussion. Data extraction included the author, year, study population, sample size, age, intervention/comparison group, follow up periods, primary and secondary outcomes, reported adverse outcomes/events and the protocol/instructions for postoperative therapy. When insufficient data were presented, the primary author contacted the authors by email and requested further data.

2.2.5 Assessment of risk of bias in individual studies

Two independent review authors assessed the trials for risk of bias. In case of disagreement, a third reviewer, provided a consensus through discussion. The risk of bias assessment was performed using the Cochrane Risk of Bias tool.[14] The Cochrane Risk of Bias tool is based on 7 items: random sequence generation, allocation concealment, blinding of participants and personnel, blinding of outcome assessment, incomplete outcome data, selective reporting and other bias.[14] The other bias category was defined as trials that did not include statements on sources of funding and potential sources of conflicts of interest. We then rated the adequacy of each of the seven risk of bias domains as “low”, “unclear” or “high” risk according to criteria provided in the Cochrane Handbook for Systematic Reviews of Interventions.[14]

2.2.6 Assessing the quality of evidence

We used the GRADE approach for systematic reviews to assess the quality of evidence related to each outcome to summarize the extent of our confidence in the estimates of the effect.[16-21] The GRADE approach considers the risk of bias, publication bias, consistency

of findings, precision, and the applicability of the overall body of literature to provide a rating of quality of evidence (high, moderate, low, or very low) per outcome.[16-21]

2.2.7 Summary Measures

To quantify and interpret our data, a minimally clinically important difference (MCID) of 1.4 points (0 – 10) for pain,[22] a standard deviation of 0.5 points for function,[23] 11.7 degrees for active shoulder forward flexion range of motion and 4.9 degrees for active shoulder external rotation range of motion were used.[24] Timing of outcome assessment were categorized as 3 months, 6-months and 12-months only.

2.2.8 Subgroup Analysis and Exploring Heterogeneity

In the presence of heterogeneity, we planned to perform the following subgroup analyses (a priori): trials at low risk of bias (low risk of bias in allocation concealment and blinding of outcome assessor if objective outcomes were used) would show a smaller effect size. An I^2 estimate of at least 50% and a statistically significant Chi^2 statistic ($P = 0.10$) was interpreted as evidence of a substantial problem with heterogeneity.[25]

2.2.9 Synthesis of Results

We performed 12 meta-analyses of trials comparing arthroscopic vs mini open repair, using the outcome function, whether reported by WORC, DASH or Constant; pain, reported by VAS; and range of motion, at 3-, 6- and 12-month follow ups. We used the Review Manager 5.3 (RevMan 5.3) software to conduct our review and a random-effects model to pool outcomes. For outcomes of the same construct (function) that were measured using a different metric, we used the standardized mean difference (SMD). If all eligible trials

measured an outcome using the same metric (pain, flexion and external range of motion), we used a weighted mean difference (WMD).

2.3 Results

Initially, our search yielded 705 publications. After removal of the duplicates, 437 articles remained and were screened using their title and abstract; leaving 11 articles selected for full text review. Of these, 6 RCTs were eligible .[26-31] The flow of studies through the selection process is presented in Figure 2.1.

2.3.1 Study Characteristics

The 6 eligible RCTs were conducted between 2011 and 2018 and included 670 patients (337 arthroscopic and 333 mini-open). [26-31] Study size ranged from 34 to 274 patients. Trials were conducted in Japan, Germany, South Korea, Netherlands, China and Canada. [26-31] Only one out of the six trials were registered in a clinical trials registry.[29] In addition, 50% of the trials (n = 3) did not include statements on sources of funding or potential sources of conflicts of interest.[26,30-31] A summary description of all the included RCTs is displayed in Table 2.1.

2.3.2 Risk of Bias Assessment in the individual studies

The risk of bias assessment is presented in Figure 2.2. Performance bias (lack of or inadequate blinding of participants who could influence how interventions, including co-interventions are performed/administered) was rated at high risk in all the included trials (n = 6). [26-31] Detection bias (lack of or inadequate blinding of participants who could influence the measurement or interpretation of outcomes) and selective reporting bias were rated at high risk in five trials.[26 27 28 30-31] Selection bias and attrition bias (significant or

imbalanced missing outcome data) were rated at high risk in three,[26,27,31] and four trials respectively.[26,28,30-31] Other biases (RCTs with no statements on sources of funding/conflicts of interest) were rated at high risk in two trials.[26,30] Overall, all six included RCTs were rated at high risk of bias. [26-31] The inter-rater agreement using kappa (κ) coefficient was 0.91; 95% CI: 0.94 – 0.88.

2.3.3 GRADE Evidence Profile (EP) and Summary of findings (SoF)

The EP (Table – 2.2) displays a detailed quality assessment and includes a judgment of each factor that determined the quality of evidence for each outcome. The SoF tables (Table 2.3 – 2.5) include an assessment of the quality of evidence for each outcome. The inter-rater agreement using kappa (κ) coefficient was 0.90; 95% CI: 0.94 – 0.86.

2.3.4 Participants

Among the eligible RCTs, one recruited patients with an isolated rupture of the supraspinatus tendon (various degrees),[27] one included patients with rotator cuff tears smaller than 3 cm,[26] two included patients with full-thickness rotator cuff tears,[28,30] one recruited patients with partial and full thickness rotator cuff tears,[31] and one included patients with small or medium rotator cuff tears.[29]

2.3.5 Outcomes

Pain levels were measured using a Visual Analogue Scale (VAS).[26,27,28,30] Function was measured using DASH,[28,30] Constant,[27,28,30] and WORC.[29] Range of motion, in degrees was assessed in all six trials. [26-31] The follow-up period was up to 41 months postoperatively.

2.3.6 Adverse Outcomes / Events Reported:

The Cho (2012) RCT reported that in the arthroscopic group, at 6 months post-operatively, stiffness was present in 5 patients but there were no local complications (e.g., deltoid morbidity or infection), and the number of times that additional analgesics were administered was 1.0 ± 1.3.[26] In the mini-open group, at 6 months post-operatively, stiffness was present in 4 patients but there were no local complications (e.g., deltoid morbidity or infection), and the number of times that additional analgesics were administered was 1.9 ± 1.7.[26]

In Kasten (2011) RCT, in the first week postoperatively, 1.6 ± 0.9 NSAID tablets were administered to the patients in arthroscopic group, and overall, 3 patients had discontinuity of the tendon (tendon failure) in the MRI.[27] In the mini-open group, in the first week postoperatively, 2.2 ± 1.4 NSAID tablets were administered to the patients and (similarly) overall, 3 patients had discontinuity of the tendon (tendon failure) in the MRI.[27]

Liu (2017) RCT reported that in the arthroscopic group, 5 patients had rotator cuff re-tears and 6 patients had adhesive capsulitis in the end.[28] In the mini-open group 4 patients had rotator cuff re-tears and 8 patients had adhesive capsulitis in the end.[28]

MacDermid (2019) reported that in mini-open group, 2 patients suffered deep infection, 2 patients suffered a superficial wound infection and 1 patient developed adhesive capsulitis.[29] No adverse events were reported in patients in arthroscopic group.[29]

Van Der Zwaal (2013) reported that in the arthroscopic group, 8 patients suffered re-tears, 5 developed adhesive capsulitis and 1 biceps tendinopathy.[30] In the mini-open group, 6 patients suffered re-tears, 6 developed adhesive capsulitis and 1 biceps tendinopathy and 1 reported superficial infection .[30]

Zhang (2014) RCT reported that in patients in the arthroscopic group, 17 suffered with postoperative rotator cuff tears (re-tears).[31] In the mini-open group, 7 patients suffered with postoperative rotator cuff tears (re-tears).[31]

2.3.7 Effects ion Function (patient reported function)

Four studies were pooled to examine the effects of arthroscopic vs mini-open on function at 3-month follow up. The pooled results demonstrated no significant difference between arthroscopic and mini open approach to rotator cuff repair (very low quality, 4 RCTs, 495 patients, SMD 0.00, 95% CI: -0.18 to 0.18, p=0.98, Figure 2.3). We found similar results at 6-month follow up, (very low quality, 4 RCTs, 495 patients, SMD -0.01, 95% CI: -0.23 to 0.21, p=0.93, Figure 2.4) and at 12-month follow up, (very low quality, 3 RCTs, 462 patients, SMD -0.09, 95% CI: -0.28 to 0.09, p=0.31, Figure 2.5). Heterogeneity was low at 3 and 6 months and absent at 12 months. Given that an MCID is approximately 0.5 SD,[23] and that the 95% CIs at each follow up exclude the MCID of 0.5 SD, for majority of patients either approach to rotator cuff repair will result in similar functional outcomes.

2.3.8 Effects of Pain (patient reported pain)

Three studies were pooled to examine the effects of arthroscopic vs mini-open on pain levels at 3-month follow up. The pooled results, were not statistically different between groups (very low quality, 3 RCTs, 254 patients, MD -0.21, 95% CI: -0.91 to 0.50, p=0.56, Figure 2.6). We found similar results at both 6- and 12-month follow ups, (very low quality, 3 RCTs, 254 patients, MD -0.03, 95% CI: -0.25 to 0.19, p=0.80, Figure 2.7; very low quality, 2 RCTs, 194 patients, MD -0.35, 95% CI: -1.02 to 0.31, p=0.30, Figure 2.8) respectively. Heterogeneity was absent for all analyses.

2.3.9 Effects of Forward Flexion Range of Motion (performance-based function)

Five studies were pooled to examine the effects of arthroscopic vs mini-open on shoulder forward flexion range of motion at 3-month follow up. The pooled results showed no statistically significant difference between groups (very low quality, 5 RCTs, 555 patients, MD 4.26, 95% CI: -0.56 to 9.09, p=0.08, Figure 2.9). Our findings were similar at both the 6- and 12-month follow ups, (very low quality, 5 RCTs, 555 patients, MD 1.39, 95% CI: -2.12 to 4.90, p=0.44, Figure 2.10; very low quality, 3 RCTs, 461 patients, MD 2.94, 95% CI: -4.55 to 10.44, p=0.44, Figure 2.11) respectively. Heterogeneity was absent in the analysis of 3 and 6 month follow up, and because the 95% CIs exclude the MCID of 11.7°,[24] it is extremely unlikely that either approach to rotator cuff repair will result in better flexion range of motion. Heterogeneity was substantial in the analysis of 12 month follow up and our subgroup analysis of the two studies at high risk of detection bias indicated that the likely cause of substantial heterogeneity was due to inadequate blinding of outcome assessors. The one remaining MacDermid (2019) study with adequate blinding of outcome assessors showed no statistically significant difference between groups (1 RCT, 267 patients, MD -0.90, 95% CI: -5.34 to 3.54, p=0.69).

2.3.10 Effects on External Rotation Range of Motion (performance-based function)

Five studies were pooled to examine the effects of arthroscopic vs mini-open on shoulder external rotation range of motion at 3-month follow up. The pooled results, showed no statistically significant difference between groups (very low quality, 4 RCTs, 522 patients, MD 1.13, 95% CI: -2.08 to 4.33, p=0.49, Figure 2.12). Our findings were similar at the 6-month follow up (very low quality, 4 RCTs, 522 patients, MD 0.12, 95% CI: -2.82 to 3.06, p=0.94, Figure 2.13). However, at 12-month follow up the pooled results showed statistically significant difference between groups (very low quality, 3 RCTs, 462 patients,

MD 3.71, 95% CI: 0.14 to 7.28, p=0.04, Figure 2.14). Heterogeneity was absent in the analysis of 3 and 6 month follow up and low at 12 months. Given the MCID of 4.9 degrees,[24] we can confidently rule out the possibility that surgical approach will cause a difference in external rotation range of motion at 6 months.

2.4 Discussion

We aimed to summarize the current evidence of the effects of arthroscopic vs mini-open rotator cuff repair on clinical outcomes. Our forest plots for flexion and external rotation range of motion outcomes (Figures 2.9 – 2.14) displayed that when considering the results of individual studies (not pooled analyses), there is a trend, indicating that arthroscopic treatment may yield better outcomes. However, upon meta-analysis, we found no clinically important differences in function, pain, flexion or external rotation range of motion at 3-, 6- or 12-month follow ups.

The rating of very low-quality evidence per outcome across trials was based on the judgement of serious limitations (risk of bias), serious imprecision and likely publication bias in all the outcomes across trials. All six trials identified in this review were rated at high risk of bias. However, we downgraded the evidence only by one level due to the fact that we did not find statistical differences between groups, suggesting that the included studies may not have been biased. Furthermore, serious indirectness was judged as an additional factor in rating down the quality of evidence for half the outcomes across trials. The very low-quality evidence synthesized limits our confidence in the effect estimates.

The results of our systematic review and meta-analysis could not directly be compared to the findings of Shan (2014), Huang (2016) or Ji (2015) reviews. [2-4] The Shan (2014) review of 12 studies (3 RCTs, 8 retrospective studies, 1 prospective study) concluded that there were no differences in clinical outcomes of pain, function and range of motion between the arthroscopic and mini-open rotator cuff repair approaches.[4] The Huang (2016) review of 18 studies (4 RCTs, 12 retrospective studies, 2 prospective study) indicated that all-

arthroscopic and mini-open rotator cuff repair surgical approaches are associated with similar clinical outcomes of function, pain and range of motion and that both surgical techniques can be used interchangeably based factors such as patient and rotator tear characteristics.[2] However, it is important to note that the aforementioned reviews pooled studies to provide effect estimates irrespective of their design; RCTs were combined with prospective and retrospective observational studies. This greatly limits our confidence in the effect estimates.[2,4] Furthermore, the reviews failed to define an MCID threshold a priori, to further support their meta-analyses and ultimately their conclusions. The Ji (2015) review included 5 RCTs and concluded that there were no differences in clinical outcomes between the arthroscopic and mini-open rotator cuff repair techniques.[3] However, it is important to highlight the fact that this review pooled RCTs based on the last follow-up time point reported, which ranged from 6-months to 34-months.[3] It is likely that the underlying reason for the high levels of heterogeneity identified in the Ji et al. (2015) review were due to the pooling of trials with such wide range of follow-ups. In addition, the review did not provide ratings of the quality of evidence and similarly failed to define an MCID threshold a priori to further support their conclusions.

Our review provides the most up-to-date state of the evidence concerning the clinical outcomes of arthroscopic vs mini-open rotator cuff repair techniques. We provided ratings of the quality of evidence according to GRADE guidelines across each outcome, included two additional large trials and provided an analysis of precision by evaluating the MCID thresholds with the 95% confidence intervals, therefore, able to make definitive conclusions for most of the included clinical outcomes. We could not provide definitive statements on whether arthroscopic approach could offer superior outcomes in terms of external rotation range of motion at 3 and 12 months because our analysis of 555 and 462 patients respectively, did not meet the criteria for our calculated Optimal Information Size of 754 (Appendix A). As a result, it produced wider confidence intervals, therefore, MCID threshold not excluded.

Hui (2017) study of 226 patients compared the immediate costs associated in patients who received mini-open and arthroscopic rotator cuff repairs and indicated that immediate costs

incurred by mini-open rotator cuff technique were significantly less than those of arthroscopic technique. However, it is important to note that this was a retrospective study, and outcomes were only analyzed only at 1 year follow up.[32]

We have limited confidence in our conclusions. Future well-designed large-scale RCTs investigating the effects of arthroscopic vs mini-open rotator cuff repair techniques on clinical outcomes of function, pain and range of motion are warranted to generate high quality evidence (i.e. greater confidence) to further ensure that the true effect lies close to that of the estimate of the effect. In addition, future cost-effectiveness trials comparing the two surgical technique are warranted.

Both arthroscopic and mini-open approaches to rotator cuff repair with post-operative rehabilitation are effective means of improving function, pain and shoulder range of motion in patients with rotator cuff tears. Despite the very-low quality synthesized, we continue to suggest that the difference between the two surgical techniques are too small to be clinically important in terms of improving clinical outcomes of function, pain and range of motion.

We were mainly concerned with identifying RCTs and therefore, did not included prospective or retrospective observational studies in this review. It is possible that there might be a source of publication bias within our search strategy. Two independent reviewers conducted the electronic searches in all the major databases. Furthermore, a protocol registration was undertaken prior for the conduct of this review. We would also like to highlight that that the MCID chosen was for within group versus between group means, therefore, this yielded more conservative estimates and conclusions.

2.5 Conclusions

The effects of arthroscopic compared to mini-open rotator cuff repair, on function, pain and range of motion are too small to be clinically important at 3-, 6- and 12-month follow ups.

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Table 2-1 Summary of included studies.

Study	Country	Study Design	Population	Groups	Outcomes (measure)	Follow ups	Postoperative therapy (AR & MO)
Kasten et al. (2011) [27]	Germany	RCT	34 patients with isolated rupture of the supraspinatus tendon (various degrees).	AR: 17 (9 men, 8 women; 60.1 ± 8.6 yrs.) MO: 17 (12 men, 5 women; 60.1 ± 9 yrs.)	-Pain levels (VAS 0 – 10). -Function (Constant). -Pain and ADL (ASES). -Range of motion. -Patient satisfaction.	1 – 12 weeks 3, 6 months 3, 6 months 3, 6 months 6 months	Four weeks abduction pillow with 30° of abduction and passive ROM exercises by a physiotherapist. Active ROM of the arm without limitations was allowed. Patients continued home exercises with a frequency of 2.5×/week in the AR group and 2.6×/week in the MO group.
Cho et al. (2012) [26]	South Korea	RCT	60 patients scheduled to undergo repair for rotator cuff tears smaller than 3 cm.	AR: 30 (17 men, 13 women; 55.5 ± 7.8 yrs.) MO: 30 (17 men, 13 women; 56.2 ± 7.9 yrs.)	-Pain levels (VAS 0 – 10). -Range of motion.	1 – 5 days, 2,6 weeks, 3 and 6 months. 5 days, 6 weeks, 3 and 6 months.	Wearing an abduction brace, patients engaged in pendulum and continuous passive motion machine exercises until postoperative day 5, and then passive range-of-motion exercises were started. Active range-of motion exercises were started at 6 weeks postoperatively, muscle-strengthening exercises were started at 3 months, and occupational or sports activities were started at 6 months.
Van der Zwaal et al. (2013) [30]	Netherlands	RCT	95 patients with full-thickness rotator cuff tears.	AR: 47 (29 men, 18 women; 57.2 ± 8 yrs.) MO: 48 (28 men, 20 women; 57.8 ± 7.9 yrs.)	-Pain levels (VAS 0 – 10). -Range of motion. -Function (Dash, Constant).	6, 12, 26 and 52 weeks	Active exercises of the elbow, wrist, and hand were encouraged immediately. The rehabilitation protocol consisted of active abduction in the scapular plane limited to 70° and 0° of external rotation in the first 4 to 6 weeks as tolerated. After this, active range of motion exercises were started. When the patient was free of pain, scapula and rotator cuff isotonic strengthening exercises were initiated.
Zhang et al. (2014) [31]	China	RCT	108 patients with partial & full thickness rotator cuff tears.	AR: 55 (28 men, 27 women; 53.9 yrs.) MO: 53 (27 men, 26 women; 54.2 yrs.)	-Pain, function, range of motion, strength, and patient satisfaction (UCLA). -Pain and ADL (ASES). -Muscle strength. -Range of motion.	mean of 29.4 months (range 24–35 months).	Continuous passive motion machine exercise was initiated from the first day after surgery. Patients used the machine for 2 h a day until discharge from the hospital. The arc of motion of the continuous passive motion was maintained within the comfortable range, which was < 80°elevation. The gentle pendulum exercise was started from the third to fifth day and continued to the first post-operative visit, which was 3 weeks after surgery. Thereafter, the passive and active assisted range of motion exercises were started using a rope and pulley. The rehabilitation was continued for 6 months.
Liu et al. (2017) [28]	China	RCT	99 patients with full thickness rotator cuff tears.	AR: 50 (25 men, 25 women; 53.5 ± 4.3 yrs.) MO: 49 (24 men, 25 women; 52.5 ± 5 yrs.)	-Pain levels (VAS 0 – 10). -Range of motion. -Function (Dash, Constant).	3 days, 1,2 weeks, 1,3,6 months and 1 year.	Wearing an abduction brace, patients engaged in pendulum and continuous passive motion machine exercises until postoperative day 5, and then passive range-of-motion exercises were started. Active range-of-motion exercises were started at 6 weeks postoperatively, muscle-strengthening exercises were started at 3 months, and occupational or sports activities were started at 6 months.
MacDermid et al. (2018) [29]	Canada	RCT	274 patients with small or medium rotator cuff tears.	AR: 138 (85 men, 53 women; 55.8 ± 8.5 yrs.) MO: 136 (80 men, 56 women; 54.6 ± 10.1 yrs.)	-Function / quality of life (WORC). - Pain and ADL (ASES, SPADI). -Health related quality of life (SF-12) -Range of motion.	6 weeks, 3,6,12,18 and 24 months.	Standardized rehabilitation protocol of progressive mobilization and strengthening, which was semi-specific and adapted to patient presentation by their physical therapist. Adherence was monitored to rehab milestones at 2 weeks, 6 weeks and 3 months

	-Strength.	postoperative by asking the physical therapist to report the date when the patient was no longer wearing their sling, when active-assisted, strengthening, and functional endurance exercises had begun. The therapist was also asking to indicate whether the patient was compliant with activity precautions throughout recovery, whether the patient was progressing as expected and to describe any off-protocol or worrisome findings.

Table 2-2. GRADE Evidence Profile Arthroscopic vs Mini-open for Patients with Rotator cuff Tears

Quality Assessment						Summary of Findings			
Outcome (No. of studies; design)	Limitations	Inconsistency	Indirectness	Imprecision	Publication Bias	Mini-open	Arthroscopic	SMD / MD (95 % CI)	Quality
Function at 3 months (4 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Likely	247/495	248/495	SMD 0.00 (-0.18 – 0.18)	⊕⊖⊖⊖ very low
Function at 6 months (4 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Likely	247/495	248/495	SMD -0.01 (-0.23 – 0.21)	⊕⊖⊖⊖ very low
Function at 12 months (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Likely	231/462	231/462	SMD -0.09 (-0.28 – 0.09)	⊕⊖⊖⊖ very low
Pain at 3 months (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Likely	127/254	127/254	MD -0.21 (-0.91 – 0.50)	⊕⊖⊖⊖ very low
Pain at 6 months (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Likely	127/254	127/254	MD -0.03 (-0.25 – 0.19)	⊕⊖⊖⊖ very low
Pain at 12 months (2 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Likely	97/194	97/194	MD -0.35 (-1.02 – 0.31)	⊕⊖⊖⊖ very low
ROM – Forward flexion at 3 months (5 RCTs)	Serious limitations	No serious inconsistency	Serious indirectness	Serious imprecisions	Likely	277/555	278/555	MD 4.26 (-0.56 – 9.09)	⊕⊖⊖⊖ very low
ROM – Forward flexion at 6 months (5 RCTs)	Serious limitations	No serious inconsistency	Serious indirectness	Serious imprecisions	Likely	277/555	278/555	MD 1.39 (-2.12 – 4.90)	⊕⊖⊖⊖ very low
ROM – Forward flexion at 12 months (3 RCTs)	Serious limitations	Serious inconsistency	Serious indirectness	Serious imprecisions	Likely	231/461	230/461	MD 2.94 (-4.55 – 10.44)	⊕⊖⊖⊖ very low
ROM – External Rotation at 3 months (4 RCTs)	Serious limitations	No serious inconsistency	Serious indirectness	Serious imprecisions	Likely	261/522	261/522	MD 1.13 (-2.08 – 4.33)	⊕⊖⊖⊖ very low
ROM – External Rotation at 6 months (5 RCTs)	Serious limitations	No serious inconsistency	Serious indirectness	Serious imprecisions	Likely	261/522	261/522	MD 0.12 (-2.82 – 3.06)	⊕⊖⊖⊖ very low
ROM – External Rotation at 12 months (3 RCTs)	Serious limitations	No serious inconsistency	Serious indirectness	Serious imprecisions	Likely	231/462	231/462	MD 3.71 (0.14 – 7.28)	⊕⊖⊖⊖ very low

Table 2-3. Summary Findings. Arthroscopic vs Open-mini repair for rotator cuff tears (3-month).

Population: patients with rotator cuff tears.
Settings: inpatient clinics.
Intervention: arthroscopic rotator cuff repair
Comparison: mini-open rotator cuff repair.
Follow up: 3-months.

Outcomes	SMD / MD (95% C.I.)	No of participants (studies)	Quality of the evidence (GRADE)
Function: DASH, Constant, WORC: (0 to 100). Higher values indicate better function	SMD 0.00 (-0.18 – 0.18)	495 (4 studies)	⊕⊖⊖⊖ very low[1,2,4]
Pain: VAS (0 – 10) Lower values indicate improved pain.	MD -0.21 (-0.91 – 0.50)	254 (3 studies)	⊕⊖⊖⊖ very low[1,2,4]
Range of motion: (forward flexion °) Higher values indicate better range of motion.	MD 4.26 (-0.56 – 9.09)	555 (5 studies)	⊕⊖⊖⊖ very low[1,2,3,4]
Range of motion: (external rotation °) Higher values indicate better range of motion.	MD 1.13 (-2.08 – 4.33)	522 (4 studies)	⊕⊖⊖⊖ very low[1,2,3.4]

Abbreviations: VAS; visual analogue scale, DASH; Disabilities of Arm, Shoulder and Hand, WORC; western Ontario rotator cuff index, SMD; standardized mean difference, MD; mean difference, CI; confidence interval.

[1]We downgraded by one level due to high risk of bias.
[2]We downgraded by one level due to a relatively small sample size.
[3]We downgraded by one level due to indirectness (surrogate outcomes).
[4]We downgraded by one level due to publication bias.
[5]We downgraded by one level due to inconsistency.

GRADE quality of evidence:
High quality: We are very confident that the true effect lies close to that of the estimate of the effect.
Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low quality: our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect.
Very low quality: we have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect.

Table 2-4. Summary of Findings. Arthroscopic vs Open-mini repair for rotator cuff tears (6-month).

Population: patients with rotator cuff tears.
Settings: inpatient clinics.
Intervention: arthroscopic rotator cuff repair
Comparison: mini-open rotator cuff repair.
Follow up: 6-months.

Outcomes	SMD / MD (95% C.I.)	No of participants (studies)	Quality of the evidence (GRADE)
Function: DASH, Constant, WORC: (0 to 100). Higher values indicate better function	SMD -0.01 (-0.23 – 0.21)	495 (4 studies)	⊕⊖⊖⊖ very low[1,2,4]
Pain: VAS (0 – 10) Lower values indicate improved pain.	MD -0.03 (-0.25 – 0.19)	254 (3 studies)	⊕⊖⊖⊖ very low[1,2,4]
Range of motion: (forward flexion °) Higher values indicate better range of motion.	MD 1.39 (-2.12 – 4.90)	555 (5 studies)	⊕⊖⊖⊖ very low[1,2,3,4]
Range of motion: (external rotation °) Higher values indicate better range of motion.	MD 0.12 (-2.82 – 3.06)	522 (4 studies)	⊕⊖⊖⊖ very low[1,2,3.4]

Abbreviations: VAS; visual analogue scale, DASH; Disabilities of Arm, Shoulder and Hand, WORC; western Ontario rotator cuff index, SMD; standardized mean difference, MD; mean difference, CI; confidence interval.

[1]We downgraded by one level due to high risk of bias.
[2]We downgraded by one level due to a relatively small sample size.
[3]We downgraded by one level due to indirectness (surrogate outcomes).
[4]We downgraded by one level due to publication bias.
[5]We downgraded by one level due to inconsistency.

GRADE quality of evidence:
High quality: We are very confident that the true effect lies close to that of the estimate of the effect.
Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low quality: our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect.
Very low quality: we have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect.

Table 2-5. Summary of Findings. Arthroscopic vs Open-mini repair for rotator cuff tears (12-month).

Population: patients with rotator cuff tears.
Settings: inpatient clinics.
Intervention: arthroscopic rotator cuff repair
Comparison: mini-open rotator cuff repair.
Follow up: 12-months.

Outcomes	SMD / MD (95% C.I.)	No of participants (studies)	Quality of the evidence (GRADE)
Function: DASH, WORC: (0 to 100). Higher values indicate better function	SMD -0.09 (-0.28 – 0.09)	462 (3 studies)	⊕⊖⊖⊖ very low[1,2,4]
Pain: VAS (0 – 10) Lower values indicate improved pain.	MD -0.35 (-1.02 – 0.31)	194 (2 studies)	⊕⊖⊖⊖ very low[1,2,4]
Range of motion: (forward flexion °) Higher values indicate better range of motion.	MD 2.94 (-4.55 – 10.44)	461 (3 studies)	⊕⊖⊖⊖ very low[1,2,3,4,5]
Range of motion: (external rotation °) Higher values indicate better range of motion.	MD 3.71 (0.14 – 7.28)	462 (3 studies)	⊕⊖⊖⊖ very low[1,2,3,4]

Abbreviations: VAS; visual analogue scale, DASH; Disabilities of Arm, Shoulder and Hand, WORC; western Ontario rotator cuff index, SMD; standardized mean difference, MD; mean difference, CI; confidence interval.

[1]We downgraded by one level due to high risk of bias.
[2]We downgraded by one level due to a relatively small sample size.
[3]We downgraded by one level due to indirectness (surrogate outcomes).
[4]We downgraded by one level due to publication bias.
[5]We downgraded by one level due to inconsistency.

GRADE quality of evidence:
High quality: We are very confident that the true effect lies close to that of the estimate of the effect.
Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low quality: our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect.
Very low quality: we have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect.

Figure 2-1 Selection of studies for inclusion in the systematic review.

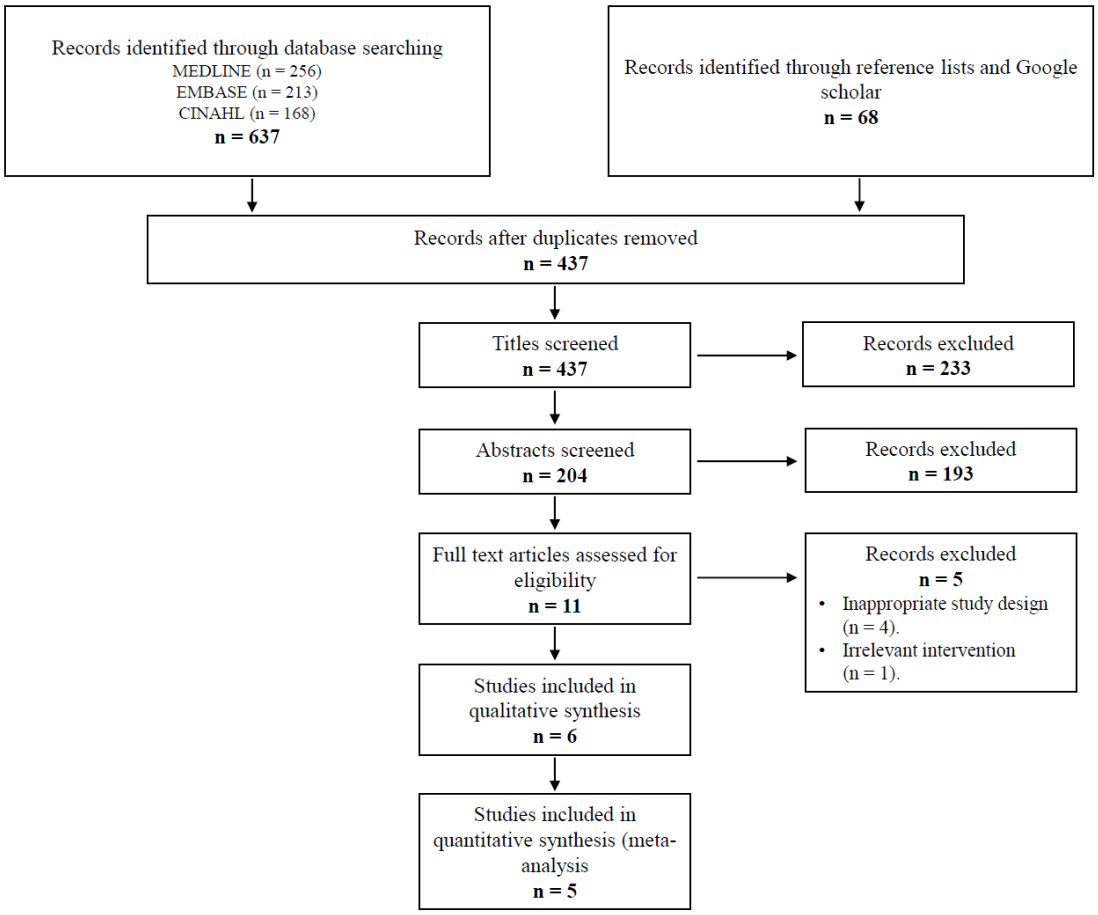


Figure – 1. Selection of studies for inclusion in the systematic review.

Figure 2-2 Risk of bias summary: review authors' judgements about each risk of bias item for each included study.

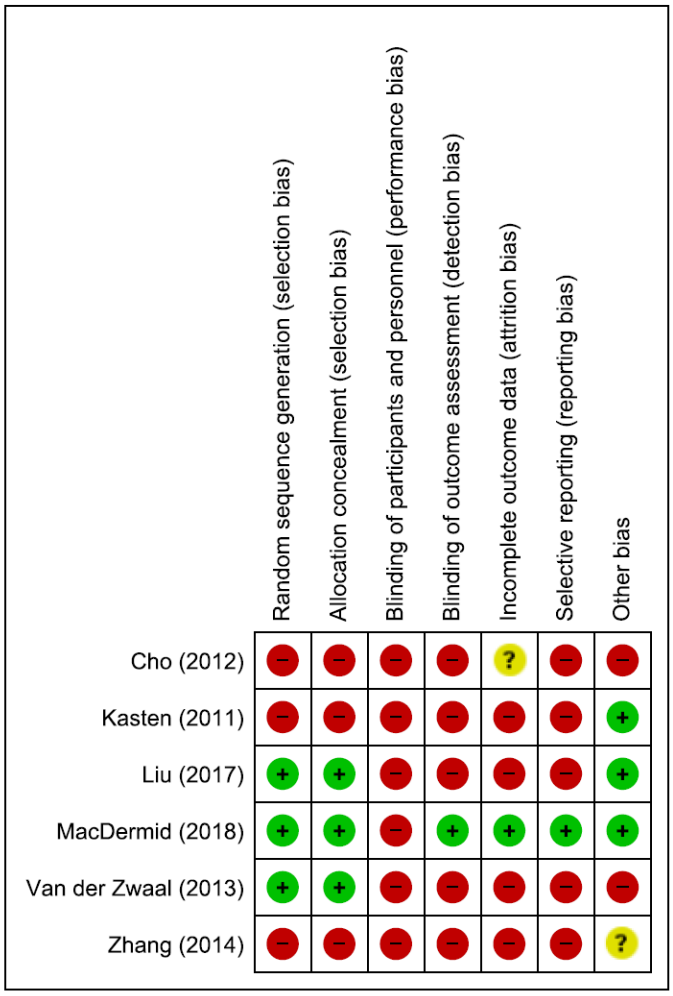


Figure 2-3 Forest plot of comparison: Arthroscopic vs Open-mini, 3 months after surgery – rotator cuff repair, outcome: Function (DASH, Constant, WORC), 4 RCTs. Higher values indicate better/improved function.

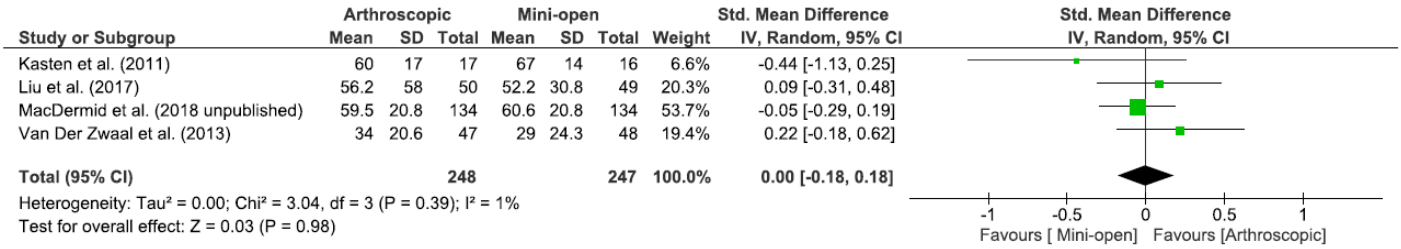


Figure 2-4 Forest plot of comparison: Arthroscopic vs Open-mini, 6 months after surgery – rotator cuff repair, outcome: Function (DASH, Constant, WORC), 4 RCTs. Higher values indicate better/improved function.

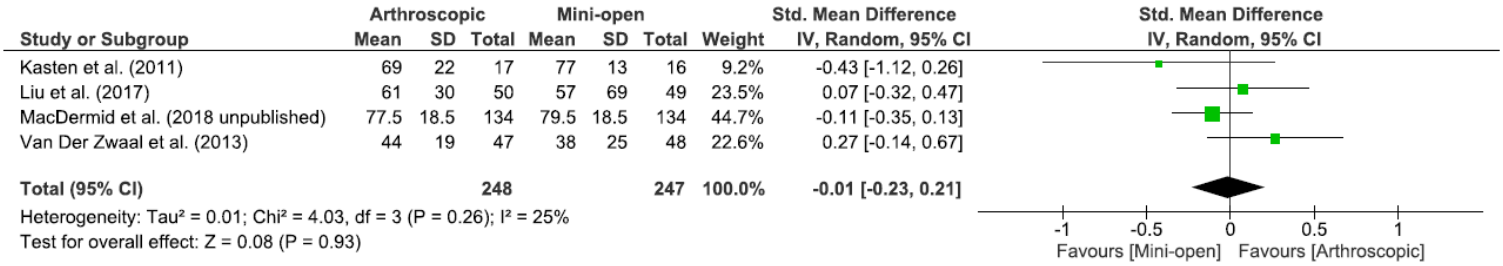


Figure 2-5 Forest plot of comparison: Arthroscopic vs Open-mini, 12 months after surgery – rotator cuff repair, outcome: Function (DASH, WORC), 3 RCTs. Higher values indicate better/improved function.

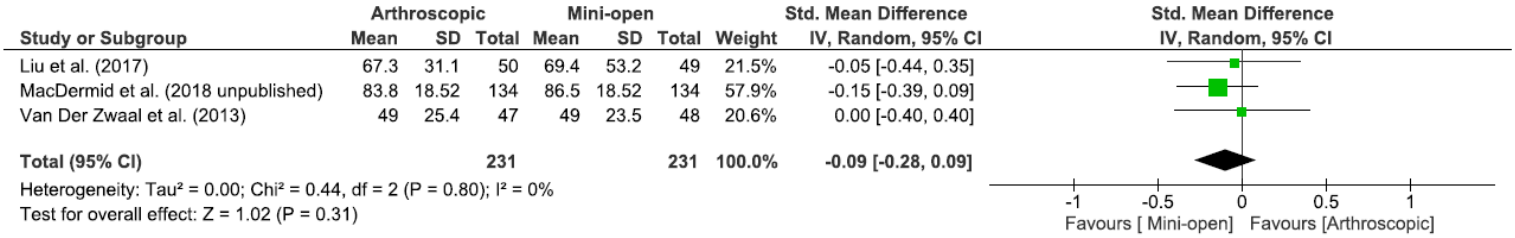


Figure 2-6 Forest plot of comparison: Arthroscopic vs Open-mini, 3 months after surgery – rotator cuff repair, outcome: Pain (VAS 0 – 10), 3 RCTs. Lower values indicate better/improved pain.

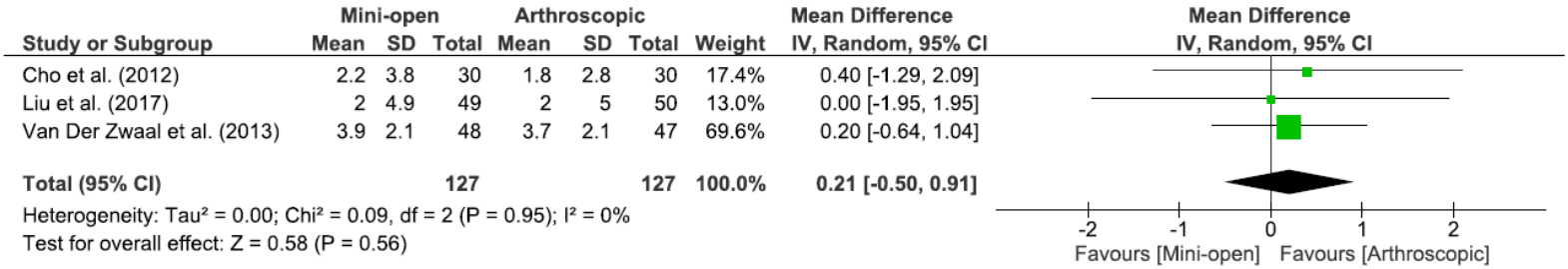


Figure 2-7 Forest plot of comparison: Arthroscopic vs Open-mini, 6 months after surgery – rotator cuff repair, outcome: Pain (VAS 0 – 10), 3 RCTs. Lower values indicate better/improved pain.

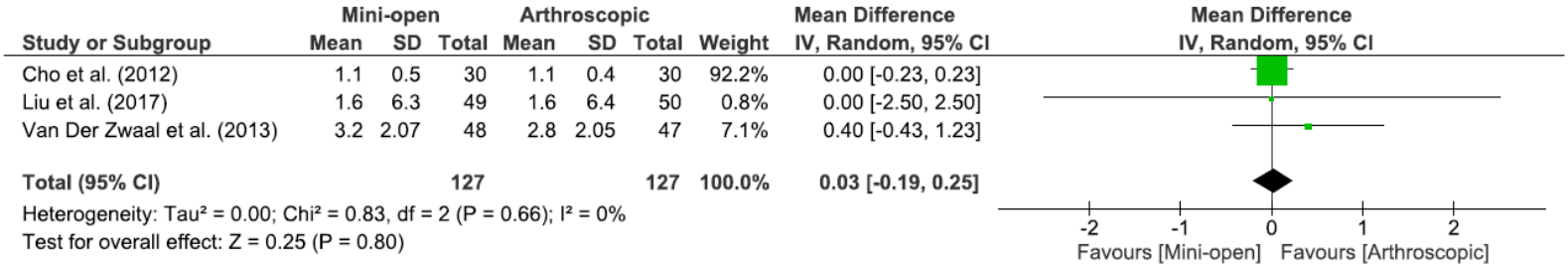


Figure 2-8 Forest plot of comparison: Arthroscopic vs Open-mini, 12 months after surgery – rotator cuff repair, outcome: Pain (VAS 0 – 10), 2 RCTs. Lower values indicate better/improved pain.

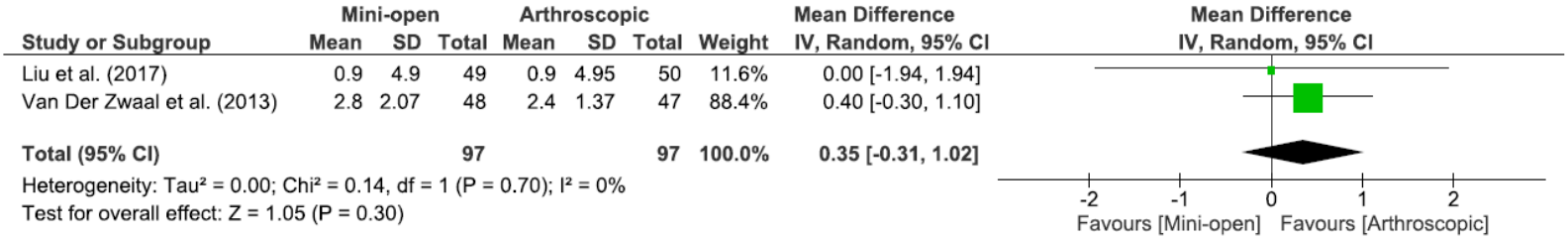


Figure 2-9 Forest plot of comparison: Arthroscopic vs Open-mini, 3 months after surgery – rotator cuff repair, outcome: ROM (Forward Flexion °), 5 RCTs. Higher values indicate better/improved ROM.

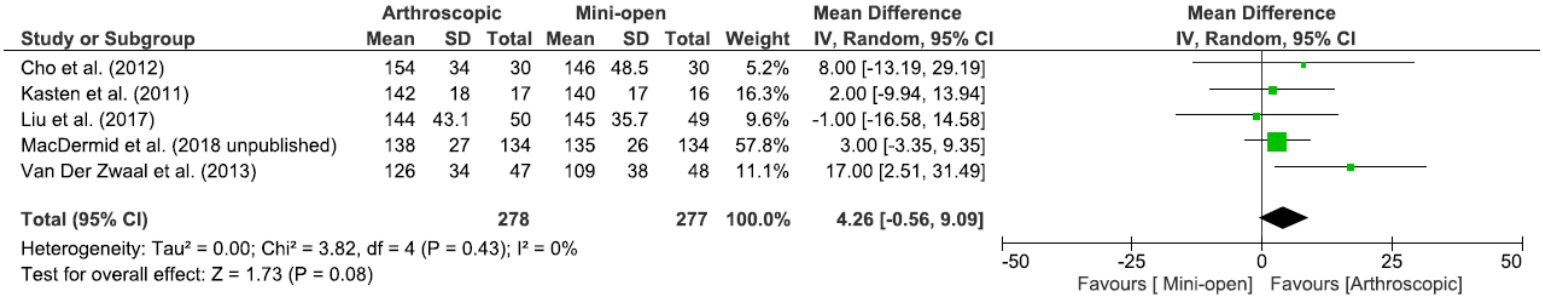


Figure 2-10 Forest plot of comparison: Arthroscopic vs Open-mini, 6 months after surgery – rotator cuff repair, outcome: ROM (Forward Flexion °), 5 RCTs. Higher values indicate better/improved ROM.

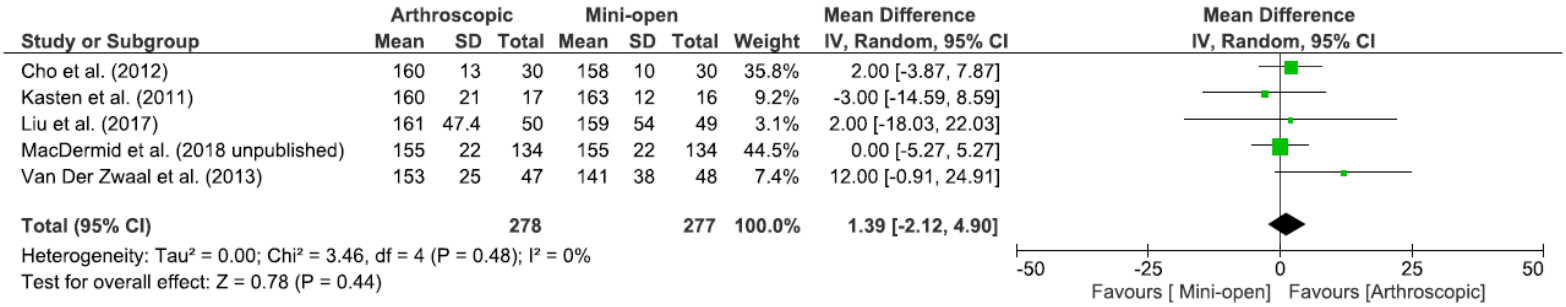


Figure 2-11 Forest plot of comparison: Arthroscopic vs Open-mini, 12 months after surgery – rotator cuff repair, outcome: ROM (Forward Flexion °), 3 RCTs. 1.1.2 Subgroup analysis by high risk of detection bias, 2 RCTs. Higher values indicate better/improved ROM.

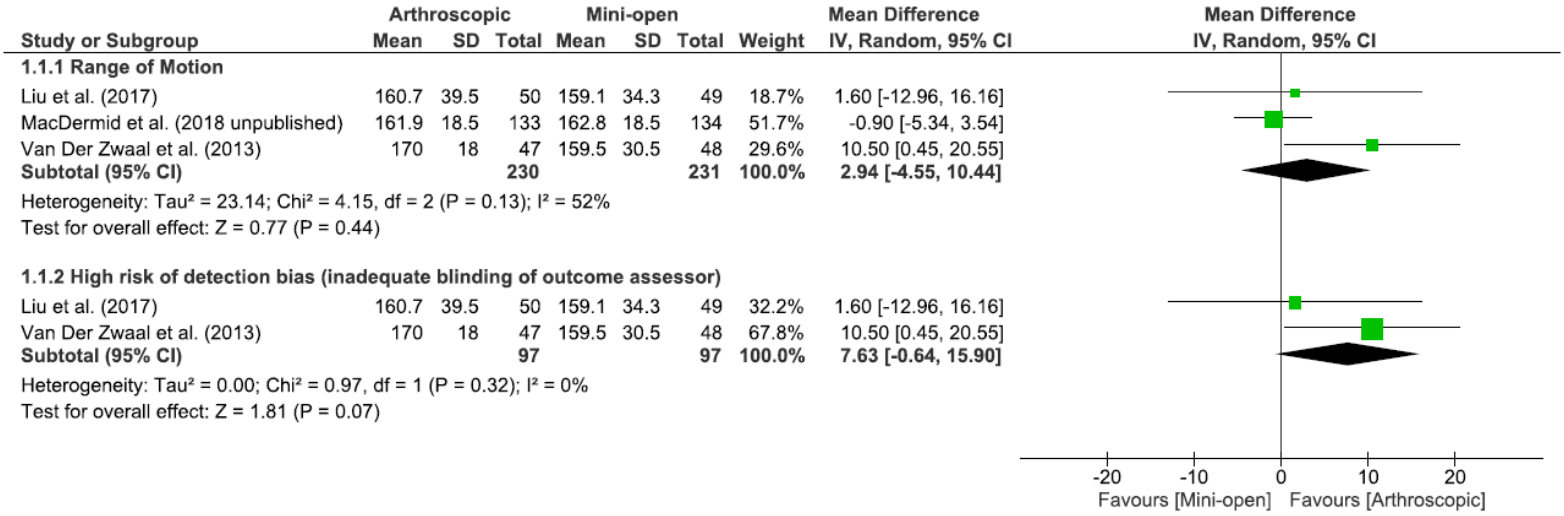


Figure 2-12 Forest plot of comparison: Arthroscopic vs Open-mini, 3 months after surgery – rotator cuff repair, outcome: ROM (External Rotation °), 5 RCTs. Higher values indicate better/improved ROM.

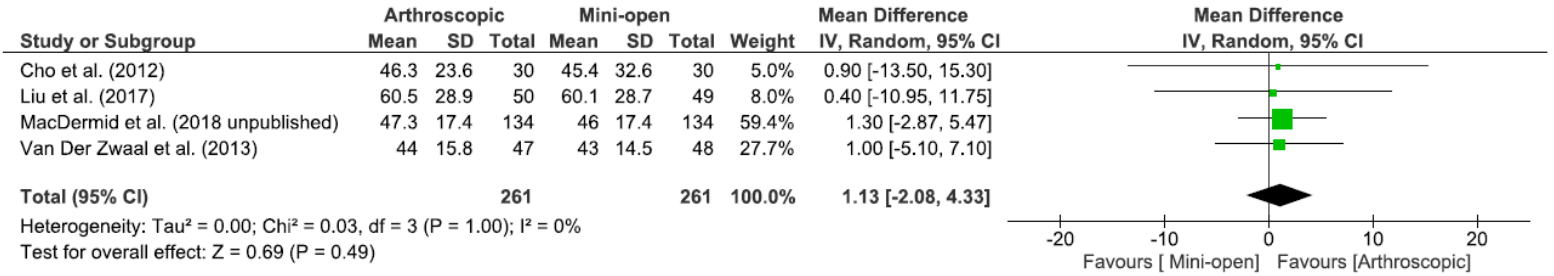


Figure 2-13 Forest plot of comparison: Arthroscopic vs Open-mini, 6 months after surgery – rotator cuff repair, outcome: ROM (External Rotation °), 4 RCTs. Higher values indicate better/improved ROM.

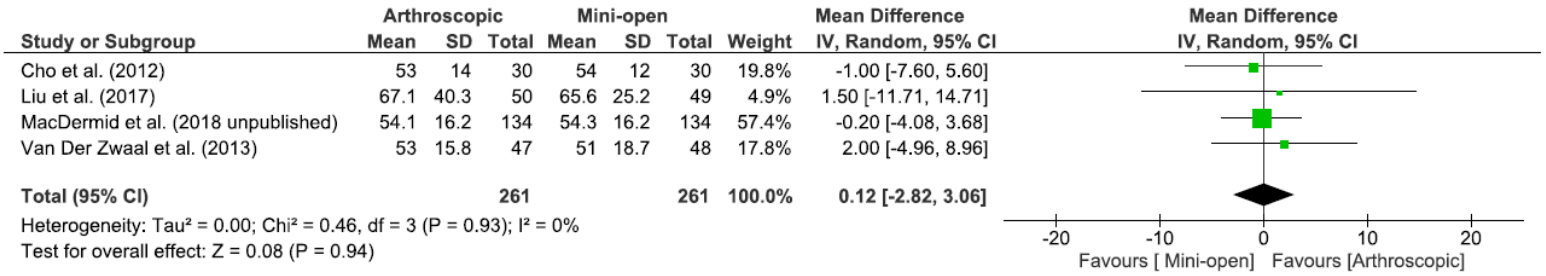
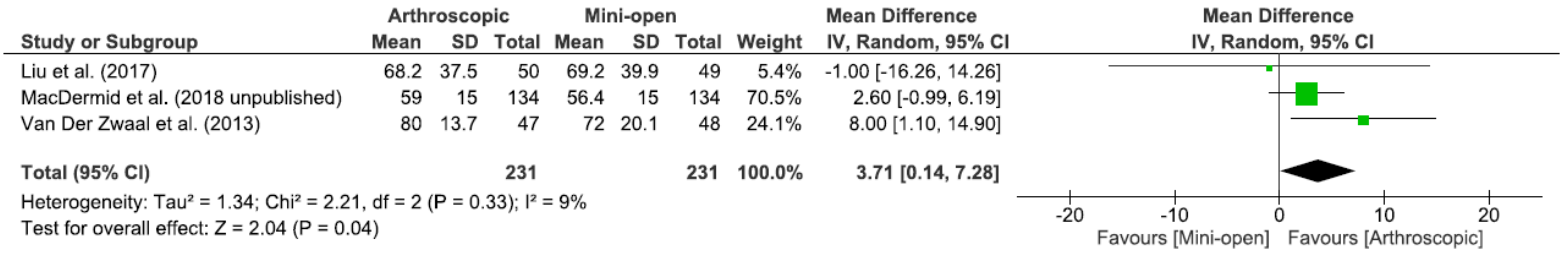


Figure 2-14 Forest plot of comparison: Arthroscopic vs Open-mini, 12 months after surgery – rotator cuff repair, outcome: ROM (External Rotation °), 3 RCTs. Higher values indicate better/improved ROM.



Chapter 3

3 The effectiveness of Surgical vs Conservative Interventions on Pain and Function in Patients with Subacromial/Shoulder Impingement Syndrome. A Systematic Review and Meta-analysis.

Abstract

Objective: To assess the effectiveness of surgical vs conservative interventions on pain and function in patients with subacromial impingement syndrome.

Design: Systematic review and meta-analysis of randomized controlled trials.

Setting: Clinical setting.

Participants: Patients 18 years and older with subacromial impingement syndrome.

Intervention/Comparison: Surgical intervention plus postoperative physiotherapy vs placebo surgery plus physiotherapy or physiotherapy only.

Main Outcome Measures: Pain and function.

Results: 11 RCTs (n = 919) were included. The pooled results displayed no statistically or clinically important differences between surgery plus physiotherapy vs physiotherapy alone on pain levels at 3-, 6-months or 5-, 10-years follow up (moderate quality, 3 RCTs, 300 patients, WMD -0.39, 95% CI: -1.02 to 0.23, p=0.22, 3-months; moderate quality, 3 RCTs, 310 patients, WMD -0.36, 95% CI: -1.02 to 0.29, p=0.27, 6-months; low quality, 1 RCT, 109 patients, WMD -0.30, 95% CI: -1.54 to 0.94, p=0.64, 5-years; low quality, 1 RCT, 90 patients, WMD -1.00, 95% CI: -0.24 to 2.24, p=0.11, 10-years). Similarly, the pooled results were not statistically or clinically different between groups for function at 3-, 6-month and 1-year follow ups (very low quality, 2 RCTs, 184 patients, SMD 0.11, 95%

CI: -0.57 to 0.79, p=0.75, 3-months; moderate quality, 3 RCTs, 310 patients, SMD 0.15, 95% CI: -0.14 to 0.43, p=0.31, 6-months; very low quality, 2 RCTs, 197 patients, SMD 0.11, 95% CI: -0.46 to 0.69, p=0.70, 1-year).

Conclusion: The effects of surgery plus physiotherapy compared to physiotherapy alone on improving pain and function are too small to be clinically important at 3-, 6-months, 1-, 2-, 5- and ≥ 10-years follow up.

Keywords: shoulder impingement, subacromial impingement syndrome, rehabilitation, physiotherapy, placebo surgery, rotator cuff tendinitis, bursitis.

3.1 Introduction

Shoulder pain is regarded as one of the most frequently reported non-traumatic complaints that arise from the arm, neck and shoulder regions,[1] with high prevalence rates across multiple countries.[2-5] Prevalence rates of shoulder pain among the general population have been estimated to be approximately 6% in Canada [2], 14% in UK [3], 27% in US [4], and 22% in Australia (North West Adelaide).[5] Shoulder pain is believed to be a significant symptom of shoulder / subacromial impingement syndrome – a set of clinical and radiological findings that pertains to tendinitis and bursitis of the rotator cuff and adjacent tissues.[1,6] Shoulder impingement syndrome is associated with reduction in function, quality of life and mobility.[7]

The available treatment options for shoulder impingement syndrome include both conservative approaches mainly physiotherapy exercises, and surgical techniques – arthroscopic surgical decompression. It is suggested that exercise be considered as the primary conservative treatment option for shoulder impingement.[8] The Steuri (2017) systematic review demonstrated that exercise treatment programs yield superior outcomes in pain when compared to non-exercise controls in patients with shoulder impingement (very low quality, 5 RCTs, 189 patients, SMD -0.94, 95% CI: -1.69 to -0.19).[8] Similarly, improvements in function were superior in exercise treatment programs compared to non-exercise controls, (very low quality, 4 RCTs, 202 patients, SMD -0.57, 95% CI: -0.85 to -0.29).[8] Alternatively, arthroscopic surgical decompression option may be indicated in patients with persistent severe subacromial shoulder pain along with functional limitations that have not improved in response to conservative (exercises) treatment options.[9] The Steuri (2017) review also indicated that there was insufficient evidence to display whether exercise is as good as (not worse than) surgery.[8]

Multiple newly published individual RCTs have shown that a surgical approach such as arthroscopic surgical decompression improves both shoulder pain and disability, while others have found similar benefits through physiotherapy (exercise therapy) interventions – mainly exercises. Paavola (2018) trial displayed a statistically significant benefit of arthroscopic surgical decompression over exercise therapy in shoulder pain at rest and on arm activity at 2-years follow up.[10] Similarly, Beard (2018) trial indicated statistically

significant improvements in patient-important outcomes with subacromial decompression at 1-year follow up.[9] However, these improvements were of uncertain clinical importance.[9] Conversely, Farfaras (2018) trial demonstrated that subacromial decompression yielded better clinical results (improvements in function) than physiotherapy alone after a (minimum) 10-year follow-up.[11]

Systematic reviews (Saltychev 2015; Steuri 2017),[1,8] have provided useful, but conflicting insights on the current state of the evidence concerning the effectiveness of surgery vs conservative approaches on clinical outcomes in patients with shoulder impingement syndrome. Saltychev (2015) concluded that there is moderate evidence indicating surgical treatment is no more effective than active exercises on reducing pain intensity caused by shoulder impingement,[1] whereas, Steuri (2017) concluded that there was insufficient evidence to display whether exercise is as good as surgery.[8] Given the increase in the number of newly published randomized controlled trials (new RCTs, n = 6) on this topic, an up-to-date review which incorporates the most recent available evidence is needed. Therefore, the objective of this review was to quantify the effects of surgical vs conservative (physiotherapy exercises) interventions on clinical outcomes of pain and function in patients with subacromial impingement syndrome at 3- and 6-months, 1-, 2-, 5- and ≥ 10- years follow up.

3.2 Methods

We followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) and Cochrane collaboration guidelines.[12-13] PROSPERO registration number: CRD 42018115632.

3.2.1 Eligibility Criteria

Studies were included in this systematic review if the below criteria were met: [1,8]

- Design: randomized controlled trial (RCT), published in a peer reviewed journal,
- Participants: patients 18 years and older with subacromial pain / impingement syndrome,
- Intervention / Comparison: RCTs that compared patients who received surgical intervention and postoperative physiotherapy exercises vs placebo surgical intervention and postoperative physiotherapy exercises or physiotherapy exercises only,
- Outcomes: pain and function

Studies that included patients with rotator cuff tears, degenerative arthritis, rheumatoid arthritis of glenohumeral joint, adhesive capsulitis/ shoulder fractures / previous surgery, or that were conference abstracts or posters were excluded from this systematic review.

3.2.2 Information Sources

We conducted systematic electronic searches to identify relevant randomized controlled trials in MEDLINE, EMBASE, CINAHL and PubMed from January 1998 to November 2018. Several different combinations of keywords were used, such as: “shoulder impingement”, “subacromial impingement syndrome”, “randomized controlled trials”, “arthroscopic subacromial decompression”, “open subacromial decompression”, “rehabilitation”, “conservative”, “physiotherapy”. In addition, we also performed a search in the PROSPERO database and clinical trial registers catalogues (ClinicalTrials.gov, EU registry and ISRCTN registry) and carried out a manual search of the reference lists of the previous systematic reviews and the references of all the included articles.

3.2.3 Study Selection

Selection of individual RCTs involved two independent reviewers who carried out the systematic electronic searches in each database. Duplicate studies were identified and removed. Next, we independently screened the titles and abstracts. We then retrieved in

full text any study marked include or uncertain by either reviewer. Finally, we carried out an independent full text review to determine final eligibility.

3.2.4 Data Collection Process

Two independent researchers extracted the data from the eligible trials. Data extraction included the authors, year, country, study population, sample size, age, intervention/comparison group, primary and secondary outcomes, adverse outcomes/events reported, follow up periods and the protocols for the surgical interventions and postoperative physiotherapy exercises. When insufficient data were presented, the primary author contacted the authors by email and requested further data.

3.2.5 Assessment of Risk of Bias in Individual Studies

Two independent review authors assessed the trials for risk of bias. The risk of bias assessment was carried out using the Cochrane Risk of Bias tool.[12] The Cochrane Risk of Bias tool is based on 7 items: random sequence generation, allocation concealment, blinding of participants and personnel, blinding of outcome assessment, incomplete outcome data, selective reporting and other bias.[12] We defined the other bias category as trials that did not include statements on sources of funding/conflicts of interest . We then summarized the assessment of risk of bias per outcome across trials as provided in the Cochrane Handbook for Systematic Reviews of Interventions, as low risk of bias (if low risk of bias was judged for random sequence generation, allocation concealment, blinding of participants/personnel, blinding of outcome assessment, incomplete outcome data, selective reporting and other bias); as unclear risk of bias (if unclear risk of bias was judged for one or more of random sequence generation, allocation concealment, blinding of participants/personnel, blinding of outcome assessment, incomplete outcome data, selective reporting and other bias); and, as high risk of bias (if high risk of bias was judged for one or more of random sequence generation, allocation concealment, blinding of

participants/personnel, blinding of outcome assessment, incomplete outcome data, selective reporting and other bias).[12]

3.2.6 Assessing the quality of evidence

The GRADE approach for systematic reviews was used to assess the quality of evidence related to each outcome and to summarize the extent of our confidence in the estimates of the effect.[14-20] The GRADE approach considers the risk of bias, publication bias, consistency of findings, precision, and the applicability of the overall body of literature to provide a rating of quality of evidence (high, moderate, low, or very low) per outcome.[14-20]

3.2.7 Summary Measures

To quantify and interpret our data, minimally clinically important differences (MCID) of 1.5 points (0 – 10) for pain,[21] a standard deviation of 0.5 points for function were used.[22] Timing of outcome assessments were reported at 3- and 6-months, 1-, 2-, 5- and ≥ 10-years follow up.

3.2.8 Subgroup Analysis and Exploring Heterogeneity

In the presence of heterogeneity, we planned to conduct the following subgroup analyses (a priori): trials at low risk of bias (low risk of bias in allocation concealment and blinding of outcome assessor if objective outcomes were used) would show a smaller effect size. An I^2 estimate of at least 50% and a statistically significant Chi^2 statistic (P = 0.10) was interpreted as evidence of a substantial problem with heterogeneity.[23]

3.2.9 Synthesis of Results

We performed 19 meta-analyses of trials comparing surgical intervention and postoperative rehabilitation or placebo surgical intervention and postoperative rehabilitation vs rehabilitation only, at 3- and 6-months, 1-, 2-, 5- and ≥ 10-years follow up. We used the Review Manager 5.3 (RevMan 5.3) software to conduct our review and a random-effects model to pool outcomes. For outcomes of the same construct that were measured using a different metric, we used the standardized mean difference (SMD). If all eligible trials measured an outcome using the same metric, we used a weighted mean difference (WMD).

3.3 Results

Initially, our search yielded 861 publications. After removal of the duplicates, 412 articles remained and were screened using their title and abstract; leaving 26 articles selected for full text review. Of these, 11 RCTs were eligible.[9-11, 24-31] The flow of studies through the selection process is presented in Figure 3.1.

3.3.1 Study Characteristics

The 11 eligible RCTs were conducted between 1998 and 2018 and included 919 patients (376 surgery plus physiotherapy, 273 physiotherapy alone, and 166 placebo surgery plus physiotherapy, 104 no treatment). [9-11, 24-31] Study size ranged from 39 to 313 patients. Trials were conducted in Norway, Sweden, Denmark, Finland and United Kingdom.[9-11, 24-31] A summary description of all the included RCTs is displayed in Table 3.1.

3.3.2 Risk of Bias Assessment in the Individual Studies

The risk of bias assessment is presented in Figure 3.2. Performance bias (lack of or inadequate blinding of participants who could influence how interventions, including co-interventions are performed/administered) was rated at high risk in all the included trials (n = 11).[9-11, 24-31] Selective reporting bias were rated at high risk in nine trials.[11, 24-31] Detection bias (lack of or inadequate blinding of participants who could influence the measurement or interpretation of outcomes) and attrition bias (significant or imbalanced missing outcome data) were rated at high risk in three trials.[11,25-27,30] Selection bias and other biases (RCTs with no statements on sources of funding/conflicts of interest) were rated at high risk in two trials.[24-25] Overall, all eleven included RCTs were rated at high risk of bias. [9-11, 24-31] The inter-rater agreement using kappa (κ) coefficient was 0.94; 95% CI: 0.98 – 0.90.

3.3.3 GRADE Evidence Profile and Summary of Findings (SoF)

The EP (Table 3.2) displays a detailed quality assessment and includes a judgment of each factor that determined the quality of evidence for each outcome. The SoF tables (Table 3.4 – 3.7) includes an assessment of the quality of evidence for each outcome. The inter-rater agreement using kappa (κ) coefficient was 0.92; 95% CI: 0.96 – 0.88.

3.3.4 Participants / Outcomes

The 11 included RCTs recruited patients with subacromial impingement syndrome/subacromial pain. [9-11, 24-31] Pain levels were measured using a Visual Analogue Scale (VAS) [10,26, 28-29, 31] and PainDETECT.[9] Function was measured using Constant[9-11, 26, 30] and Shoulder Disability Questionnaire.[28-29,31] The follow-up period was up to 17 years postoperatively.

3.3.5 Adverse Outcomes / Events Reported:

In the Brox (1999) RCT, 8 patients in the surgical group experienced adverse events including synovial chondromatosis (1 patient), rupture of the glenoid labrum (2 patients), partial rupture of the supraspinatus tendon (4 patients), and rupture of the biceps tendon (1 patient).[24] Rahme (1998), Haahr (2005; 2006), and Farfaras (2014; 2018) RCTs did not reported any adverse events.[11, 25-27,30] Ketola (2009; 2013; 2017) RCTs indicated no adverse events in surgical or exercise groups.[28-29, 31] Paavola (2018) RCT stated that 3 patients in the surgical group, 1 patient in the placebo surgical group, and 2 patients in the exercise group developed symptoms consistent with adhesive capsulitis.[10] Beard (2018) RCT reported that 6 patients (two in each surgical, placebo surgical, physiotherapy groups) developed adhesive capsulitis.[9]

3.3.6 Effects on Pain: Surgery plus Physiotherapy vs Physiotherapy

Three trials were pooled to examine the effects of surgery plus physiotherapy vs physiotherapy alone on pain levels at 3- and 6-month follow ups. The pooled results were not statistically or clinically different between groups at 3- and 6-month follow ups (moderate quality, 3 RCTs, 300 patients, WMD -0.39, 95% CI: -1.02 to 0.23, p=0.22, Figure 3.3; moderate quality, 3 RCTs, 310 patients, WMD -0.36, 95% CI: -1.02 to 0.29, p=0.27, Figure 3.3) respectively. At 1-year follow up, the pooled results from 3 trials displayed statistically significant differences in favor for surgery plus physiotherapy, however there were no clinically important differences between groups (moderate quality, 3 RCTs, 317 patients, WMD -0.67, 95% CI: -1.23 to -0.11, p=0.02, Figure 3.3). We found similar results in favor for surgery plus physiotherapy at 2-years follow up (moderate quality, 2 RCTs, 261 patients, WMD -0.67, 95% CI: -1.23 to -0.12, p=0.02, Figure 3.3). Our results from a single trial demonstrated no statistically or clinically important differences between groups at 5- and 10-years follow up (low quality, 1 RCT, 109 patients,

WMD -0.30, 95% CI: -1.54 to 0.94, p=0.64, Figure 3.3; low quality, 1 RCT, 90 patients, WMD -1.00, 95% CI: -0.24 to 2.24, p=0.11, Figure 3.3) respectively. Heterogeneity was absent or minimal for all analyses. Because the 95% CIs at 3-, 6-months, 1- and 2-years follow ups excluded the MCID of 1.5 points on a 10-point scale,[21] it is likely that physiotherapy alone is no worse than surgery plus physiotherapy in lowering pain levels. However, we are unable to make this same declaration for the results at 5- and 10-years. More data is required to make a definitive conclusion.

3.3.7 Effects on Function: Surgery plus Physiotherapy vs Physiotherapy

Up to three trials were pooled to examine the effects of surgery plus physiotherapy vs physiotherapy alone on function at 3- and 6-months, 1- and 2-2.5 years follow up. The pooled results were not statistically significant between groups at 3-, 6-month and 1-year follow ups (very low quality, 2 RCTs, 184 patients, SMD 0.11, 95% CI: -0.57 to 0.79, p=0.75, Figure 3.4; moderate quality, 3 RCTs, 310 patients, SMD 0.15, 95% CI: -0.14 to 0.43, p=0.31, Figure 3.4; very low quality, 2 RCTs, 197 patients, SMD 0.11, 95% CI: -0.46 to 0.69, p=0.70, Figure 3.4) respectively. At 2-2.5 years follow up, the pooled results from 3 trials displayed statistically significant differences in favor for surgery plus physiotherapy, however there were no clinically important differences between groups (low quality, 3 RCTs, 301 patients, SMD 0.31, 95% CI: 0.08 to 0.54, p=0.007, Figure 3.4). At 5- and ≥ 10-years follow up, our results displayed no statistically or clinically important differences between groups (low quality, 1 RCT, 109 patients, SMD 0.14, 95% CI: -0.24 to 0.51, p=0.47, Figure 3.4; low quality, 2 RCTs, 136 patients, SMD 0.22, 95% CI: -0.12 to 0.56, p=0.21, Figure 3.4) respectively.

Heterogeneity was high at 3-months and 1-year follow ups (downgraded the evidence by one level), and absent or minimal for the rest of the analyses. Because the 95% CIs at 6-months follow up excluded the MCID of 0.5 SD,[22] it is likely that physiotherapy alone is no worse than surgery plus physiotherapy in improving function. At 3-months, 1-, 2-2.5,

5- and ≥ 10-years, only the upper boundary of the 95% CI indicated the possibility of a moderate effect (≥0.50) in favor of surgery plus physiotherapy.

3.3.8 Effects on Pain: Surgery plus Physiotherapy vs Placebo (surgery) plus Physiotherapy

Trials were pooled to examine the effects of surgery plus physiotherapy vs placebo surgery plus physiotherapy on pain levels at 3-, 6-months, 1- and 2-years follow up. The results were not statistically or clinically different between groups at 3-, 6-months, 1- and 2-years follow up (low quality, 1 RCT, 109 patients, WMD 0.19, 95% CI: -0.47 to 0.85, p=0.57, Figure 3.5; moderate quality, 2 RCTs, 283 patients, SMD 0.08, 95% CI: -0.15 to 0.32, p=0.49, Figure 3.5; moderate quality, 2 RCTs, 250 patients, SMD 0.06, 95% CI: -0.21 to 0.33, p=0.66, Figure 3.5; low quality, 1 RCT, 118 patients, WMD -0.46, 95% CI: -1.09 to 0.17, p=0.15, Figure 3.5) respectively. Heterogeneity was absent or minimal for all analyses. Because the 95% CIs at all the follow ups excluded the MCID of 1.5 points[21] on a 10-point scale or 0.5 SD,[22] it is likely that placebo surgery plus physiotherapy is no worse than surgery plus physiotherapy in lowering pain levels.

3.3.9 Effects on Function: Surgery plus Physiotherapy vs Placebo (surgery) plus Physiotherapy

Trials were pooled to examine the effects of surgery plus physiotherapy vs placebo surgery plus physiotherapy on function at 6-months, 1- and 2-years follow up. The results were not statistically or clinically different between groups at 6-months, 1- and 2-years follow up (low quality, 2 RCT, 286 patients, SMD -0.20, 95% CI: -0.48 to 0.08, p=0.16, Figure 3.6; low quality, 1 RCT, 157 patients, SMD 0.07, 95% CI: -0.24 to 0.38, p=0.66, Figure 3.6; low quality, 1 RCTs, 118 patients, SMD 0.26, 95% CI: -0.10 to 0.62, p=0.16, Figure 3.6) respectively. Heterogeneity was low for the pooled analysis. Because the 95% CIs at 6-

months and 1-year follow ups excluded the MCID of 0.5 SD,[22] it is likely that placebo surgery plus physiotherapy is no worse than surgery plus physiotherapy in improving function. At 2-years, only the upper boundary of the 95% CI indicated any possibility of a moderate effect (≥0.50) in favor of surgery plus physiotherapy. Therefore, for the majority of patients, there is definitely no clinically meaningful difference between surgery plus physiotherapy and placebo surgery plus physiotherapy.

3.4 Discussion

We aimed to summarize the current evidence of the effects of surgery plus physiotherapy vs placebo (surgery) plus physiotherapy or physiotherapy alone, on clinical outcomes in patients with shoulder impingement syndrome. We found no clinically meaningful differences in pain or function at any 3-, 6-months, 1-, 2-, 5- or ≥ 10-years follow up. All 11 trials identified in this review were rated at high risk of bias. This was partially due to the fact that blinding of participants and personnel to minimize performance bias was not possible and that we did not find statistical differences between groups (16/19 analyses), suggesting that the included studies may not have been biased. Therefore, we downgraded the evidence only by one level.

The rating of very-low to moderate-quality evidence per outcome across trials was based on the judgement of serious limitations – risk of bias (19 outcomes), serious imprecision (12 outcomes) and inconsistency (2 outcomes) in all the outcomes across trials. We are moderately confident that at up to 2-years of follow up, physiotherapy alone is no worse than surgery plus physiotherapy in lowering pain levels. However, the low-quality of evidence synthesized at 5- and 10-years of follow up indicates that we have limited confidence that physiotherapy alone is no worse than surgery plus physiotherapy. Regarding improvements in function, we are moderately confident that at up to 6-months of follow up, physiotherapy alone is no worse than surgery plus physiotherapy. However, at 5- and ≥ 10-years of follow up, we have limited confidence that for the majority of patients, physiotherapy alone is no worse than surgery plus physiotherapy in terms of

improving function. In considering placebo surgery along with physiotherapy, we have limited confidence that at up to 2-years of follow up, placebo surgery plus physiotherapy is no worse than surgery plus physiotherapy in lowering pain levels. Similarly, we have limited confidence that for the majority of patients at up to 2-years of follow up, placebo surgery plus physiotherapy is no worse than surgery plus physiotherapy in improving function.

The results of our review are in concordance with the findings of Saltychev (2015) and Toliopoulos (2014) reviews, and further builds on the Steuri (2017) review.[1,8,32] Saltychev (2015) concluded that, there was moderate evidence indicating surgical treatment is no more effective than active exercises on reducing pain intensity caused by shoulder impingement.[1] Toliopoulos (2014) concluded that there was low- to moderate-quality evidence to display that open acromioplasty or arthroscopic surgery, is no more effective than exercises for the treatment of rotator cuff tendinopathy.[32] Our review further builds on Steuri (2017) review.[8] Our review provides 1) more comprehensive quantitative synthesis beyond 1-year follow up and includes six additional trials, 2) ratings of the quality of evidence according to GRADE guidelines across each outcome, and 3) an analysis of precision by evaluating the MCID thresholds with the 95% confidence intervals, therefore, able to make definitive conclusions for most of the included clinical outcomes. To highlight the precision of the pooled studies, we calculated the Optimal Information Size (OIS) for both the pain and function outcomes (Appendix B). For the pain outcome (VAS 0 – 10), we specified a two-sided test with alpha (α) error rate of 0.05, beta (β) error rate of 0.2, expected difference (δ) of 1.5 (VAS units), and a standard deviation of 3.5, which was derived by pooling the SD of the included studies. This yielded an OIS of 172 patients 86 per group). The quality of evidence for surgery plus physiotherapy vs physiotherapy alone, at 5- and 10-years was downgraded by one level because our analysis of 109 and 90 patients respectively, did not meet the criteria for our calculated OIS of 172. An OIS of 308 was calculated for the function outcome (Constant 0 – 100) using a two-sided alpha (α) error of 0.05, beta (β) error of 0.2, expected difference (δ) of 10, and a pooled standard deviation (31.5). Similarly, the quality of evidence for surgery plus physiotherapy vs physiotherapy alone, at 3-months, 1-, 2-2.5, 5- and ≥10-years follow up, was downgraded by one level

because our analysis of 184, 197, 301, 109 and 136 patients respectively, did not meet the criteria for our calculated OIS of 308. The margin (non-inferiority) defines the minimum amount of change required to warrant practice changes. Adding a margin increases the sample size requirements. Unfortunately, the most common method used to estimate sample size does not adjust for a margin. This is one of the reasons why the 95% confidence intervals around between-group differences (even those that are statistically significant) are often still wide (the lower and upper boundary range from between-group differences that are too small to be important to those that imply an extremely large effect sizes) and therefore can only offer indeterminate results.

3.4.1 Implications for Research

We have limited to moderate confidence in our reported findings. Future well-designed large-scale RCTs investigating the effects of surgery plus physiotherapy vs physiotherapy alone, or placebo surgery plus physiotherapy, on clinical outcomes of pain and function over the long-term (≥ 5 years of follow up) are warranted to generate high quality evidence (i.e. greater confidence) to further ensure that the true effect lies close to that of the estimate of the effect.

3.4.2 Implications for Practice

We synthesized very-low to moderate-quality evidence and continue to suggest the use of exercise as the first and main component of physiotherapy intervention programs for treatment of patients with shoulder impingement. Ultimately, the surgical option may be considered, however, it is important to note (despite the very low to moderate quality evidence) the lack of clinically important benefits of surgery over physiotherapy.

3.4.3 Strengths and Limitations

We focused on RCTs and did not included conference papers, posters, abstracts or observational studies. Therefore, there might be a source of publication bias within our search strategy. We searched for all the relevant RCTs in all major databases that meet our inclusion criteria stated a priori in our protocol. Two independent reviewers were used to identify, screen, extract data, and assess the risk of bias and quality of evidence. We would also like to highlight that that the MCID chosen was for within group versus between group means, therefore, this yielded more conservative estimates and conclusions.

3.5 Conclusions

The effects of surgery plus physiotherapy compared to physiotherapy alone on improving pain and function are too small to be clinically important at 3-, 6-months, 1-, 2-, 5- and ≥ 10-years follow up. Similarly, surgery plus physiotherapy vs placebo (surgery) plus physiotherapy comparison demonstrated no clinically important differences in terms of improving pain or function at 3-, 6-months, 1-, 2-years follow up.

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Conflict of Interest: None

3.6 Reference

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Table 3-1. Summary of the included studies

Study	Country	Population	Groups	Outcomes	Follow ups	Surgical Interventions	Conservative/No Interventions
Brox 1999.	Norway	Patients with rotator cuff disease for at least three months	Surgery + Ex. n = 45 (29 men, 16 women), Age 48.0 years Exercise n = 50 (22 men, 28 women), Age 47.0 years	-Pain -Function	3, 6 months & 2.5 years.	Arthroscopic surgery (bursectomy and resection of the anterior and lateral part of the acromion and the coracoacromial ligament). Postoperative rehabilitation was started on the first postoperative day. Physiotherapy was started within the first week. The exercises prescribed by the surgeon were performed against low resistance and repeated many times. Patients visited a physiotherapist where they lived, so several physiotherapists were engaged, and somewhat different approaches used. Unrestricted activities were usually allowed after four to six weeks.	To eliminate gravitational forces and to start the exercises the arm was suspended in a sling fixed to the roof. Relaxed repetitive movements (first rotation, then flexion - extension, and finally abduction-adduction) were performed for about an hour in a daily training session. Patients were supervised twice weekly. On the other days they followed the same exercise programme at home. Resistance was added gradually to strengthen the short shoulder rotator and the scapular stabilising muscles. The training continued for three to six months, with the supervision gradually being reduced.
Rahme 1998	Sweden	Patients with subacromial impingement syndrome	Surgery + physiotherapy n = 21 Physiotherapy n = 18 (19 males, 23 females), age 42.0 years	-Pain	6 months & 1-year.	Open anterior acromioplasty according to Neer. Attention was paid to the portion of the acromion that may extend beyond the anterior border of the clavicle. Followed by physiotherapy.	Information on functional anatomy/ biomechanics, advice on how to avoid wear and tear positions, unload movements of the shoulder, normalize scapulohumeral rhythm, postural awareness, strengthening of the shoulder muscles and endurance training.
Haahr 2005; 2006.	Denmark	Patients with subacromial impingement	Surgery + Physiotherapy n = 41 (12 males, 29 females), Age 44.3 years Physiotherapy n = 43 (14 males, 29 females) Age 44.5 years	-Pain -Function	3, 6 months, 1 year, & 4-8 years.	The treatment consisted of bursectomy with partial resection of the antero-inferior part of the acromion and the coracoacromial ligament. Two experienced surgeons undertook all procedures and recorded their findings on a predetermined proforma. Before discharge, the patient was instructed in performing light movements of the arm within the limits of pain. Stitches were removed by general practitioners after 10 days. At the same time, the patient was instructed by a physiotherapist to carry out increasingly active exercises, including exercises for strengthening the rotator cuff muscles	The treatments started with application of heat, cold packs, or soft tissue treatments. This was followed by active training of the periscapular muscles (rhomboid, serratus, trapezoid, levator scapulae, and pectoralis minor muscles) and strengthening of the stabilising muscles of the shoulder joint (the rotator cuff). This was done within the limits of pain. During the first two weeks the patient was seen three times weekly, during the next three weeks twice weekly, and during the last seven weeks once weekly. The patients were encouraged to continue to do active exercises at home on a daily basis. After carrying out the full programme for at least 12 weeks, the patients were encouraged to continue the programme two to three times a week.
Ketola 2009; 2013; 2017.	Finland	Patients with shoulder impingement syndrome	Surgery + Exercise n = 70 (29 men, 41 women) Age 46.4 years Exercise n = 70 (23 men, 47 women) Age 47.8 years	-Pain -Disability	1, 2, 5 & 10 years	Arthroscopic decompressions. An interscalenic or supraclavicular brachial plexus block was applied for regional anaesthesia. Bony landmarks were palpated and marked. Glenohumeral stability and passive range of movement were tested. The arthroscope was introduced through a standard posterior portal and a systematic recording of the articular cartilage, labrum and ligaments, biceps tendon, and the intra-articular rotator cuff was performed. The same standard portal was used to reach the subacromial space. Debridement and decompression were done through an anterolateral portal by shaver and / or vaporiser. If the coracoacromial ligament felt tight or thick, it was released. Acromioplasty was then performed, starting anteriorly and progressing posterolaterally with a burr drill. The range of movement was tested under arthroscopic visualisation to check for any local impingement, plus, similar exercises as the other group. NSAIDs was allowed as needed. Subacromial corticosteroid injections were permitted.	Information was first given by a trained physiotherapist. A home programme was individually planned for each patient according to the same principles. The aim was to restore painless and normal mobility of the shoulder complex and to increase the dynamic stability of the glenohumeral joint (supra- and infraspinatus, teres minor, and subscapular muscles) and the scapula (trapezoid, rhomboid, serratus anterior, and pectoralis minor muscles).29 Elasticated stretch bands and light weights were used in training, which was based on long painless series and repetitions aiming at tendon strengthening. The sessions were performed at least four times a week using nine different exercises with 30 to 40 repetitions three times. As the self-assessed ability and strength improved, resistance was increased, and repetitions diminished. NSAIDs was allowed as needed. Subacromial corticosteroid injections were permitted.
Farfaras 2014; 2018.	Sweden	Patients with subacromial impingement syndrome	Open acromioplasty + Physiotherapy n = 15 (7 males, 8 females) age 52.4 years	-Function	31 months (~2.5 years) & Min. 10 years	Open acromioplasty was performed according to Rockwood and Lyons with the patient in the beach chair position. The procedure started with an anterior, lateral 5-cm skin incision. The deltoid muscle was split and detached from the anterior third of the acromion and the acromioclavicular joint capsule. After exposing	Physiotherapy group received treatments according to the method described by Böhmer. The purpose of the treatment is to let the patients find their normal kinematics of the shoulder, without experiencing pain. The gravitational forces on the arm were removed by suspending the arm in a sling fixed to the ceiling. The training

			Arthroscopic acromioplasty + Physiotherapy n = 19 (7 males, 12 females) age 48.9 years. Physiotherapy n = 21 (13 males, 8 females) age 49.9 years		(range 10-17 years)	the anterior edge of the acromion, the tendinous anterior third of the acromion was elevated dorsally prior to removing bone. This manoeuvre exposed the coracoacromial ligament. An osteotome was used to remove the anterior edge and the lateral portion of the undersurface of the acromion. The removed bone included the attachment of the coracoacromial ligament. The piece of bone was about 6–9 mm wide and 20 mm long. Proximal to the coracoid, the coracoacromial ligament was cut. Palpation of the undersurface of the acromion was performed to detect any fragments of bone or prominences. The undersurface of the acromioclavicular joint was palpated and inspected. If osteophytes were present, they were excised. No acromioclavicular joint resections were performed. Finally, the medial flap of the deltoid was sutured to the capsule of the acromioclavicular joint, and the lateral flap was sutured to the origin of the deltoid before closure of the wound. Arthroscopic acromioplasty was performed according to Ellman with the patient in the lateral decubitus position. A traction device was applied to the arm, and a tension to the arm corresponding to 40 N was applied. The shoulder was in 10° of flexion and 40° of abduction. The bony landmarks of the shoulder (the acromion, the clavicle, the acromioclavicular joint, the coracoid and the coracoacromial ligament) were marked with a pen. A portal for the arthroscope was created on the dorsal side of the shoulder. The gleno-humeral joint was first evaluated for cartilage changes, disorder of the biceps tendon, labrum and the rotator cuff. Using the same arthroscopic portal, the subacromial space was visualised and a bursectomy was performed with a shaver introduced from a lateral portal. A resection of the anterior edge of the acromion of about 5–8 mm was then carried out, followed by a resection of about 5–8 mm of the anterior–inferior third of the undersurface of the acromion all the way to the acromioclavicular joint.	programme started with rotational movements of the arm. As soon as the patient was able to perform these motions without pain, flexion/extension movements were added, followed by abduction/adduction exercises. The training programme postulates everyday practice of at least 60 min. The load was gradually increased in order to strengthen the rotator cuff and the scapula-stabilising muscles. In the final stage of the programme, the patients replaced some exercises with corresponding leisure activities. The programme was performed twice a week under the supervision of a physiotherapist and the rest of the days at home for a period of three to six months. In order to secure similar treatment, all the patients were trained at five local physiotherapy centres by physiotherapists using the same standardised protocol.
Paavola 2018	Finland	Patient with shoulder impingement syndrome	Arthroscopic subacromial decompression + post-operative care including exercise n = 59 (17 males, 42 females) Age 50.5 years Diagnostic arthroscopy (placebo surgery) + post-operative care including exercise n = 63 (17 males, 46 females), Age 50.8 years Exercise Therapy n = 71 (24 males, 47 females) Age 50.4 years	-Pain -Function	3,6 months, 1 & 2 years	Arthroscopic subacromial decompression procedures involved the debridement of the entire subacromial bursa and resection of the bony spurs and the projecting anterolateral undersurface of the acromion, was carried out with a shaver, burr, and / or electrocoagulation. Post-operative care consisted of one visit to an independent physiotherapist, blind to the group assignment, for guidance and instructions for home exercises. Diagnostic arthroscopy involved examination of the glenohumeral joint and subacromial space with the use of standard posterior and lateral portals and a 4 mm arthroscope with the patient under general anaesthesia, usually supplemented with an interscalene brachial plexus block. We did an intraarticular and subacromial assessment of the rotator cuff integrity.	Exercise therapy – Supervised, progressive, individually designed physiotherapy was started within two weeks of randomisation, using a standardised protocol that relied primarily on daily home exercises as well as 15 visits to an independent physiotherapist
Beard 2018	United Kingdom	Patients with subacromial pain	Arthroscopic subacromial	-Function -Pain	6 and 12 months	Arthroscopic subacromial decompression was done according to routine practice under general anaesthetic. It involved removal of bursa and	No treatment (monitoring) involved patients attending one reassessment appointment with a specialist shoulder clinician, 3 months after

	decompression + physiotherapy n = 106 (52 males, 54 females), Age 52.9 years Investigational arthroscopy (placebo surgery) + physiotherapy n = 103 (51 males, 52 females), Age 53.7 years No treatment n = 104 (52 males, 52 females), Age 53.2 years	soft tissue within the subacromial space, release of the coraco-acromial ligament, and removal of the subacromial bone spur through posterior and lateral portals. Investigational arthroscopy (placebo surgery) was also done under general anaesthetic through a posterior portal. Patients underwent routine investigational arthroscopy of the joint, rotator cuff tendons, and subacromial bursa, with the operation done in exactly the same manner as decompression. A lateral skin incision was made to simulate a lateral portal, but no instruments were introduced through this incision. The intervention did not involve surgical removal of any bone, bursal tissue, other soft tissue or release of the coracoacromial ligament. The procedure involved inspection and irrigation of the glenohumeral joint (arthroscopy) and the subacromial bursa (bursoscopy).	entering the study but with no planned intervention. The patients in the no-treatment group had no prescribed physiotherapy or steroid injections.

Table 3-2. GRADE Evidence Profile.

Surgery plus Physiotherapy vs Physiotherapy alone.

Quality Assessment						Summary of Findings			
Outcome (No. of studies; design)	Limitations	Inconsistency	Indirectness	Imprecision	Publication Bias	Surgery plus Physiotherapy	Physiotherapy alone	SMD / WMD (95 % CI)	Quality
Pain at 3 months (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	138/300	162/300	WMD -0.39 (-1.02 – 0.23)	⊕⊕⊕⊖ Moderate
Pain at 6 months (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	144/310	166/310	WMD -0.36 (-1.02 – 0.29)	⊕⊕⊕⊖ Moderate
Pain at 1 year (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	147/317	170/317	WMD -0.67 (-1.23 – -0.11)	⊕⊕⊕⊖ Moderate
Pain at 2 years (2 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	127/261	134/261	WMD -0.67 (-1.23 – -0.12)	⊕⊕⊕⊖ Moderate
Pain at 5 years (1 RCT)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	57/109	52/109	WMD -0.30 (-1.54 – 0.94)	⊕⊕⊖⊖ Low
Pain at 10 years (1 RCT)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	44/90	46/90	WMD 1.00 (-0.24 – 2.24)	⊕⊕⊖⊖ Low
Function at 3 months (2 RCTs)	Serious limitations	Serious inconsistency	No serious indirectness	Serious imprecisions	Unlikely	84/184	100/184	SMD 0.11 (-0.57 – 0.79)	⊕⊖⊖⊖ Very low
Function at 6 months (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	144/310	166/310	SMD 0.15 (-0.14 – 0.43)	⊕⊕⊕⊖ Moderate
Function at 1 year (2 RCTs)	Serious limitations	Serious inconsistency	No serious indirectness	Serious imprecisions	Unlikely	92/197	105/197	SMD 0.11 (-0.46 – 0.69)	⊕⊖⊖⊖ Very low
Function at 2-2.5 years (3 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Unlikely	146/301	155/301	SMD 0.31 (0.08 – 0.54)	⊕⊕⊖⊖ Low
Function at 5 years (1 RCT)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	57/109	52/109	SMD 0.14 (-0.24 – 0.51)	⊕⊕⊖⊖ Low
Function at ≥10 years (2 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Unlikely	62/136	74/136	SMD 0.22 (-0.12 – 0.56)	⊕⊕⊖⊖ Low

Surgery plus Physiotherapy vs Placebo Surgery plus Physiotherapy.

Pain at 3 months (1 RCT)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	54/109	55/109	WMD 0.19 (-0.47 – 0.85)	⊕⊕⊖⊖ Low
Pain at 6 months (2 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	140/283	143/283	SMD 0.08 (-0.15 – 0.32)	⊕⊕⊕⊖ Moderate
Pain at 1 year (2 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	No serious imprecisions	Unlikely	122/250	128/250	SMD 0.06 (-0.21 – 0.33)	⊕⊕⊕⊖ Moderate
Pain at 2 years (1 RCTs)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	59/118	59/118	WMD -0.46 (-1.09 – 0.17)	⊕⊕⊖⊖ Low
Function at 6 months (2 RCTs)	Serious limitations	No serious inconsistency	No serious indirectness	Serious imprecisions	Unlikely	141/286	145/286	SMD -0.20 (-0.48 – 0.08)	⊕⊕⊖⊖ Low
Function at 1 year (1 RCT)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	76/157	81/157	SMD 0.07 (-0.24 – 0.38)	⊕⊕⊖⊖ Low
Function at 2 years (1 RCT)	Serious limitations	N/A	No serious indirectness	Serious imprecisions	Unlikely	59/118	59/118	SMD 0.26 (-0.10 – 0.62)	⊕⊕⊖⊖ Low

Table 3-3 Summary of Findings

Surgery plus Physiotherapy vs Physiotherapy alone (Pain).

Population: patients with subacromial impingement syndrome.
Settings: inpatient clinics.
Intervention: Surgery plus Physiotherapy
Comparison: Physiotherapy alone
Follow up: 3-, 6-months and 1-, 2-, 5- and 10-years

Outcomes	SMD / MD (95% C.I.)	No of participants (studies)	Quality of the evidence (GRADE)
Pain (3-months): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.39 (-1.02 – 0.23)	300 (3 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (6-months): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.36 (-1.02 – 0.29)	310 (3 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (1-year): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.67 (-1.23 – -0.11)	317 (3 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (2-years): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.67 (-1.23 – -0.12)	261 (2 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (5-years): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.30 (-1.54 – 0.94)	109 (1 RCT)	⊕⊕⊖⊖ Low [1 2]
Pain (10-years): VAS (0 – 10) Lower values indicate improved pain.	WMD 1.00 (-0.24 – 2.24)	90 (1 RCT)	⊕⊕⊖⊖ Low [1 2]

Surgery plus Physiotherapy vs Physiotherapy alone (Function).

Population: patients with subacromial impingement syndrome.
Settings: inpatient clinics.
Intervention: Surgery plus Physiotherapy
Comparison: Physiotherapy alone
Follow up: 3-, 6-months and 1-, 2-2.5, 5- and 10-17 years

Function (3-months): Constant/Shoulder Disability Questionnaire. (0 – 100) Higher values indicate improved function.	SMD 0.11 (-0.57 – 0.79)	184 (2 RCTs)	⊕⊖⊖⊖ Very low [1 2 5]
Function (6-months): Constant/ Shoulder Disability Questionnaire. (0 – 100) Higher values indicate improved function.	SMD 0.15 (-0.14 – 0.43)	310 (3 RCTs)	⊕⊕⊕⊖ Moderate [1]
Function (1-year): Constant/ Shoulder Disability Questionnaire. (0 – 100) Higher values indicate improved function.	SMD 0.11 (-0.46 – 0.69)	197 (2 RCTs)	⊕⊖⊖⊖ Very low [1 2 5]
Function (2-2.5 years): Constant/ Shoulder Disability Questionnaire. (0 – 100) Higher values indicate improved function.	SMD 0.31 (0.08 – 0.54)	301 (3 RCTs)	⊕⊕⊖⊖ Low [1 2]
Function (5-years): Constant/ Shoulder Disability Questionnaire. (0 – 100) Higher values indicate improved function.	SMD 0.14 (-0.24 – 0.51)	109 (1 RCT)	⊕⊕⊖⊖ Low [1 2]
Function (≥ 10-years): Constant/ Shoulder Disability Questionnaire. (0 – 100) Higher values indicate improved function.	SMD 0.22 (-0.12 – 0.56)	136 (2 RCTs)	⊕⊕⊖⊖ Low [1 2]

Abbreviations: VAS; visual analogue scale, MD; mean difference, CI; confidence interval.

[1]We downgraded by one level due to high risk of bias.
[2]We downgraded by one level due to a relatively small sample size.
[3]We downgraded by one level due to indirectness (surrogate outcomes).
[4]We downgraded by one level due to publication bias.
[5]We downgraded by one level due to inconsistency.

GRADE quality of evidence:
High quality: We are very confident that the true effect lies close to that of the estimate of the effect.
Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low quality: our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect.
Very low quality: we have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect.

Table 3-4. Summary of Findings

Surgery plus Physiotherapy vs Placebo Surgery plus Physiotherapy (Pain).

Population: patients with subacromial impingement syndrome.
Settings: inpatient clinics.
Intervention: Surgery plus Physiotherapy
Comparison: Placebo Surgery plus Physiotherapy
Follow up: 3-, 6-months and 1- and 2-years

Outcomes	SMD / MD (95% C.I.)	No of participants (studies)	Quality of the evidence (GRADE)
Pain (3-months): VAS (0 – 10) Lower values indicate improved pain.	WMD 0.19 (-0.47 – 0.85)	109 (1 RCTs)	⊕⊕⊖⊖ Low [1 2]
Pain (6-months): VAS/PainDETECT (0 – 10) Lower values indicate improved pain.	SMD 0.08 (-0.15 – 0.32)	283 (2 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (1-year): VAS/PainDETECT (0 – 10) Lower values indicate improved pain.	SMD 0.06 (-0.21 – 0.33)	250 (2 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (2-years): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.46 (-1.09 – 0.17)	118 (1 RCT)	⊕⊕⊖⊖ Low [1 2]
Pain (3-months): VAS (0 – 10) Lower values indicate improved pain.	WMD 0.19 (-0.47 – 0.85)	109 (1 RCTs)	⊕⊕⊖⊖ Low [1 2]
Pain (6-months): VAS/PainDETECT (0 – 10) Lower values indicate improved pain.	SMD 0.08 (-0.15 – 0.32)	283 (2 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (1-year): VAS/PainDETECT (0 – 10) Lower values indicate improved pain.	SMD 0.06 (-0.21 – 0.33)	250 (2 RCTs)	⊕⊕⊕⊖ Moderate [1]
Pain (2-years): VAS (0 – 10) Lower values indicate improved pain.	WMD -0.46 (-1.09 – 0.17)	118 (1 RCT)	⊕⊕⊖⊖ Low [1 2]

Surgery plus Physiotherapy vs Placebo Surgery plus Physiotherapy (Function).

Population: patients with subacromial impingement syndrome.
Settings: inpatient clinics.
Intervention: Surgery plus Physiotherapy
Comparison: Placebo Surgery plus Physiotherapy
Follow up: 6-months and 1- and 2-years

Function (6-months): Constant (0 – 100) Higher values indicate improved function.	SMD -0.20 (-0.48 – 0.08)	286 (2 RCTs)	⊕⊕⊖⊖ Low [1 2]
Function (1-year): Constant (0 – 100) Higher values indicate improved function	SMD 0.07 (-0.24 – 0.38)	157 (1 RCT)	⊕⊕⊖⊖ Low [1 2]
Function (2-years): Constant (0 – 100) Higher values indicate improved function	SMD 0.26 (-0.10 – 0.62)	118 (1 RCT)	⊕⊕⊖⊖ Low [1 2]

Abbreviations: VAS; visual analogue scale, MD; mean difference, SMD; standardized mean difference, CI; confidence interval.

[1]We downgraded by one level due to high risk of bias.
[2]We downgraded by one level due to a relatively small sample size.
[3]We downgraded by one level due to indirectness (surrogate outcomes).
[4]We downgraded by one level due to publication bias.
[5]We downgraded by one level due to inconsistency.

GRADE quality of evidence:
High quality: We are very confident that the true effect lies close to that of the estimate of the effect.
Moderate quality: We are moderately confident in the effect estimate: The true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low quality: our confidence in the effect estimate is limited: The true effect may be substantially different from the estimate of the effect.
Very low quality: we have very little confidence in the effect estimate: The true effect is likely to be substantially different from the estimate of effect.

Figure 3-1. Selection of studies for inclusion in the systematic review.

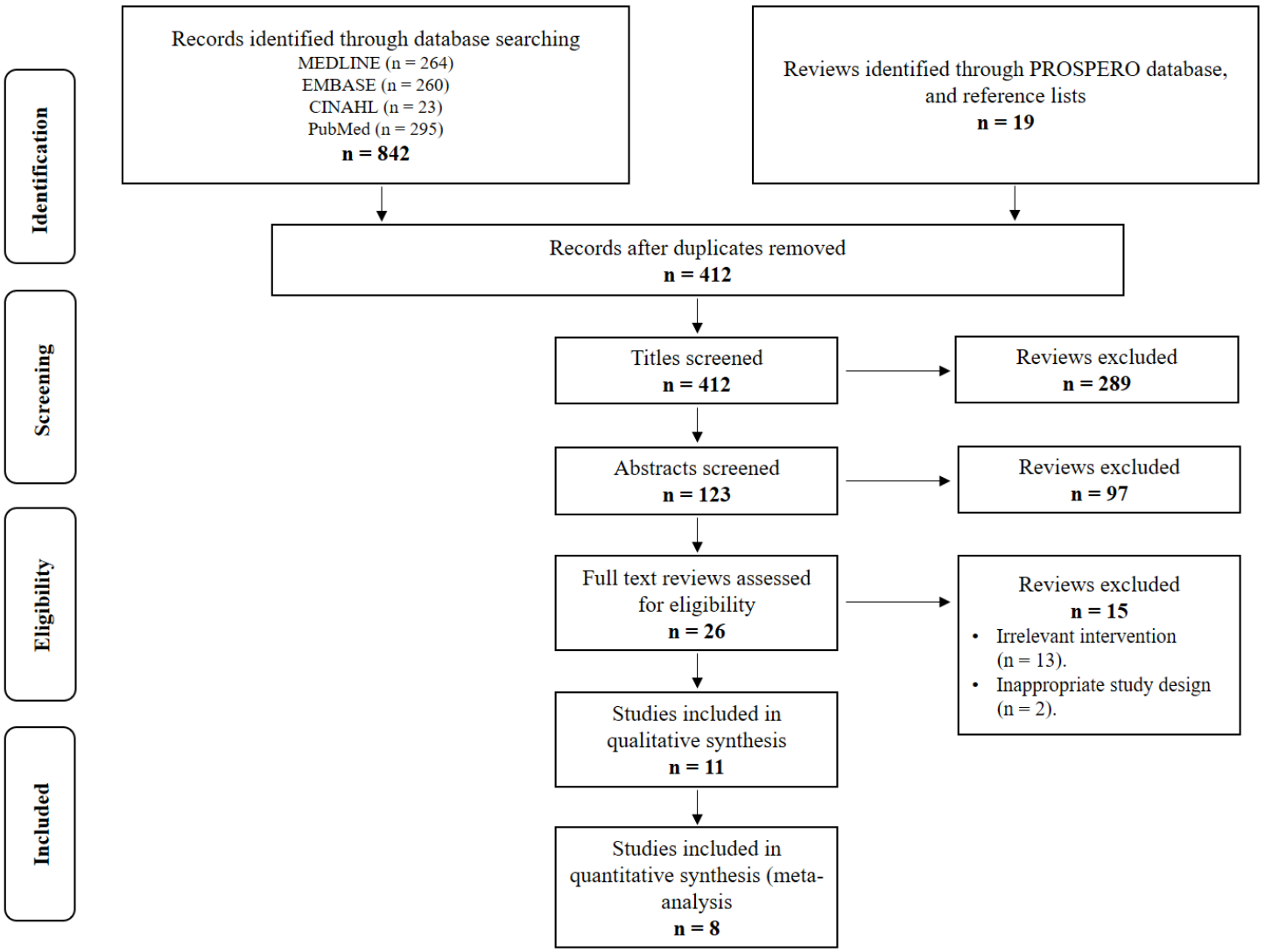


Figure 3-2. Risk of bias summary: review authors' judgements about each risk of bias item for each included study.

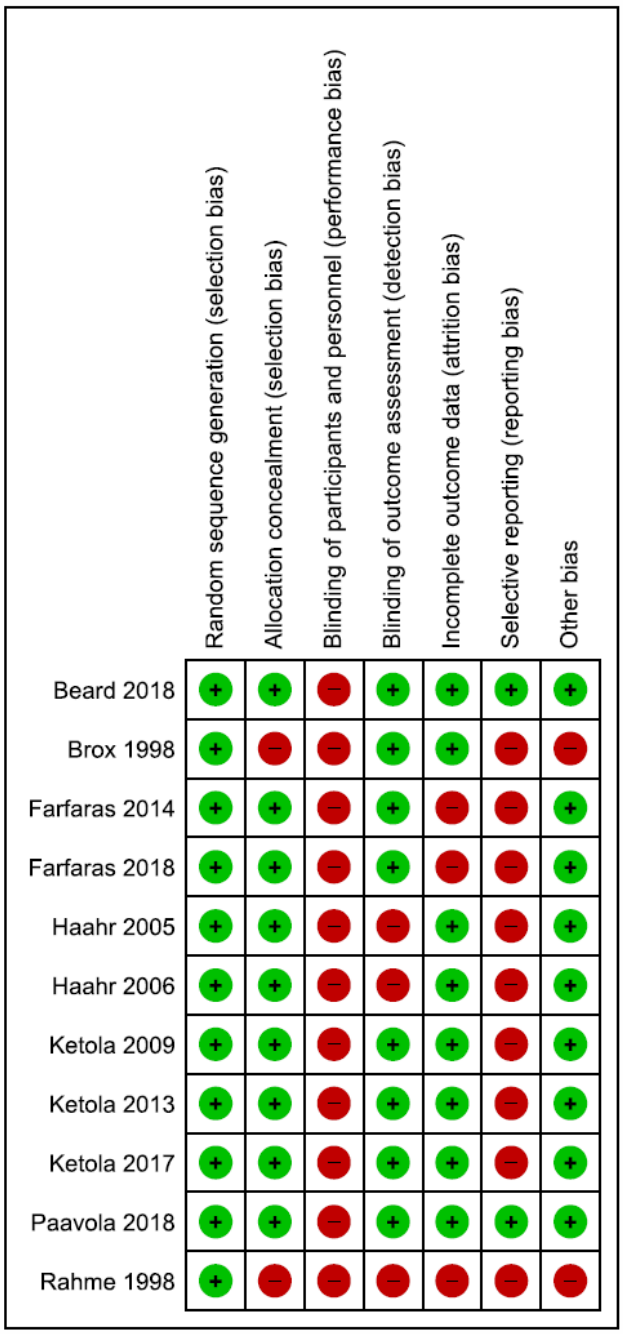


Figure 3-3. Forest plot of comparison: Surgery plus physiotherapy vs Physiotherapy alone, outcome: Pain (0 – 10 VAS). Lower values indicate improved Pain.

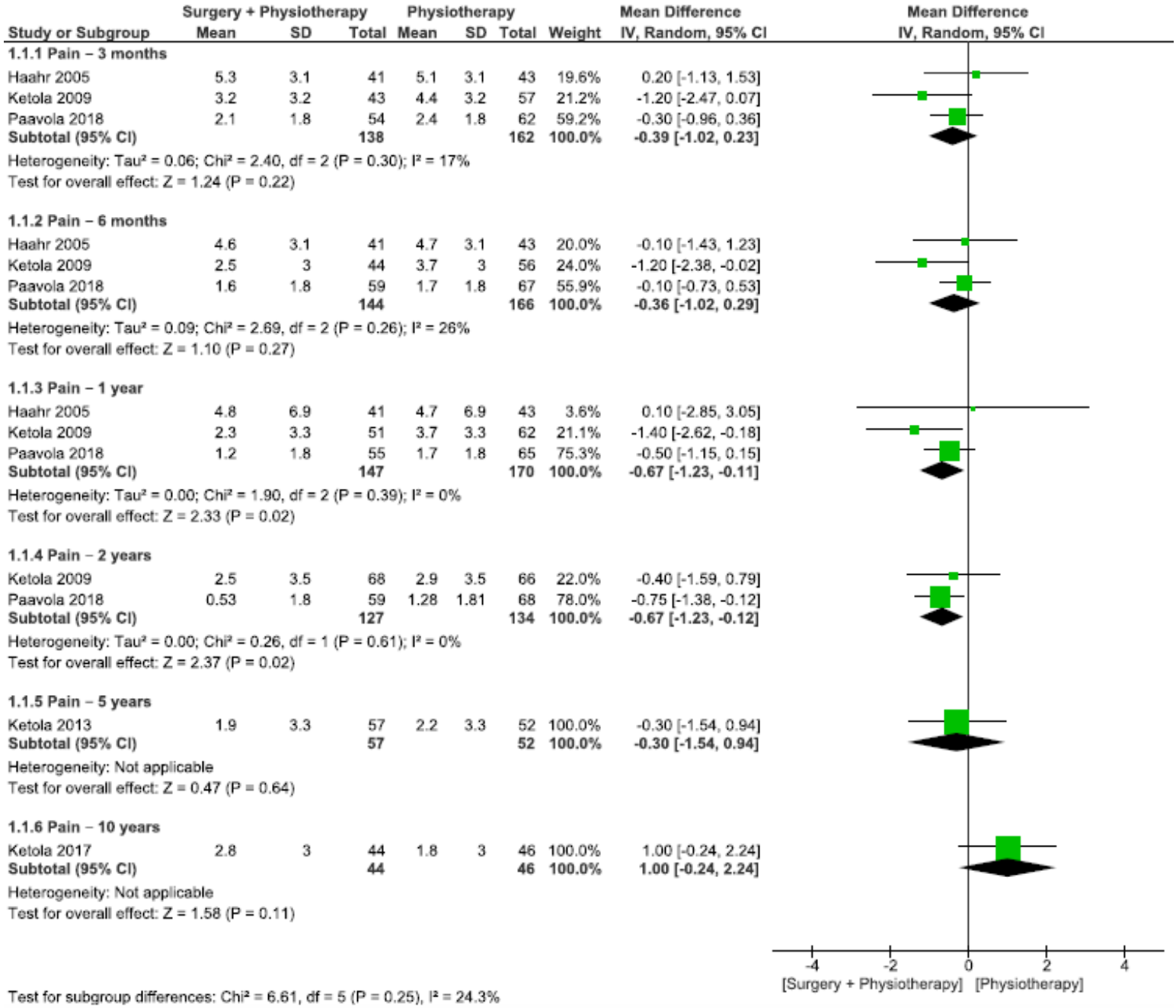


Figure 3-4. Forest plot of comparison: Surgery plus physiotherapy vs Physiotherapy alone, outcome: Function (0 – 100). Higher values indicate improved Function.

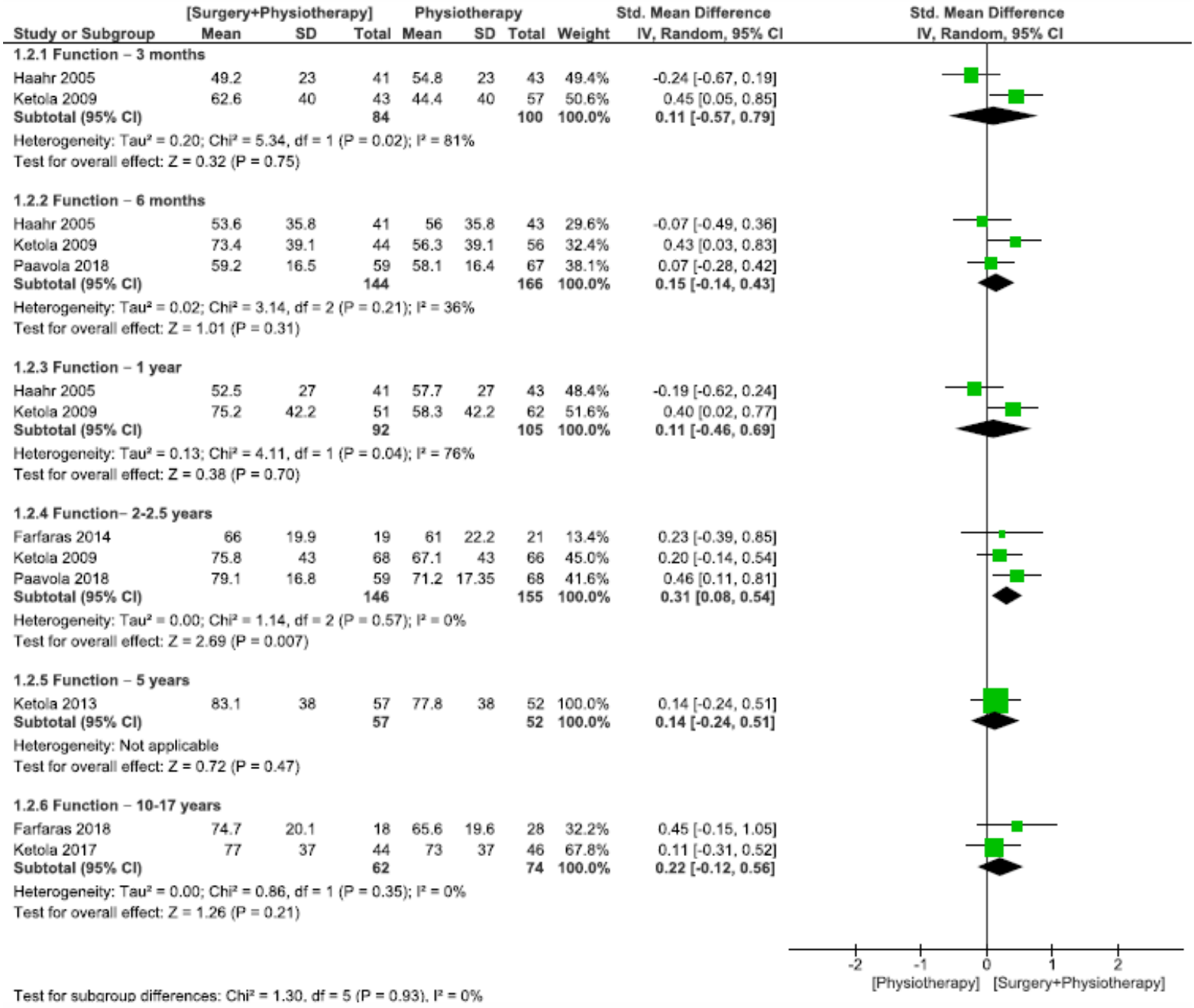


Figure 3-5. Forest plot of comparison: Surgery plus physiotherapy vs Placebo surgery plus Physiotherapy, outcome: Pain (0 – 10 VAS). Lower values indicate improved Pain.

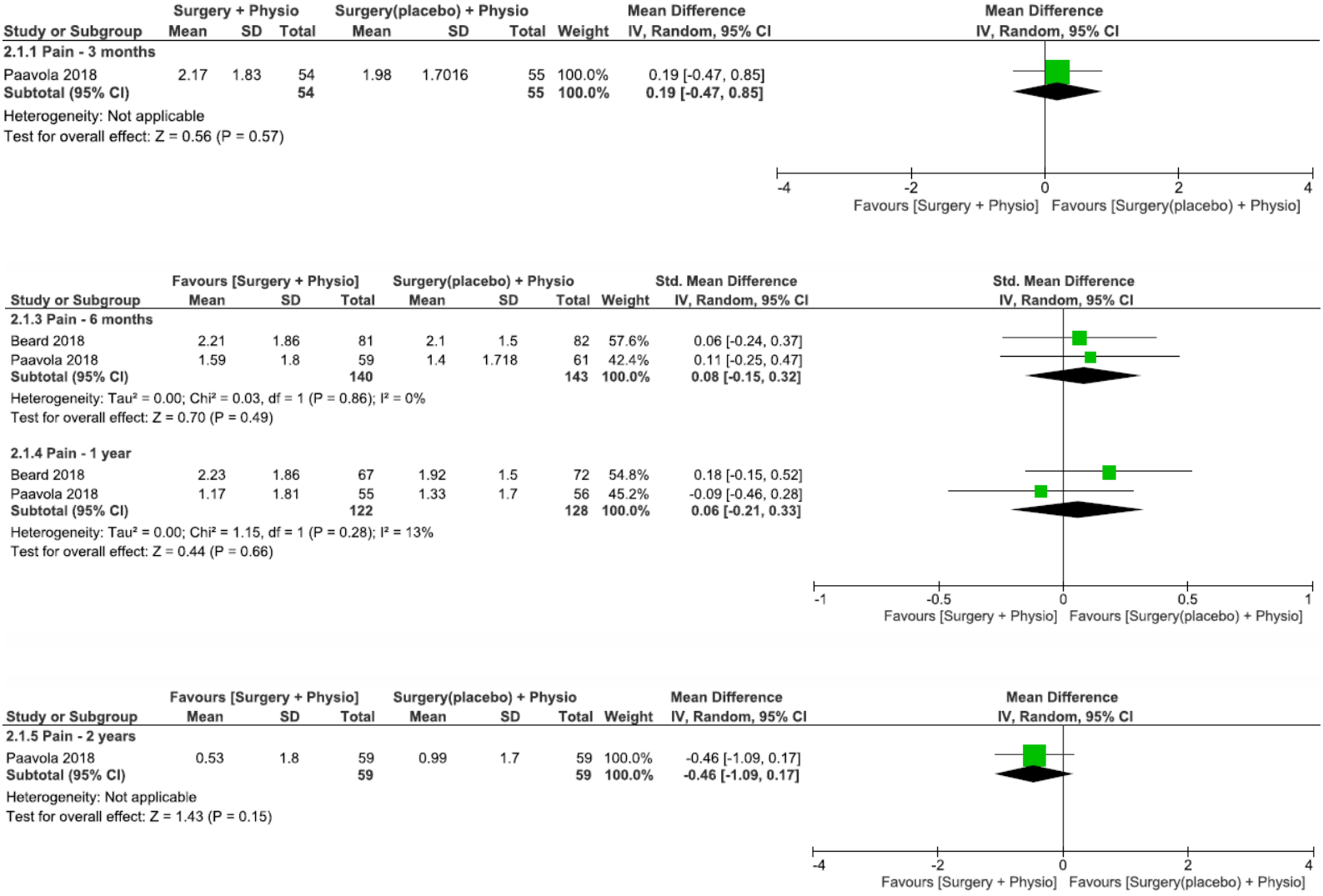
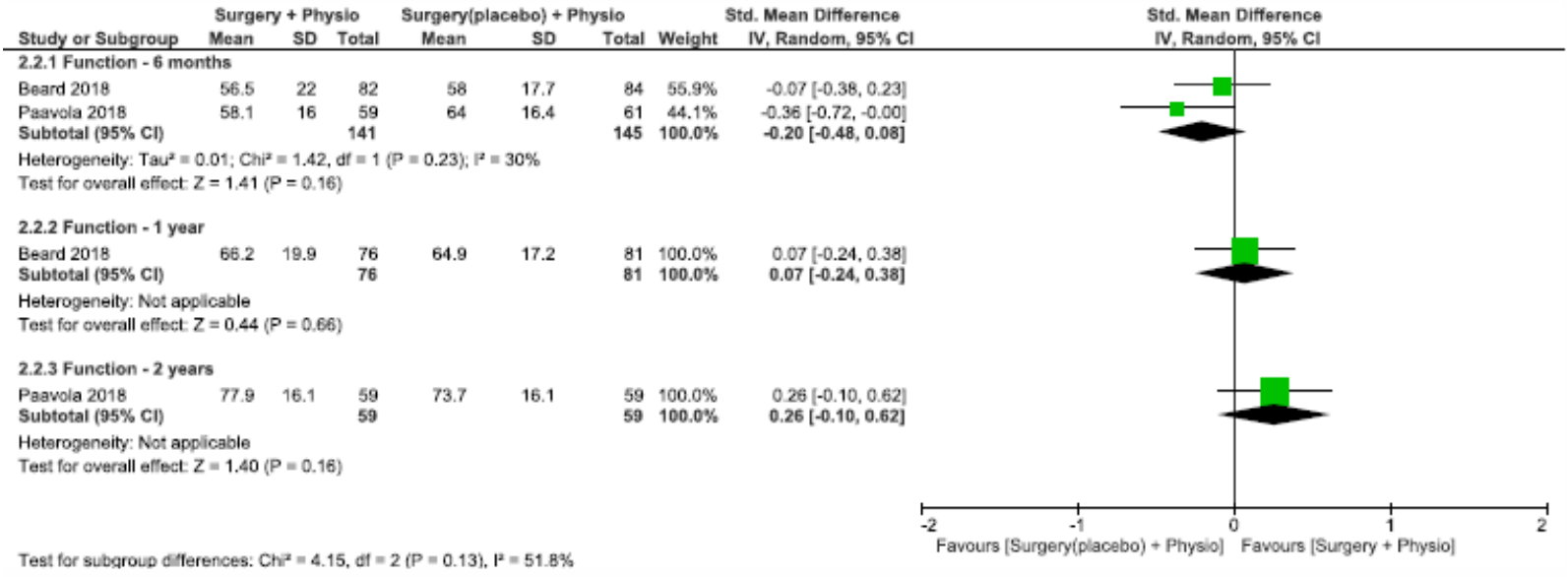


Figure 3-6. Forest plot of comparison: Surgery plus physiotherapy vs Placebo surgery plus physiotherapy, outcome: Function (0 – 100). Higher values indicate improved Function.



Chapter 4

4 Prevalence of Musculoskeletal Disorders Among Canadian Firefighters. A Systematic Review and Meta-analysis.

Abstract

Introduction: Firefighters are set to respond to a number of dynamic demands within their roles that extend well beyond just fire suppression. Such tasks (i.e., heavy lifting, awkward postures) and their unpredictable nature are likely contributing factors to musculoskeletal disorders (MSDs). Several individual studies have assessed the prevalence of MSDs among Canadian firefighters. Therefore, we conducted a systematic review and meta-analysis to critically appraise the quality of the body of literature and to provide pooled point- and period-prevalence estimates of anatomical regions of MSDs among Canadian firefighters.

Methods: The MEDLINE, EMBASE, PubMed and Web of Science databases were searched from inception to November 2018. Cross-sectional cohort studies with musculoskeletal prevalence estimates (point- and period-) of career/professional firefighters in Canada were identified and critically appraised. MSDs were defined as sprains/strains, fractures/dislocations, and self-reported bodily pain (chronic or acute). Period- and point-prevalence estimates were calculated, and study-specific estimates were pooled using a random-effects model.

Results: The 5 eligible cohort studies (3 prospective, 2 retrospective) were included with a total of 4143 firefighters. Mean age ranged from 34 ± 8.5 to 42.6 ± 9.7 years. The reported types of MSDs included sprain or strain, fractures, head/neck/shoulder/elbow/arm/hand/ back/upper thigh/knee/foot pain. The point-prevalence estimate of shoulder pain was 23.00% (3 studies, 312 of 1491 firefighters, 95% confidence interval: 15.00 to 33.00), back pain was 27.0% (3 studies, 367 of 1491 firefighters, 95% confidence interval: 18.00 to 38.00), and knee pain was 27.00% (2 studies, 180 of 684 firefighters, 95% confidence interval: 11.00 to 48.00). The 1-year period-prevalence estimate of all sprain/strain injuries

(all body parts) was 10.0% (2 studies, 278 of 2652 firefighters, 95% confidence interval: 7.00 to 14.00).

Conclusion: We identified high point-prevalence estimates (1 in 4 firefighters) of shoulder-, back-, and knee-related MSDs among Canadian firefighters. This emphasizes the need for early assessment, intervention, and injury prevention strategies that reflect how units work together to maximize ergonomic efficiency and injury prevention.

Keywords: firefighters, Canada, multiple injury, rehabilitation.

4.1 Introduction

Firefighters are at high risk of sustaining work-related injuries/trauma and this poses major threats to their health.[1-3] Firefighters are required to respond to a vast range of dynamic demands within their roles that extend well beyond just fire suppression. Such tasks include ice water rescue, trench rescue, marine rescue, aircraft rescue, motor vehicle accidents, train derailments, automobile extrication, hazardous material, and confined space/high-angle rescue. Firefighting is a dangerous and high-risk profession with tremendous demands on the musculoskeletal system.[4-6] Such demands are largely due to its high on-the-job death rates, unfavorable environment/working shifts, and extreme levels of physical exertions over long periods of time, all while carrying a heavy base load of personal protective equipment.[4-6] Despite the decline in total number of work-related musculoskeletal disorders (MSDs) injuries among firefighters reported by the National Fire Information Database since 2005, the frequency remains high – 1.5 injuries per firefighter, per reported fire response event – in Ontario, Canada.[7]

MSDs (sprains, strains, pain) remain the leading type of injuries during fire-ground operations (area where fire-fighting operations are performed) among firefighters.[8] The tasks associated with firefighting (i.e., heavy lifting, awkward postures), along with its unpredictable nature and simultaneous exposure to hostile environments, are likely contributing factors.[4] Identifying the prevalence of MSDs among firefighters is crucial to assist the development of injury prevention strategies.

The prevalence of a condition pertains to the proportion of individuals in a population that has a specific condition.[9] Point- and period-prevalence are two distinct measures. Point-prevalence specifies prevalence measured at a particular point in time, whereas period-prevalence denotes prevalence assessed over an interval of time.[9] Such estimates are required for policy makers and health care professionals to enhance the development and delivery of services.[9]

Several individual studies have assessed the prevalence of MSDs among Canadian firefighters.[4,10-13] While individual studies provide valuable insights, they 1) fail to elucidate the anatomical distribution of the condition, 2) do not compare subgroups, or 3) fail pool similar studies to provide an estimate from which inferences can be drawn.[9]

Therefore, we conducted a systematic review and meta-analysis of prevalence studies and attempted:

1. To critically appraise the quality of the body of literature that reports the prevalence of MSDs among Canadian firefighters; and
2. To assess the point- and period-prevalence estimates of anatomical regions of MSDs among Canadian firefighters.

4.2 Methods

We followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) and the Joanna Briggs Institute (2014) Prevalence Critical Appraisal Checklist.[9,14] Protocol registration number: PROSPERO CRD42018104235

4.2.1 Eligibility Criteria

Studies were included in this systematic review if the below criteria were met:

- Design: prospective or retrospective cross-sectional cohort studies,
- Participants: career/professional Canadian firefighters,
- Outcomes: point- and period-prevalence estimate of musculoskeletal disorders,
- Musculoskeletal disorders: we defined musculoskeletal disorders as sprains or strains, fractures or dislocations, and self-reported bodily pain (chronic or acute).

Studies that provided no information on the number of un-injured firefighters (required for prevalence calculation) were excluded from this systematic review. Conference abstracts and posters were also excluded.

4.2.2 Information Sources

We conducted systematic electronic searches to identify relevant prospective or retrospective cross-sectional cohort studies in MEDLINE, EMBASE, PubMed, and Web of Science from inception until November 2018. Several different combinations of keywords were used, such as: “firefighters”, “prevalence”, “proportion”, “musculoskeletal injuries”, “sprains”, “strains”, “joint injuries” and “head/neck/shoulder/arm/elbow/hand/hip/knee/ankle/back injuries/pain”. In addition, we carried out a search in the clinical trial registers catalogues including WHO clinical trial registry and NIH clinical trial registry and performed a manual search of the references of all the included studies.

4.2.3 Study Selection

Two independent reviewers performed the systematic electronic searches in each database and clinical trial registers catalogue. Duplicate studies were identified and removed. Reviewers then independently screened the titles and abstracts and retrieved in full text any article marked ‘include’ or ‘uncertain’. In the final stage of study selection, we conducted an independent full text review to determine final eligibility.

4.2.4 Data Collection Process

Two independent researchers extracted the data from the eligible studies. Data extraction included the author, year, country, study population/setting/type, sample size, age, sex, point-/period-prevalence, types of musculoskeletal disorders, and ascertainment/case definition.[9] When insufficient data were presented, contacted the authors by email and requested further data.

4.2.5 Assessment of Quality of Included Studies

Two independent review authors assessed the quality of included studies using the critical appraisal checklist from The Joanna Briggs Institute Reviewers' Manual (2014).[9] This checklist used a domain-based approach. The evaluation criteria included: 1) whether the sample was representative of the target population; 2) if study participants were recruited in an appropriate way (used a stratified random sampling with eligibility criteria to ensure that the sample was representative of the population that the researchers were attempting to generalize to); 3) adequacy of sample size; 4) description of study subjects and setting in detail; 5) whether data analysis was conducted with sufficient coverage of the identified sample (was there a large number of dropouts or refusals among the eligible participants which may diminish a study's validity); 6) whether objective, standard criteria were used for measurement of the condition; 7) if the condition was measured reliably; 8) whether appropriate statistical analyses were performed and precision estimates reported; 9) if all important confounding factors/subgroups/differences were identified and accounted for; and 10) whether subpopulations were identified using objective criteria.[9]

4.2.6 Summary Measures

We performed 30 meta-analyses of studies reporting the prevalence of MSDs among Canadian firefighters. Both period- and point-prevalence estimates were calculated, and study-specific estimates were pooled using a random-effects model. The proportion (random-effects), their weighted proportions, and 95% confidence intervals were summarized in forest plots. Software programs (MedCalc software bvba, version 16.2.1 and Stats Direct version 3) were used to facilitate all statistical analyses.

4.2.7 Subgroup Analysis and Exploring Heterogeneity

In the presence of heterogeneity, we planned to perform subgroup analyses (a priori) based on the duration of MSDs (chronic vs acute) and sex (males vs females). An I^2 estimate of at least 50% was interpreted as evidence of a substantial problem with heterogeneity.[15]

4.3 Results

Initially, our search yielded 256 publications. After removal of the duplicates, 185 articles remained and were screened using their title and abstract, leaving 100 articles selected for full text review. A total of 95 studies were excluded due to: ineligible population (35 studies), inappropriate study design (3 studies), or lack of MSK prevalence estimates (57 studies). 5 studies were eligible to proceed to data extraction and analysis.[4,10-13] The flow of studies through the selection process is presented in (Figure – 4.1).

4.3.1 Study Characteristics

The 5 eligible cohort studies (3 prospective, 2 retrospective) were conducted between 2015 and 2018 and included 4143 firefighters.[4,10-13] Mean age ranged from 34 ± 8.5 to 42.6 ± 9.7 years. The reported types of MSDs included sprain or strain, fractures, head/neck/shoulder/elbow/arm/hand/back/upper thigh/knee/foot pain. Study size ranged from 294 to 1363 firefighters. Studies were conducted in various provinces across Canada. A summary description of all the included studies is displayed in (Table – 4.1).

4.3.2 Critical appraisal of Quality of Individual studies

The quality of the included studies was assessed using the Joanna Briggs Institute (2014) Prevalence Critical Appraisal Checklist (Table – 2). The most common flaws noted were

1) not considering an objective, standard criteria for measurement of the condition, 2) unclear how reliably the condition was measured, and, 3) lack of description of study subjects and settings in detail. The inter-rater agreement using kappa (κ) coefficient was 0.90; 95% CI: 0.93 – 0.87.

4.3.3 Outcomes: Musculoskeletal Disorders (MSDs)

Overall, 5 cohort studies (3 prospective, 2 retrospective) were included in the review. The 2 included studies reported on the overall and anatomical regions period-prevalence of sprains/strains and fractures/dislocations.[10-11] In these two studies, MSDs were examined retrospectively using the data extracted from workers' compensation forms/injury reports. The remaining 3 studies reported on the point-prevalence of anatomical bodily pain (head/neck/shoulder/elbow/arm/hand/back/upper thigh/knee/foot).[4, 12-13] In these studies, bodily pain was assessed prospectively through administering of self-reported questionnaires.

4.3.4 Point-Prevalence of Anatomical Regions of MSDs

Head:

When focused on the pain in the head region, the point-prevalence estimate was 6.00% (3 studies, 100 of 1491 firefighters, 95% CI: 3.00 to 10.00; I^2 = 87.00 %; Table – 4.3). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 3.6% (2 studies, 19 of 555 firefighters, 95% CI: 2.20 – 5.30; I^2 = 0.0%; Table – 4.3). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 6.80% (2 studies, 8 of 126 firefighters, 95% CI: 3.20 – 11.70; I^2 = 0.0%; Table – 4.3).

Neck:

In terms of neck pain, the point-prevalence estimate was 17.00% (3 studies, 231 of 1491 firefighters, 95% CI: 12.00 to 22.00; I^2 = 86.00 %; Table – 4.3). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 18.60% (2 studies, 103 of 555 firefighters, 95% CI: 15.50 – 22.00; I^2 = 0.0%; Table – 4.3). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 23.40% (2 studies, 29 of 126 firefighters, 95% CI: 16.50 – 31.00; I^2 = 0.0%; Table – 4.3).

Shoulder:

For the shoulder pain, the point-prevalence estimate was 23.00% (3 studies, 312 of 1491 firefighters, 95% CI: 15.00 to 33.00; I^2 = 94.00%; Table – 4.4). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 28.60% (2 studies, 159 of 555 firefighters, 95% CI: 22.00 – 35.80; I^2 = 14.00%; Table – 4.4). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 23.70% (2 studies, 27 of 126 firefighters, 95% CI: 12.10 – 37.70; I^2 = 8.0%; Table – 4.4).

Elbow, Arm, and Hand:

Regarding elbow, arm and hand regions, the point-prevalence estimate of pain was 17.00% (3 studies, 235 of 1491 firefighters, 95% CI: 8.00 to 27.00; I^2 = 96.00 %; Table – 4.4). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 18.50% (2 studies, 107 of 555 firefighters, 95% CI: 5.20 – 37.50; I^2 = 42.0%; Table – 4.4). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 29.20% (2 studies, 14 of 126 firefighters, 95% CI: 0.07 – 85.00; I^2 = 39.0%; Table – 4.4).

Back:

In terms of back pain, the point-prevalence estimate was 27.0% (3 studies, 367 of 1491 firefighters, 95% CI: 18.00 to 38.00; I^2 = 95.00 %; Table – 4.5). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 31.60% (2 studies, 175 of 555 firefighters, 95% CI: 27.80 – 35.50; I^2 = 0.0%; Table – 4.5). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 42.60% (2 studies, 44 of 126 firefighters, 95% CI: 18.70 – 68.50; I^2 = 0.0%; Table – 4.5).

Upper Thigh:

When focused on the pain in the upper thigh region, the point-prevalence estimate was 6.0% (2 studies, 41 of 684 firefighters, 95% CI: 3.00 to 11.00; I^2 = 82.00 %; Table – 4.5). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 5.80% (2 studies, 33 of 555 firefighters, 95% CI: 2.30 – 11.00; I^2 = 40.0%; Table – 4.5). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 12.00% (2 studies, 8 of 126 firefighters, 95% CI: 0.30 – 37.10; I^2 = 35.0%; Table – 4.5).

Knee:

For knee pain, the point-prevalence estimate was 27.00% (2 studies, 180 of 684 firefighters, 95% CI: 11.00 to 48.00; I^2 = 97.00 %; Table – 4.6). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 29.00% (2 studies, 163 of 555 firefighters, 95% CI: 13.80 – 46.80; I^2 = 30.0%; Table – 4.6). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates

of 21.00% (2 studies, 17 of 126 firefighters, 95% CI: 3.00 – 48.80; I^2 = 27.0%; Table – 4.6).

Foot:

Regarding the foot region, the point-prevalence estimate of pain was 7.00% (3 studies, 105 of 1491 firefighters, 95% CI: 6.00 to 8.00; I^2 = 0.0 %; Table – 4.6). When stratified by male sex and pain duration (past 1-week), the pooled results displayed point estimates of 6.80% (2 studies, 37 of 555 firefighters, 95% CI: 4.90 – 9.10; I^2 = 0.0%; Table – 4.6). When stratified by female sex and pain duration (past 1-week), the pooled results indicated point estimates of 6.30% (2 studies, 7 of 126 firefighters, 95% CI: 2.20 – 12.50; I^2 = 7.40%; Table – 4.6).

4.3.5 Period-Prevalence of Sprains/strains Injuries

In terms of all sprain/strain injuries (all body parts), the 1-year period-prevalence estimate was 10.0% (2 studies, 278 of 2652 firefighters, 95% CI: 7.00 to 14.00; I^2 = 89.00 %; Table – 4.7). Further anatomical region analyses indicated 1-year period-prevalence estimates of 1.30% (shoulder; 2 studies, 35 of 2652 firefighters, 95% CI: 0.60 – 2.30; I^2 = 76.00%; Table – 4.7), 2.00% (knee; 2 studies, 51 of 2652 firefighters, 95% CI: 0.60 – 4.00; I^2 = 90.00%; Table – 4.7), 3.00% (back; 2 studies, 89 of 2652 firefighters, 95% CI: 2.00 – 5.00; I^2 = 64.00%; Table – 4.7), and 2.00% (ankle; 2 studies, 41 of 2652 firefighters, 95% CI: 1.00 – 2.00; I^2 = 64.00%; Table – 4.7).

4.3.6 Period-Prevalence of Fractures/dislocation Injuries

When focused on fractures/dislocations (all body parts), the 1-year period-prevalence estimate was 1.00% (2 studies, 26 of 2652 firefighters, 95% CI: 0.70 to 1.40; I^2 = 4.50 %; Table – 4.8).

4.4 Discussion

This systematic review and meta-analysis of MSDs found high point-prevalence estimates of neck, shoulder, arm/elbow/hand, back, and knee pain among both male and female Canadian firefighters. In addition, we found high period- (1-year) prevalence estimates of sprain/strain injuries (1 in 10 firefighters). These findings represent a unique synthesis of the evidence and puts an emphasis on the importance of developing firefighter-specific rehabilitation and injury prevention programs.

The conduct of reliable and valid epidemiologic studies is required to describe and compare the prevalence of MSDs among various populations. Such studies can then be used for identification of risk factors and development of injury prevention and rehabilitation programs. In our review, the point-prevalence estimates of pain in regions of neck (17.00%), shoulder (23.00%), arm/elbow/hand (17.00%), back (27.00%), knee (27.00%), and foot (7.00%) were nearly 2 to 4 times higher than that of Canadian general population (neck pain: 5.40%; shoulder pain 6.10%; arm/elbow/hand pain 7.40%; back pain 22.30%; knee pain 9.50%; foot pain 3.40%).[16] Although these proportions cannot directly statistically be compared to the general population estimates in 2007-2008, they do appear higher.[16] Similarly, our 10% period- (1-year) prevalence estimates of sprain/strain injuries among firefighters were much higher than that of the Canadian general population estimates of approximately 5.5% in 2009-2010.[17]

The quality of the included studies was assessed using the Joanna Briggs Institute (2014) Prevalence Critical Appraisal Checklist (Table – 2). Use of the Joanna Briggs Institute

domain-based tool revealed that the most common limitation was not considering an objective, standard criteria for measurement of the condition, found in 2 (retrospective cohort) of the 5 included studies. The Frost 2015 and 2016 studies both involved secondary analyses of data collected from the injury reports filed within the Calgary Fire Department (CFD).

Despite the decline in total number of firefighter injuries reported by the National Fire Protection Association in the United States, firefighter injuries remain high; 62,085 injuries were reported in the United States in 2016.[18-19] Furthermore, the major types of injuries received during fireground operations were strain, sprain, and muscular pain 45.7 %.[18] This US data were comparable with our results. Similarities exist between individuals in the firefighting profession, the military, and professional sports in that all involve extended periods of training, conduct of heavy and repetitive tasks, and extreme physical exertions; however, athletes are not exposed to occupational loads. Soldiering or a career in the military is extremely challenging considering its high operational tempo and wide spectrum of mission requirements.[20] In addition, members of the armed forces must attain and maintain high levels of physical readiness to be able to carry out their operational tasks.[20] Likewise, professional athletes train and practice constantly and are expected to be in top physical conditions. The results from our review were comparable across both military and athletic populations when considering different point- and period-prevalence studies. When considering point-prevalence, the bodily pain point estimates (shoulder 23.0%; neck 17.0%) identified in our review were comparable to the Lew (2009) study of 340 US veterans with point-prevalence estimates of (shoulder 21.0%; neck 19.0%).[21] However, a higher point-prevalence estimate of back pain (58.0%) was reported relative to ours (27.0%).[21] In terms of period-prevalence estimates and comparison with military and athletic populations, estimates of sprain/strain injuries (10.0%) in our review were also similar to the period-prevalence estimates reported in the literature. Jacobsson (2012) noted that the period- (1-year) prevalence estimate of sprain/strain injuries among 276 Swedish elite track and field athletes was 8.5%.[22] Lovalekar (2016) reported that the period- (1-year) prevalence estimate of sprain/strain injuries among 210 Naval Special Warfare Sea, Air, and Land (SEAL) operators was 9.5% (20 of 210 SEALs)[23] and 10.6% (48 of 451

soldiers) for sprain/strain injuries among the 451 soldiers from the Army 101st Airborne (Air Assault) Division.[24] Abt (2014) noted that the period- (1-year) prevalence estimate of sprain/strain injuries among 106 U.S. Army Special Operations Command (USASOC) special forces soldiers was 8.5% (9 of 106 soldiers).[25] It is important to note that our period-prevalence estimate of sprain/strain injuries (10.0%; 278/2652 firefighters) was based on two retrospective cohort studies, was consistent with similar high demand occupational (military) estimates.

Firefighter-related studies tend to exclude women from their statistical analyses due to inadequate sample size (underpowered), which ultimately leads to lack of data concerning female firefighters. Furthermore, it is important to distinguish the prevalence of MSDs by anatomical regions between men and women firefighters. Therefore, in this review, we planned a priori to conduct subgroup analysis by sex (male and female) to address these issues. We identified that the point-prevalence of shoulder- and knee-related MSDs were higher in male firefighters by 5% and 8 % respectively. Conversely, head-, neck-, arm/elbow/hand-, back- and upper thigh-related MSDs were more prevalent in female firefighters by 3%, 5%, 10.7%, 11% and 6% respectively. These findings highlight the high prevalence of MSDs among firefighters who are already at an elevated risk of sustaining MSDs compared to the Canadian general population.

Identifying prevalence estimates and distribution of MSDs is necessary to assist the development of data-driven rehabilitation programs.[26-27] In this review, nearly 1 out of 4 Canadian firefighters reported having suffered from shoulder, back or knee pain in the past 3-months. Therefore, physical therapists and other health care providers and personnel with a keen understanding of the occupational knowledge and specific biomechanical requirements of MSK system are indicated in the design and implementation of rehabilitation programs that take into account firefighters' demands and occupational requirements; the standard of physical performance to which they need to return after injury must be front of mind in effective service delivery for fire fighters.

When interpreting the results of this review, it is important to note that heterogeneity was high in of our analyses. High heterogeneity was explained/reduced by sex (male or female)

and duration of MSDs (acute or chronic) in our sub-group analyses. However, sub-group analyses are inherently under-powered, and caution must be used when interpreting our prevalence estimates (evident by wide 95% confidence intervals)

Firefighting tasks such as hose drag or stair climb with a high-rise pack have been reported to be physiologically demanding, necessitating firefighters to work at near maximal heart rates.[5-6] Sex is believed to have an impact on fitness levels. Female firefighters' fitness profiles consistently differ in comparison to their male-counterparts in terms of cardiovascular levels, muscle strength and endurance.[28] Furthermore, there are biomechanical strategies that are distinct among male and female firefighters. For example, in needing to pull oneself up to a window, a male firefighter might use his upper body whereas a female might rely more on core and legs. In addition, female firefighters also employ compensatory strategies such as body momentum to achieve firefighting task completion.[28] Our review highlights the need for: early assessment and intervention; assessing how firefighters carry out their on-duty tasks; injury prevention strategies that reflect sex differences in biomechanics; and re-evaluating how units work together to maximize ergonomic efficiency and injury prevention. Furthermore, "women firefighters are not just 'size small' men"[29] and personal protective equipment (PPE) needs to be both functional as well as safe, aiming to keep firefighters healthy.

4.5 Conclusions

This systematic review provides evidence on the prevalence of MSDs among Canadian firefighters. Overall, we found high point-prevalence estimates (1 in 4 firefighters) of shoulder-, back- and knee-related MSDs among Canadian firefighters. The point-prevalence of shoulder- and knee-related MSDs were higher in male firefighters, whereas head-, neck-, arm/elbow/hand-, back- and upper thigh-related MSDs were more prevalent in female firefighters. Furthermore, the period-prevalence of sprain/strain injuries were also noticeably high (1 in 10 firefighters).

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Table 4.1 Included study characteristics

Study	Population	Prevalence (point-/period-)	Study type	Types of MSDs	Ascertainment / Case definition
Frost (2016) [11] Metropolitan Calgary Alberta Canada	n = 1289	Period-prevalence 1-year	Retrospective cohort	Sprain or strain, (Shoulder, Ankle, Back, Knee sprains) Fractures	Secondary analysis of data collected between January 1, 2012 and December 31, 2012 from the injury reports filed the Calgary Fire Department (CFD).
Frost (2015) [10] Metropolitan Calgary Alberta Canada	n = 1363 1336 males, 27 females. Age (yrs.) 38 ± 9.	Period-prevalence (2007-2011)	Retrospective cohort	Sprain or strain, (Shoulder, Ankle, Back, Knee sprains) Fractures	Secondary analysis of data from the injury reports filed by Calgary Fire Department (CFD).
Negm (2017) [4] Career Hamilton Ontario Canada	n = 294 active-duty firefighters 283 males, 8 females, 3 not reported. Age (yrs.) 42.6 ± 9.7.	Point-prevalence	Prospective cohort	Head, Neck, Shoulder, Elbow, Arm, Hand, Back, Upper thigh, Knee and Foot pain	Self-reported musculoskeletal disorder questionnaire – pain body diagram on the Iconic Pain Assessment Tool (IPAT). Pain felt within the past week
Nazari (2019) [13] Career Across Canada	n = 390 firefighters 272 males (age 41 ± 9.5 years), 118 females (34 ± 8.5 years)	Point-prevalence	Prospective cohort	Head, Neck, Shoulder, Elbow, Arm, Hand, Back, Upper thigh, Knee and Foot pain	Self-reported musculoskeletal disorder questionnaire. Pain felt within the past week
Carleton (2017) [12] Urban & Rural Across Canada	807 firefighters	Point-prevalence	Prospective cohort	Neck, Shoulder, Arm and Hand, Foot and Back pain	Self-reported questionnaire – developed based on the work done International Association for the Study of Pain. Pain lasting longer than 3 months

Table 4.2 Critical appraisal results for included studies using the Joanna Briggs Institute (2014) Prevalence Critical Appraisal Checklist.

Study	Critical Appraisal Components								
	Was the sample representative of the target population?	Were study participants recruited in an appropriate way?	Was the sample size adequate?	Were the study subjects and setting described in detail?	Is the data analysis conducted with sufficient coverage of the identified sample?	Were objective, standard criteria used for measurement of the condition?	Was the condition measured reliably?	Was there appropriate statistical analysis?	Are all important confounding factors/ subgroups/differences identified and accounted for?
Frost (2016) [11]	Yes	Yes	Yes	Unclear	Yes	Unclear	Unclear	Yes	Yes
Frost (2015) [10]	Yes	Yes	Yes	Unclear	Yes	Unclear	Unclear	Yes	Yes
Nazari (2019) [13]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Carleton (2017) [12]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Negm (2017) [4]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

The domain "Were subpopulations identified using objective criteria" was Not Applicable.

Table 4.3 Meta-analyses of the Point-Prevalence of Self-Reported MSDs Among Canadian Firefighters.

Body part: Head

Study	No of Injuries	No. of Firefighters	Weight (%)	Proportion (%)	95% Confidence Interval
Nazari (2019) [13]	15	390	26.00	4.00	2.00 – 6.00
Negm (2017) [4]	12	294	20.00	4.00	2.00 – 7.00
Carleton (2017) [12]	73	807	54.00	9.00	7.00 – 11.00
Total	100	1491	100 %		
Random-effects model Heterogeneity I^2 = 87.0 %, P < .001				6.00	3.00 – 10.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	8	272	49.00	2.90	1.30 – 5.70
Negm (2017) [4]	11	283	51.00	3.90	2.00 – 6.80
Total	19	555	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.55				3.60	2.20 – 5.30
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	7	118	93.00	6.00	2.40 – 11.80
Negm (2017) [4]	1	8	7.00	12.50	0.30 – 52.60
Total	8	126	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.34				6.80	3.20 – 11.70

Body part: Neck

Nazari (2019) [13]	74	390	26.00	19.00	15.00 – 23.00
Negm (2017) [4]	58	294	20.00	20.00	15.00 – 25.00
Carleton (2017) [12]	99	807	54.00	12.00	10.00 – 15.00
Total	231	1491	100 %		
Random-effects model Heterogeneity I^2 = 86.0 %, P < .001				17.00	12.00 – 22.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	46	272	49.00	17.00	12.70 – 21.90
Negm (2017) [4]	57	283	51.00	20.00	15.60 – 25.30
Total	103	555	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.33				18.60	15.50 – 22.00
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	28	118	93.00	24.00	16.40 – 32.40
Negm (2017) [4]	1	8	7.00	12.50	0.30 – 52.70
Total	29	126	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.58				23.40	16.50 – 31.00

Table 4.4 Meta-analyses of the Point-Prevalence of Self-Reported MSDs Among Canadian Firefighters.

Body part: Shoulder

Study	No of Injuries	No. of Firefighters	Weight (%)	Proportion (%)	95% Confidence Interval
Nazari (2019) [13]	92	390	26.00	24.00	19.00 – 28.00
Negm (2017) [4]	94	294	20.00	32.00	27.00 – 38.00
Carleton (2017) [12]	126	807	54.00	16.00	13.00 – 18.00
Total	312	1491	100 %		
Random-effects model Heterogeneity I^2 = 94.0 %, P < .001				23.00	15.00 – 33.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	68	272	50.00	25.00	20.00 – 30.60
Negm (2017) [4]	91	283	50.00	32.20	26.70 – 38.00
Total	159	555	100 %		
Random-effects model Heterogeneity I^2 = 14.0 %, P = 0.07				28.60	22.00 – 35.80
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	24	118	82.00	20.30	13.50 – 28.70
Negm (2017) [4]	3	8	18.00	37.50	8.50 – 75.50
Total	27	126	100 %		
Random-effects model Heterogeneity I^2 = 8.0 %, P = 0.24				23.70	12.10 – 37.70

Body part: Arm, Elbow & Hand

Nazari (2019) [13]	38	390	26.00	10.00	7.00 – 13.00
Negm (2017) [4]	85	294	20.00	29.00	24.00 – 34.00
Carleton (2017) [12]	112	807	54.00	14.00	12.00 – 16.00
Total	235	1491	100 %		
Random-effects model Heterogeneity I^2 = 96.0 %, P < .001				17.00	8.00 – 27.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	29	272	50.00	10.70	7.30 – 15.00
Negm (2017) [4]	78	283	50.00	27.50	22.40 – 33.00
Total	107	555	100 %		
Random-effects model Heterogeneity I^2 = 42.0 %, P < 0.001				18.50	5.20 – 37.50
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	9	118	53.00	7.70	3.50 – 14.00
Negm (2017) [4]	5	8	47.00	62.50	24.50 – 91.50
Total	14	126	100 %		
Random-effects model Heterogeneity I^2 = 38.0 %, P < 0.001				29.20	0.07 – 85.00

Table 4.5 Meta-analyses of the Point-Prevalence of Self-Reported MSDs Among Canadian Firefighters.

Body part: Back

Study	No of Injuries	No. of Firefighters	Weight (%)	Proportion (%)	95% Confidence Interval
Nazari (2019) [13]	123	390	26.00	32.00	27.00 – 36.00
Negm (2017) [4]	96	294	20.00	33.00	27.00 – 38.00
Carleton (2017) [12]	148	807	54.00	18.00	16.00 – 21.00
Total	367	1491	100 %		
Random-effects model Heterogeneity I^2 = 95.0 %, P < .001				27.00	18.00 – 38.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	84	272	49.00	31.00	25.40 – 36.70
Negm (2017) [4]	91	283	51.00	32.20	26.70 – 38.00
Total	175	555	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.75				31.60	27.80 – 35.50
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	39	118	66.00	33.00	24.70 – 42.30
Negm (2017) [4]	5	8	34.00	62.50	24.50 – 91.50
Total	44	126	100 %		
Random-effects model Heterogeneity I^2 = 0.00 %, P = 0.10				42.60	18.70 – 68.50

Body part: Upper Thigh

Nazari (2019) [13]	16	390	57.00	4.00	2.00 -7.00
Negm (2017) [4]	25	294	43.00	9.00	6.00 – 12.00
Total	41	684	100 %		
Random-effects model Heterogeneity I_2 = 82.0 %, P = 0.02				6.0	3.00 – 11.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	10	272	50.00	3.70	1.80 – 6.65
Negm (2017) [4]	23	283	50.00	8.10	5.20 – 12.00
Total	33	555	100 %		
Random-effects model Heterogeneity I^2 = 40.00 %, P = 0.03				5.80	2.30 – 11.00
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	6	118	63.00	5.10	1.90 – 10.70
Negm (2017) [4]	2	8	37.00	25.00	3.20 – 65.10
Total	8	126	100 %		
Random-effects model Heterogeneity I^2 = 35.0 %, P = 0.07				12.00	0.30 – 37.10

Table 4.6. Meta-analyses of the Point-Prevalence of Self-Reported MSDs Among Canadian Firefighters.

Body part: Knee

Study	No of Injuries	No. of Firefighters	Weight (%)	Proportion (%)	95% Confidence Interval
Nazari (2019) [13]	70	390	57.0	18.0	14.0 – 22.0
Negm (2017) [4]	110	294	43.0	37.0	32.0 – 43.0
Total	180	684	100 %		
Random-effects model Heterogeneity I^2 = 97.0 %, P < 0.001				27.0	11.00 – 48.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	56	272	50.00	20.50	16.00 – 26.00
Negm (2017) [4]	107	283	50.00	38.00	32.10 – 43.70
Total	163	555	100 %		
Random-effects model Heterogeneity I^2 = 30.0 %, P < 0.001				29.00	13.80 – 46.80
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	14	118	63.00	12.00	6.60 – 19.10
Negm (2017) [4]	3	8	37.00	37.50	8.50 – 75.50
Total	17	126	100 %		
Random-effects model Heterogeneity I^2 =27.0 %, P = 0.06				21.00	3.00 – 48.80

Body part: Foot

Nazari (2019) [13]	23	390	26.0	6.0	4.0 – 9.0
Negm (2017) [4]	21	294	20.0	7.0	4.0 – 11.0
Carleton (2017) [12]	61	807	54.0	8.0	6.0 – 10.0
Total	105	1491	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.58				7.00	6.00 – 8.00
Subgroup Analysis Stratified by Gender (male) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	17	272	49.00	6.30	3.70 – 9.80
Negm (2017) [4]	20	283	51.00	7.10	4.40 – 10.70
Total	37	555	100 %		
Random-effects model Heterogeneity I^2 = 0.0 %, P = 0.70				6.80	4.90 – 9.10
Subgroup Analysis Stratified by Gender (female) and Duration of Self-Reported MSD (past 1-week).					
Nazari (2019) [13]	6	118	90.00	5.10	1.90 – 10.70
Negm (2017) [4]	1	8	10.00	12.50	0.30 – 52.70
Total	7	126	100 %		
Random-effects model Heterogeneity I^2 = 7.40 %, P = 0.30				6.30	2.20 – 12.50

Table 4.7. Meta-analyses of the Period-Prevalence (1-year) Sprains/Strains Among Canadian Firefighters.

All body parts

Study	No of Injuries	No. of Firefighters	Weight (%)	Proportion (%)	95% Confidence Interval
Frost (2016) [11]	159	1289	49.00	12.00	11.00 – 14.00
Frost (2015) [10]	119	1363	51.00	9.00	7.00 – 10.00
Total	278	2652	100 %		
Random-effects model Heterogeneity I^2 = 89.00 %, P < 0.001				10.00	7.00 – 14.00

Body part: Shoulder

Frost (2016) [11]	23	1289	49.00	2.00	1.10 – 2.60
Frost (2015) [10]	12	1363	51.00	0.80	0.40 – 1.50
Total	35	2652	100 %		
Random-effects model Heterogeneity I^2 = 76.0 %, P = 0.04				1.30	0.60 – 2.30

Body part: Knee

Frost (2016) [11]	36	1289	49.00	3.00	2.00 – 4.00
Frost (2015) [10]	15	1363	51.00	1.00	0.60 – 2.00
Total	51	2652	100 %		
Random-effects model Heterogeneity I^2 = 90.00 %, P < 0.001				2.00	0.60 – 4.00

Body part: Back

Frost (2016) [11]	51	1289	49.00	4.00	3.00 – 5.00
Frost (2015) [10]	38	1363	51.00	3.00	2.00 -4.00
Total	89	2652	100 %		
Random-effects model Heterogeneity I^2 = 64.0 %, P = 0.10				3.00	2.00 -5.00

Body part: Ankle

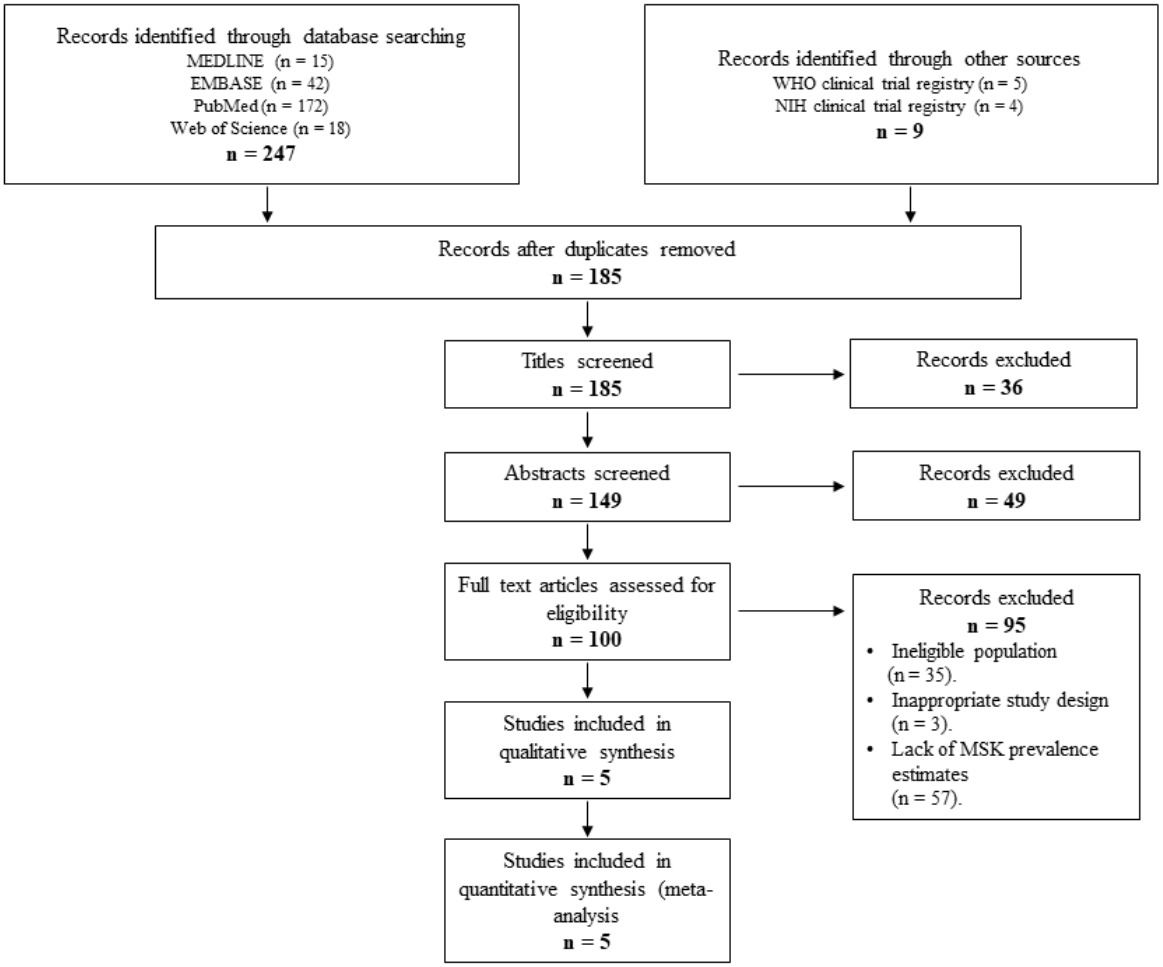
Frost (2016) [11]	17	1289	49.00	1.00	0.80 – 2.10
Frost (2015) [10]	24	1363	51.00	2.00	1.00 – 3.00
Total	41	2652	100 %		
Random-effects model Heterogeneity I^2 = 64.0 %, P = 0.10				2.00	1.00 – 2.00

Table 4.8. Meta-analyses of the Period-Prevalence (1-year) Fractures Among Canadian Firefighters.

All body parts

Study	No of Injuries	No. of Firefighters	Weight (%)	Proportion (%)	95% Confidence Interval
Frost (2016) [11]	10	1289	49.00	0.70	0.40 – 1.40
Frost (2015) [10]	16	1363	51.00	1.10	0.60 – 2.00
Total	26	2652	100 %		
Random-effects model Heterogeneity I^2 = 4.50 %, P = 0.30				1.00	0.70 – 1.40

Figure 4.1 Flow diagram of study selection



Chapter 5

5 Only One-third of Randomized Clinical Trials Published in Top Rehabilitation Therapy Journals were Prospectively Registered between 2015 – 2020. However, Trends Have Been Improving. A Systematic Review.

Abstract

Objective: To assess the extent and trends in registration of rehabilitation randomized clinical trials (RCTs) between 2015 – 2020.

Methods: Primary publications of RCTs published in ten top rehabilitation journals (Google Scholar Metrics 2020; ISI Journal Citation Reports 2018 rankings) between 2015 – 2020 were included in this systematic review with no restrictions on patient population, intervention/control groups or outcome type. Independent reviewers in pairs were involved in RCT selection and data extraction. The proportion of RCTs published that were registered (prospectively or retrospectively) or not registered were reported using counts and percentages stratified by years for each journal.

Results: A total of 968 primary RCTs were considered eligible. About 212 – 213 (31 – 34% of RCTs across journals) of RCTs were reported to have been registered prospectively. The total number of prospective RCT registrations increased fourfold – 13 RCTs in 2015 to 54 RCTs in 2020 (Google Scholar Metrics 2020 rankings) and 14 RCTs in 2015 to 53 RCTs in 2020 (ISI Journal Citation Reports 2018 rankings).

Conclusion: Trends indicated increased use of registration of RCTs in the past 5 years, but 2/3 of published RCTs still fail to report prospective registration.

Keywords: Randomised clinical trials, transparency, state of evidence, physical therapy.

5.1 Introduction

Properly conducted randomized clinical trials (RCTs) provide the highest level of evidence – are considered the most rigorous method of establishing cause-effect relationship between an intervention and outcome – and are second only to systematic reviews of such RCTs which occupy the top of the hierarchy of evidence.[1-3] While theoretically, RCTs protect against confounding and many sources of bias, adequate reporting is essential to evaluate whether trials have adhered to best practices in design and conduct of the study to be confident in the conclusions made.[4-6] There have been numerous attempts to further improve the reporting, transparency, rigor and reproducibility in RCTs including the International Committee of Medical Journal Editors (ICMJE) recommendations, the Consolidated Standards of Reporting Trials (CONSORT) 2010 statement, and the Standard Protocol Items: Recommendations for Interventional Trials (SPIRIT) 2013 Statement and that of n-of-1 trials.[4-8]

The ICMJE has developed several recommendations to assist (bio)medical journals, editors and authors to create, publish and distribute highly accurate, transparent and reproducible medical journal articles.[6, 9-10] The ICMJE recommendations (which also involve periodic updates) have been put forth for use by the contributing authors who aim to publish in ICMJE member journals as well as in multiple non-ICMJE journals who voluntarily and explicitly require adherence to such recommendations in "Instructions for Authors" sections of their respective journals.[6, 9-10] The ICMJE "requires, and recommends that all medical journal editors require, registration of clinical trials in a public trials registry at or before the time of first patient enrollment as a condition of consideration for publication".[6, 9-10] The purpose for such RCTs registration is to minimize selective publication and reporting of outcomes, to minimize and potentially prevent the conduct of similar trials, to provide a platform and allow patients to enroll in current or future trials of interest, and to present further information to the ethics committees/review boards of similar previous work.[6, 9-10]

A recent review indicated that the publications of RCTs have increased at a much higher rate (more than double) in the field of rehabilitation therapy than in any other health/medical science fields.[11] This may indicate advances in the science in the field. However, it important to evaluate the extent to which proper trial registration in public trials registry is being used as an indicator of the quality of emerging RCTs.

Considering the facts that a) most of the top journals in the field of rehabilitation therapy explicitly state in their "Instructions for Authors" sections the "required" need to adhere to ICMJE recommendations concerning RCTs registration; b) the increased rate of RCT publications in the field of rehabilitation therapy; c) the vital role of such RCTs; and d) the paucity of evidence on the proportion of RCTs with proper trial registrations, we aimed:

1. to examine the percentage of RCTs published that were reported to have been registered (prospectively or retrospectively) or not registered between 2015 – 2020 in rehabilitation journals; and
2. to assess the association between RCT registration and rehabilitation therapy journals – which journals are more likely to publish RCTs that were adequately registered, between 2015 – 2020?

5.2 Methods

This systematic review was registered and can be accessed at: https://osf.io/awmjt/. This systematic review was then reported following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines.[12-13]

5.2.1 Eligibility Criteria

Primary publications of RCTs published between June 11, 2015 and June 11, 2020 in top rehabilitation journals were included in this systematic review with no restrictions on

patient population (condition/disease), intervention/control groups or outcome type (i.e. continuous, dichotomous outcome or time to event). An RCT was defined as a comparative study reporting a random assignment of patients/participants (reporting "random," "randomized", "randomised", "randomization", randomisation") anywhere in the report.[14-15] We excluded duplicate, protocol, systematic review, (network) meta-analysis, analysis plans, feasibility, pilot or phase 1 publications. In addition, we excluded subgroup, exploratory, interim, pooled, post hoc, secondary outcome or economic/cost-effectiveness analyses, preliminary results/studies, ancillary/sub-studies, laboratory studies, measurement studies, proof-of-concept studies or mechanism research. [14-16]

5.2.2 Information Sources

PubMed was systematically searched on June 12, 2020, to identify primary publications of RCTs published between June 11, 2015 and June 11, 2020. Specifically, the primary publications of RCTs published in the ten highest h5-index Rehabilitation Therapy journals, as reported by Google Scholar Metrics 2020,[17] and the primary publications of RCTs published in the ten highest impact factor Rehabilitation journals, as reported by ISI Journal Citation Reports 2018.[18]

Rehabilitation therapy journal rankings according to Google Scholar Metrics 2020 were as follows:[17]

1. Archives of Physical Medicine and Rehabilitation
2. Journal of Neuro-Engineering and Rehabilitation
3. IEEE Transactions on Neural Systems and Rehabilitation Engineering (IEEE)
4. Neurorehabilitation and Neural Repair
5. Clinical Rehabilitation
6. Disability and Rehabilitation
7. Journal of Head Trauma Rehabilitation
8. Manual Therapy

9. Brain Injury
10. Physical Medicine and Rehabilitation (PM&R)

Rehabilitation journal rankings according to ISI Journal Citation Reports 2018 were as follows:[18]

1. Journal of Physiotherapy
2. Annals of Physical and Rehabilitation Medicine
3. Neurorehabilitation and Neural Repair
4. Journal of Neuro-engineering And Rehabilitation
5. IEEE Transactions on Neural Systems and Rehabilitation Engineering (IEEE)
6. Journal of Orthopaedic & Sports Physical Therapy
7. Physical Therapy
8. Exceptional Children
9. Supportive Care in Cancer
10. Clinical Rehabilitation

5.2.3 Search strategy

The following search strategy was used in PubMed:

(((((((("randomized controlled trial"[Title/Abstract] OR "randomised controlled trial"[Title/Abstract]) OR "Randomized"[Title/Abstract]) OR "Randomised"[Title/Abstract]) OR "placebo"[Title/Abstract]) OR "clinical trials as topic"[MeSH Terms:noexp]) OR "randomly"[Title/Abstract]) OR "trial"[Title]) NOT ("animals"[MeSH Terms] NOT "humans"[MeSH Terms])) AND ((((((((((((("Journal of physiotherapy"[Journal] OR "annals of physical and rehabilitation medicine"[Journal]) OR "The Journal of orthopaedic and sports physical therapy"[Journal]) OR "Physical therapy"[Journal]) OR "Exceptional children"[Journal]) OR "supportive care in cancer

official journal of the multinational association of supportive care in cancer"[Journal]) OR "Archives of physical medicine and rehabilitation"[Journal]) OR "Journal of neuroengineering and rehabilitation"[Journal]) OR "ieee transactions on neural systems and rehabilitation engineering a publication of the ieee engineering in medicine and biology society"[Journal]) OR "Neurorehabilitation and neural repair"[Journal]) OR "Clinical rehabilitation"[Journal]) OR "Disability and rehabilitation"[Journal]) OR "The Journal of head trauma rehabilitation"[Journal]) OR "Manual therapy"[Journal]) OR "Brain injury"[Journal]) OR "pm r the journal of injury function and rehabilitation"[Journal])) AND 2015/6/11:3000/1/1[Date - Publication]

5.2.4 Study Selection

Study selection was undertaken via Covidence (https://www.covidence.org, Melbourne VIC 3000, Australia). One reviewer conducted the systematic electronic search in PubMed to retrieve all the articles. Upon uploading of the retrieved studies, the Covidence software automatically removed the duplicates. Two reviewers then applied the inclusion/exclusion criteria and screened studies based upon titles and abstracts. In the event of disagreement, the opinion of a third reviewer was requested. Retrieved articles were then classified as ‘yes’ or ‘maybe’. The articles of the “yes” and “maybe” records were moved through Covidence for full-text screening by the same two independent reviewers. In the event of disagreement concerning inclusion or exclusion of full text articles, the opinion of a third reviewer was requested (i.e. a third reviewer resolved the conflicts).

5.2.5 Data Collection Process

Three independent reviewers carried out extraction of data from the included RCTs and identified (if available) the corresponding trial registration (i.e. each reviewer individually extracted data for one-third of the included RCTs). To further ensure accurate data extraction, the primary author (GN) independently performed duplicate data extraction

from all the included RCTs. Extracted data was then cross checked for accuracy. For every primary publication of published RCT we extracted (authors, year, study title, journal, type of registration, if any). For registered information – from the trial registries (if available), we extracted (authors, year, name of registry/registration number, registration date, start date/start of patient enrollment date, end date/end of patient enrollment date, current status).

5.2.6 Data items

Identifying trial registries

For each published RCT, we identified the registration number / name of registry via trial registries (International Clinical Trials Registry Platform (ICTRP), ClinicalTrials.gov, Health Canada Clinical Trial Database, EU Clinical Trials Register, German Clinical Trials Register, Netherlands Trial Register (Dutch), Swiss National Clinical Trials Portal, ISRCTN, Australian New Zealand Clinical Trials Registry, Chinese Clinical Trial Registry, Clinical Trials Registry – India, Iranian Registry of Clinical Trials, Japan Primary Registries Network, Clinical Research Information Service, Australian New Zealand Clinical Trials Registry, Philippine Health Research Registry, Sri Lanka Clinical Trials Registry, Thai Clinical Trials Registry, Brazilian Clinical Trials Registry, Public Cuban Registry of Clinical Trials, Peruvian Registry of Clinical Trials, Pan African Clinical Trials Registry, South African National Clinical Trials Register, Tanzania Clinical Trial Registry).

In the case of reporting only a registration number with no corresponding trial registry name, or the trial registry name with no registration number, we performed a manual search to identify the corresponding trial registry name or registration number, respectively. If no registration number or trial registry name was identified, the published RCT was considered not registered.[14-16]

Journals "Instructions for Authors"

The primary author assessed the "Instructions for Authors" section of the selected journals and checked whether each journal clearly requested 1) the registration of an RCT (and as of when, if applicable) before submission of an RCT and 2) if the journal referred authors to the ICMJE guidelines about RCT registration.

5.2.7 Summary Measures / Synthesis of results

The proportion of RCTs published that were registered (prospectively or retrospectively) or not registered were reported using counts and percentages, stratified by years. This proportion statistic was therefore interpreted as "at least x% of RCTs were prospectively or retrospectively registered or not registered". We followed ICMJE recommendations concerning RCT registrations and categorized RCTs as follows:

1) we identified from the final set of included published RCTs those without trial registrations. These RCTs were categorized as "RCTs not registered";

2) we identified the published RCTs that were registered after RCT commencement (i.e. trial registration date was after the start of first patient enrollment date). These RCTs were categorized as "RCTs registered retrospectively";

3) we identified published RCTs that were registered prior to RCT commencement (i.e. trial registration date was prior to the start of first patient enrollment date). These RCTs were categorized as "RCTs registered prospectively".

The categorization of types of registrations (prospectively or retrospectively or no registration) were performed by 4 reviewers independently. Three reviewers, each individually categorized one-third of the included RCTs. Then, the primary author (GN) categorized all the included RCTs in duplicate. The agreements between the types of categorization of registrations (prospectively or retrospectively or no registration) were assessed using Kappa (κ) coefficient.

To further examine the association between RCT registration and rehabilitation therapy journals, we combined the categories (*RCTs not registered* and *RCTs registered retrospectively)* into the category of RCTs with "*Inadequate registration".* The *RCTs registered prospectively* category was not altered and was kept as it was. For each journal comparison, we tabulated all information in a 2x2 table relating the type of trial registration (prospective registration vs inadequate registration / total RCTs) to journal pairs (for example, journal A vs journal B). An odds ratio (M-H, random effect) was then calculated from the 2x2 table for every journal pair. Odds ratios greater than 1.0 meant that a specific journal had higher odds of publishing a prospectively registered RCT compared with another given journal. Odds ratios less than 1.0 meant that a specific journal had higher odds of publishing an inadequately registered (retrospectively or not registered) RCT compared with another given journal.

5.3 Results

Initially, our search resulted in 2687 publications. After duplicate removal, a total of 2600 studies were left. Screening of title/abstracts removed 481 articles, and the remaining 2119 studies were selected for full-text review. Of the 2119 studies, 968 primary RCTs were considered eligible for data analysis (1151 studies removed). The flow of studies through the selection process is presented in Figure 5.1. (Appendix C presents the reasons for exclusion of 1632 studies. Appendix D provides the list of all 968 included RCTs, journals and types of registrations, if any). The between rater agreements between the types of categorization of RCT registrations (prospective or retrospective or no registration) using κ coefficient was 0.94; 95% CI: 0.90 – 0.98.

5.3.1 Proportion of RCTs Published and Registered by Journals

The total number of RCTs published in each rehabilitation therapy journal (Google Scholar Metrics 2020 rankings) are displayed in (Table 5.1). The Clinical Rehabilitation journal had the highest number of RCTs published (n=224), while Neurorehabilitation and Neural Repair journal had the highest percentage (41%) of prospectively registered RCTs. The Journal of Neuro-Engineering and Rehabilitation had the highest percentage (53%) of retrospectively registered RCTs. The Archives of Physical Medicine and Rehabilitation journal had the lowest percentage (20%) of RCTs that were not registered. (Figure 5.2) displays the total number of RCTs and types of registrations for each journal.

We summarized the total number of RCTs published in each rehabilitation therapy journal (by ISI Journal Citation Reports 2018 rankings) in (Table 5.2). The Clinical Rehabilitation journal had the highest number of RCTs published (n = 224), while Journal of Physiotherapy had the highest percentage (93%; 39 RCTs) of prospectively registered RCTs. The Journal of Neuro-Engineering and Rehabilitation had the highest percentage (53%) of retrospectively registered RCTs. The Journal of Physiotherapy had the highest overall registration rate (98%). (Figure 5.3).

5.3.2 Proportion of RCTs Published and Registered by Journals stratified by Years

The number of RCTs published and the types of registration (prospective / retrospective / no registration) for each journal between years 2015 – 2020 have been displayed in Table 5.3 and Figure 5.4 – based on Google Scholar Metrics 2020, and in Table 5.4 and Figure 5.5 – based on ISI Journal Citation Reports 2018.

The total number of prospective RCTs registrations have increased fourfold – 13 RCTs in 2015 to 54 RCTs in 2020 (Google Scholar Metrics 2020 rankings) and 14 RCTs in 2015

to 53 RCTs in 2020 (ISI Journal Citation Reports 2018 rankings). On the other hand, the total number of RCTs with no registration were reduced threefold – 38 RCTs in 2015 to 12 RCTs in 2020 (Google Scholar Metrics 2020 rankings) – and to a lesser extent – 26 RCTs in 2015 to 19 RCTs in 2020 – based on ISI Journal Citation Reports 2018 rankings.

5.3.3 Association between RCT Registration and Journals

RCTs registration vs journals – Google Scholar Metrics 2020 rankings, are displayed in (Figure 5.6).

Higher odds of publishing RCTs with prospective trial registration:

Neurorehabilitation and Neural Repair journal displayed higher odds of publishing RCTs with prospective trial registrations when compare to Brain Injury (OR = 12.02; 95% CI: 1.51 – 95.49); IEEE (OR = 9.20; 95% CI: 1.14 – 74.25); Journal of Neuro-Engineering and Rehabilitation (OR = 5.66; 95% CI: 1.80 – 17.75); or Manual Therapy (OR = 3.11; 95% CI: 1.06 – 9.18).

Archives of Physical Medicine and Rehabilitation displayed higher odds of publishing RCTs with prospective trial registrations when compare to Brain Injury (OR = 9.69; 95% CI: 1.26 – 74.62); Journal of Neuro-Engineering and Rehabilitation (OR = 4.56; 95% CI: 1.54 – 13.51).

Disability and Rehabilitation journal displayed higher odds of publishing RCTs with prospective trial registrations when compare to Brain Injury (OR = 11.20; 95% CI: 1.41 – 89.12); IEEE (OR = 8.56; 95% CI: 1.06 – 69.29); Journal of Neuro-Engineering and Rehabilitation (OR = 5.27; 95% CI: 1.67 – 16.59).

Higher odds of publishing RCTs with inadequate trial registrations:

Journal of Neuro-Engineering and Rehabilitation displayed higher odds of publishing RCTs with inadequate trial registrations when compare to Archives of Physical Medicine and Rehabilitation (OR = 0.22; 95% CI: 0.07 – 0.65); Clinical rehabilitation (OR = 0.30; 95% CI: 0.10 – 0.88); Disability and Rehabilitation (OR = 0.19; 95% CI: 0.06 – 0.60); Journal of Head Trauma Rehabilitation (OR = 0.24; 95% CI: 0.07 – 0.86); Neuro-rehabilitation and Neural Repair (OR = 0.18; 95% CI: 0.06 – 0.55).

Brain Injury journal displayed higher odds of publishing RCTs with inadequate trial registrations when compare to Archives of Physical Medicine and Rehabilitation (OR = 0.10; 95% CI: 0.01 – 0.79); Disability and Rehabilitation (OR = 0.09; 95% CI: 0.01 – 0.71); Journal of Head Trauma Rehabilitation (OR = 0.11; 95% CI: 0.01 – 0.97); Neuro-rehabilitation and Neural Repair (OR = 0.08; 95% CI: 0.01 – 0.66).

RCTs registration vs journals – by ISI Journal Citation Reports 2018 rankings, are displayed in (Figure 7).

Higher odds of publishing RCTs with prospective trial registration:

Journal of Physiotherapy displayed higher odds of publishing RCTs with prospective trial registrations when compare to all other journals: Annals of Physical and Rehabilitation Medicine (OR = 46.80; 95% CI: 10.07 – 217.53); Clinical Rehabilitation (OR = 31.12; 95% CI: 9.29 – 104.25); Exceptional Children (OR = 124.14; 95% CI: 5.62 – 2740.71); IEEE (OR = 169.0; 95% CI: 16.14 – 1769.59); Journal of Neuro-engineering And Rehabilitation (OR = 104.00; 95% CI: 21.67 – 499.02); Journal of Orthopaedic & Sports Physical Therapy (OR = 22.00; 95% CI: 5.65 – 85.70); Neurorehabilitation and Neural Repair (OR = 18.38; 95% CI: 5.18 – 65.25); Physical Therapy (OR = 10.11; 95% CI: 2.58 – 39.64); Supportive Care in Cancer (OR = 38.30; 95% CI: 11.17 – 131.30).

Physical Therapy journal displayed higher odds of publishing RCTs with prospective trial registrations when compare to Annals of Physical and Rehabilitation Medicine (OR = 4.63; 95% CI: 1.38 – 15.56); Clinical Rehabilitation (OR = 3.08; 95% CI: 1.45 – 6.55); IEEE

(OR = 16.71; 95% CI: 1.95 – 143.57); Journal of Neuro-engineering And Rehabilitation (OR = 10.29; 95% CI: 2.94 – 35.98); Supportive Care in Cancer (OR = 3.79; 95% CI: 1.72 – 8.36).

Higher odds of publishing RCTs with inadequate trial registrations:

Journal of Neuro-engineering And Rehabilitation displayed higher odds of publishing RCTs with inadequate trial registrations when compare to Clinical Rehabilitation (OR = 0.30; 95% CI: 0.10 – 0.88); Journal of Orthopaedic & Sports Physical Therapy (OR = 0.21; 95% CI: 0.06 – 0.73); Journal of Physiotherapy (OR = 0.01; 95% CI: 0.00 – 0.05); Neurorehabilitation and Neural Repair (OR = 0.18; 95% CI: 0.06 – 0.55); Physical Therapy (OR = 0.10; 95% CI: 0.03 – 0.34).

5.4 Discussion

Our systematic review assessed the proportion of RCTs published in the field of rehabilitation therapy that were reported to have been registered (prospectively or retrospectively) or not registered between 2015 – 2020 and found that only one-third of the RCTs were prospectively registered and the remaining two-thirds were inadequately registered (retrospective or no registration). The proportion of prospectively registered RCTs had increased fourfold and percentage of RCTs with no trial registration had decreased up to threefold (1.5 to 3 times lower), between 2015 – 2020 in the field of rehabilitation therapy. Furthermore, the Journal of Physiotherapy was more likely to publish RCTs with prospective trial registrations when compare to all other rehabilitation journals based on ISI Journal Citation Reports 2018 rankings.

The ICJME initiative for RCT registration (prior to first patient enrollment) and insistence on making trials details publicly available were aimed to improve the transparency and reproducibility of clinical research and the accountability in the conduct of such trials.[14,19-

[21] In our review, 31 – 34% of RCTs (213/685 RCTs; 212/627 RCTs) were reported to have been prospectively registered – registration prior to first patient enrollment. (i.e. timing of registration was appropriate). Mathieu 2009 indicated that 45% (147 out of the 323) of RCTs from cardiology, gastroenterology, and rheumatology were adequately registered.[14] The term "adequately registered" in the Mathieu 2009 implied that RCTs were registered before the end of the trial, and not necessarily prior to first patient enrollment.[14] Therefore, it is reasonable to assume that a lower proportion of RCTs would have been identified had a more stringent definition of adequate registration been used (i.e. a definition more consistent with ICJME recommendations). The lack of RCT registrations (no registrations) based on our review was 30% (206/685 RCTs; 190/627 RCTs), and this proportion corresponded well with those of Mathieu 2009 review of 28% (90 out of 323 RCTs missing registration).[14] Rongen 2016 reported that only 3% (12 out of the 362 RCTs) of orthopaedic surgical RCTs were registered prior to first patient enrollment (prospectively registered).[16] However, Rongen 2016 findings were based on RCTs published in top ten orthopedics journals between January 2010 – December 2014.[16] An update review of similar work is currently in progress and will provide further information for comparison of proportion of prospectively registered RCTs across various fields of study.

Endorsing the ICMJE guidelines by journals offers a timely opportunity for journal editors and peer-reviewers to first determine if an RCT was registered prospectively – prior to first patient enrollment, and second to identify other deviations from the planned RCT (for example selective reporting of outcome bias). We identified all the RCTs published from 16 different top rehabilitation therapy journals between 2015 – 2020. Of these 16 journals, four did not explicitly state in their "Instructions for Authors" sections the need for prospective RCT registration and adherence to ICMJE guidelines. Despite many journals (12/16 rehabilitation journals) following the ICMJE guidelines, the proportion of RCTs with retrospective registration (36 – 39%) or no registrations (30%) were still high. However, our results also indicated that overall trend in prospective RCT registrations in rehabilitation therapy have been greatly improving since 2015. Possible explanations for such improving trend might be associated with editors' and peer-reviewers' careful inspection of registration details upon submission of manuscripts (RCTs) and thus

acceptance of only prospectively registered RCTs and/or RCT authors' strict and diligent adherence to ICMJE guidelines and pre-planning in the conduct RCTs. Additionally, simple, clear and concise language in "Instructions for Authors" sections of journals such as "As of *date-here,* the *journal-name* will only consider clinical trials that have been registered before the first patient is enrolled" should be used to the improving trend in prospective RCT registrations as recommended by ICMJE guidelines.[6]

Future attempts to assess the discrepancy rates in primary outcomes between registered and published RCTs and examining the consequences of such primary outcome change – outcome change associated with larger intervention effect sizes – would provide empirical evidence for selective outcome reporting bias (magnitude and direction of bias) in the field of rehabilitation therapy.

We would also like to emphasize some caveats in our review. First, in keeping with other meta-epidemiological studies, our study primarily focused on and included published RCTs and compared it with records in registries. Therefore, we did not consider the proportion of prospectively registered rehabilitation therapy RCTs that were not continued due to lack of funding or never published due to unfavorable results. Second, we only assessed the proportion of published RCTs that were registered or not registered in the top 10 rehabilitation therapy journals (from two different sources). This proportion was not assessed in other respected rehabilitation therapy journals. It is possible that our reported proportions be over- or under-estimates of the true proportion estimate. Lastly, we categorized all the RCTs with no registration number or no name of registry in the published manuscript as "not registered". It is possible that some of the RCTs might have been prospectively registered and that the authors simply failed to report the corresponding registration number or no name of registry in the published manuscript. We considered this scenario to be very unlikely given the fact that trial registration mandates – the ICMJE guidelines – were first introduced 15 years ago, and that since 2005, multiple reporting guidelines for RCTs including the CONSORT 2010 and SPIRIT 2013 were introduced and endorsed by journals to enhance and improve RCT and protocol reporting standards.

5.4.1 Implications for Research

Trial registration is an accepted method as criterion; in addition to statements in the author instructions, funders, ethics boards, journal reviewers and editors should check trial registration prior to subjecting RCTs to peer review to enforce adherence to the requirement for RCTs to be registered prior to first patient enrollment.

5.5 Conclusions

Fifteen years after the introduction of standards for RCT registration, only one-third of the RCTs in the field of rehabilitation therapy were prospectively registered (2015 – 2020). The remaining two-thirds were inadequately registered (retrospectively or no registration). Rehabilitation, like other fields, has failed to fully implement this important mechanism for improving the integrity of RCTs.

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Conflict of Interest: None

5.6 Reference

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Table 5.1. Proportion of RCT registrations status by Google Scholar Metrics 2020 rankings.

Rank	Journal	h5-index†	h5-median‡	Registration Policy	Year endorsed	ICMJE Policy[+]	Total RCTs (n)	RCTs registered prospectively* n (%)	RCTs Registered retrospectively§ n (%)	RCTs not registered n (%)
1	Archives of Physical Medicine and Rehabilitation	61	81	Yes	2010	Yes	168	61 (36%)	74 (44%)	33 (20%)
2	Journal of Neuro-Engineering and Rehabilitation	53	79	Yes	2010	Yes	36	4 (11%)	19 (53%)	13 (36%)
3	IEEE Transactions on Neural Systems and Rehabilitation Engineering	53	73	No	N/A	No	14	1 (7%)	5 (36%)	8 (57%)
4	Neurorehabilitation and Neural Repair	48	65	Yes	2014	Yes	70	29 (41%)	21 (30%)	20 (29%)
5	Clinical Rehabilitation	46	61	Yes	Not stated	Yes	224	66 (29%)	107 (48%)	51 (23%)
6	Disability and Rehabilitation	45	53	Yes	Not stated	Yes	68	27 (40%)	14 (20%)	27 (40%)
7	Journal of Head Trauma Rehabilitation	42	52	Yes	Not stated	Yes	29	10 (34%)	5 (17%)	14 (48%)
8	Manual Therapy	39	56	Yes	Not stated	Yes	27	5 (19%)	9 (33%)	13 (48%)
9	Brain Injury	39	52	Yes	Not stated	Yes	18	1 (6%)	4 (22%)	13 (72%)
10	PM & R	37	53	Yes	2016	Yes	31	9 (29%)	8 (26%)	14 (45%)
						Total	685 (100%)	213 (31%)	266 (39%)	206 (30%)

†h5-index is the h-index for articles published in the last 5 complete years. It is the largest number h such that h articles published in 2014-2018 have at least h citations each.
‡h5-median for a publication is the median number of citations for the articles that make up its h5-index.
**prior to first patient enrollment.*
§after patient enrollment.
[+]ICMJE Policy is that it requires, and recommends that all medical journal editors require, registration of clinical trials in a public trials registry at or before the time of first patient enrollment as a condition of consideration for publication.

Table 5.2. Proportion of RCT registrations status by ISI Journal Citation Reports 2018.

Rank	Journal	Impact Factor	Registration Policy	Year endorsed	ICMJE Policy[+]	Total RCTs (n)	RCTs registered prospectively* n (%)	RCTs Registered retrospectively§ n (%)	RCTs not registered n (%)
1	Journal of Physiotherapy	5.551	Yes	2014	Yes	42	39 (93%)	2 (5%)	1 (2%)
2	Annals of Physical and Rehabilitation Medicine	4.196	Yes	Not stated	No	23	5 (22%)	8 (35%)	10 (43%)
3	Neurorehabilitation and Neural Repair	3.757	Yes	2014	Yes	70	29 (41%)	21 (30%)	20 (29%)
4	Journal of Neuro-engineering And Rehabilitation	3.582	Yes	2010	Yes	36	4 (11%)	19 (53%)	13 (36%)
5	IEEE Transactions on Neural Systems and Rehabilitation Engineering	3.478	No	N/A	No	14	1 (7%)	5 (36%)	8 (57%)
6	Journal of Orthopaedic & Sports Physical Therapy	3.058	Yes	2010	Yes	35	13 (37%)	16 (46%)	6 (17%)
7	Physical Therapy	3.043	Yes	2010	Yes	32	18 (56%)	8 (25%)	6 (19%)
8	Exceptional Children	2.854	No	N/A	No	5	0 (0%)	0 (0%)	5 (100%)
9	Supportive Care in Cancer	2.754	Yes	Not stated	No[++]	146	37 (25%)	39 (27%)	70 (48%)
10	Clinical Rehabilitation	2.738	Yes	Not stated	Yes	224	66 (29%)	107 (48%)	51 (23%)
	Total					627 (100%)	212 (34%)	225 (36%)	190 (30%)

**prior to first patient enrollment.*
§after patient enrollment.
[+]ICMJE Policy is that it requires, and recommends that all medical journal editors require, registration of clinical trials in a public trials registry at or before the time of first patient enrollment as a condition of consideration for publication.
[++]journal allows retrospective registration

Figure 5.1 Flow diagram of included RCTs

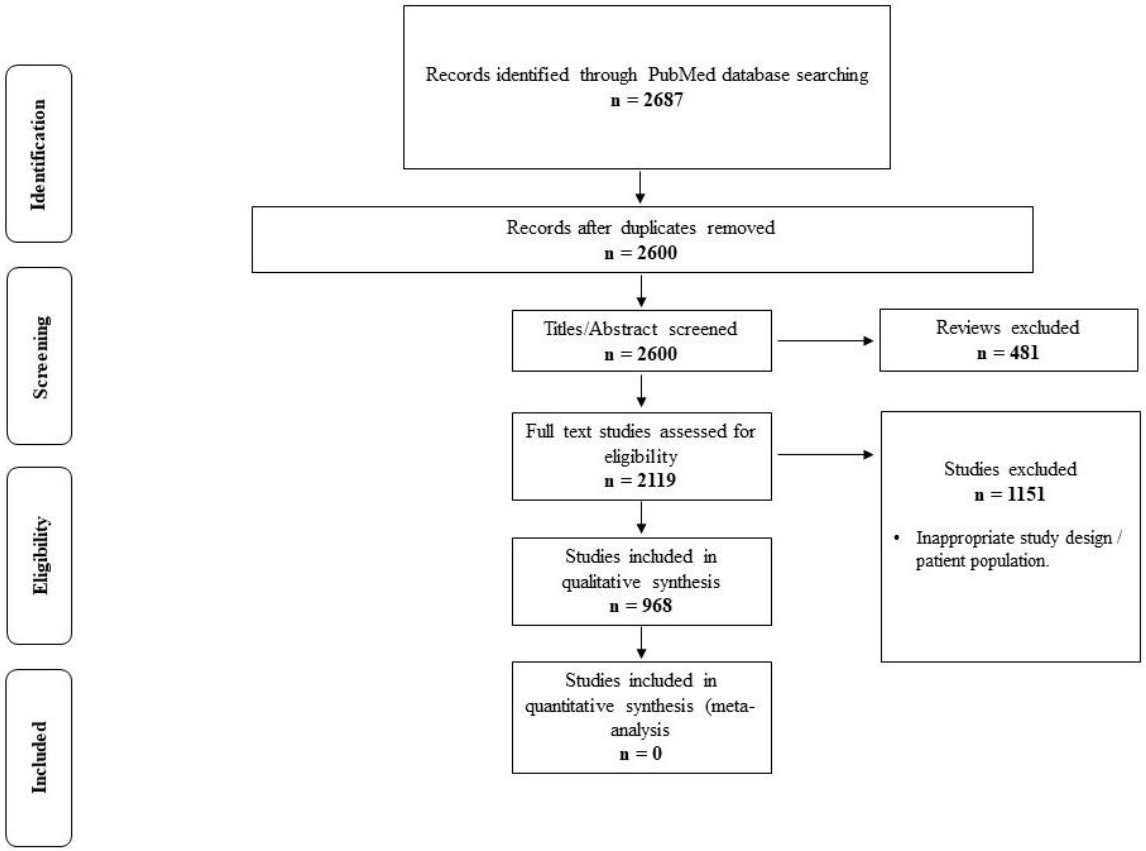


Figure 5.2. Proportion of RCT registrations status by Google Scholar Metrics 2020 rankings.

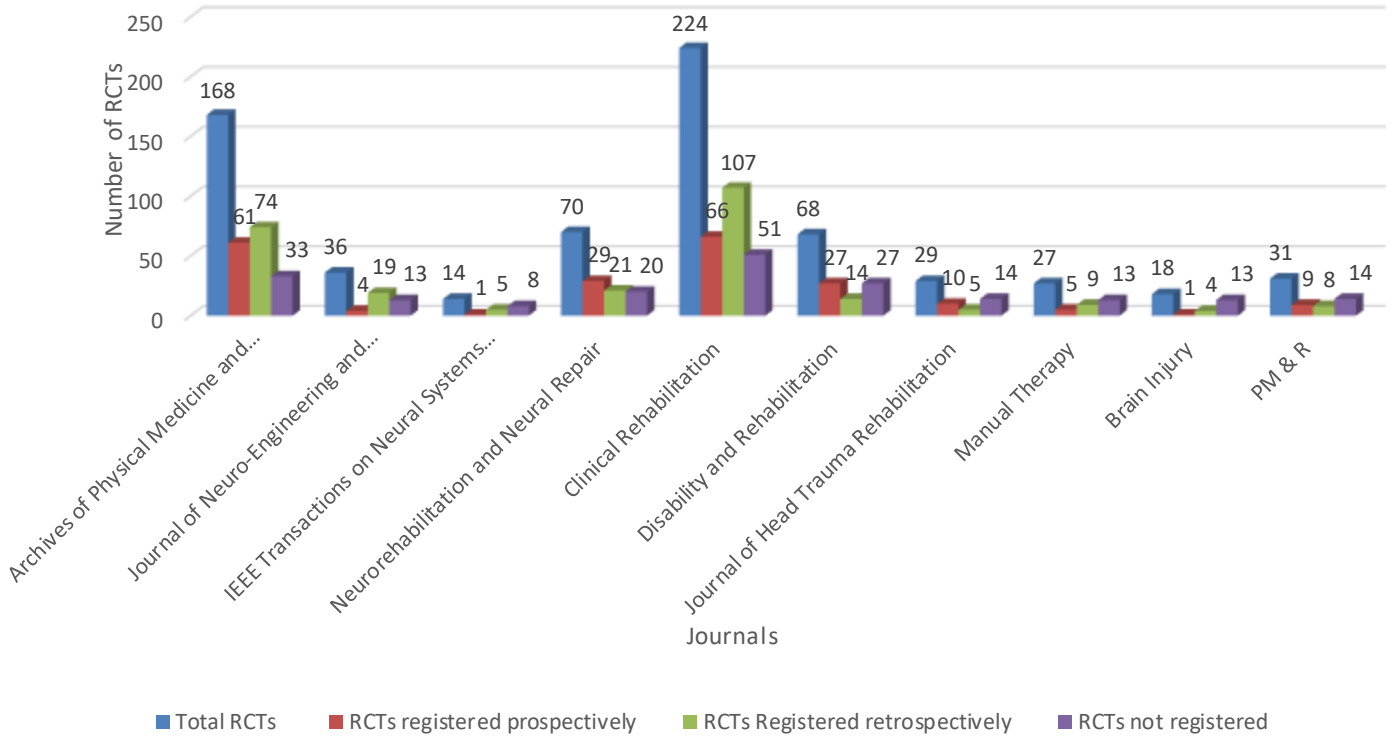


Figure 5.3. Proportion of RCT registrations status by ISI Journal Citation Reports 2018

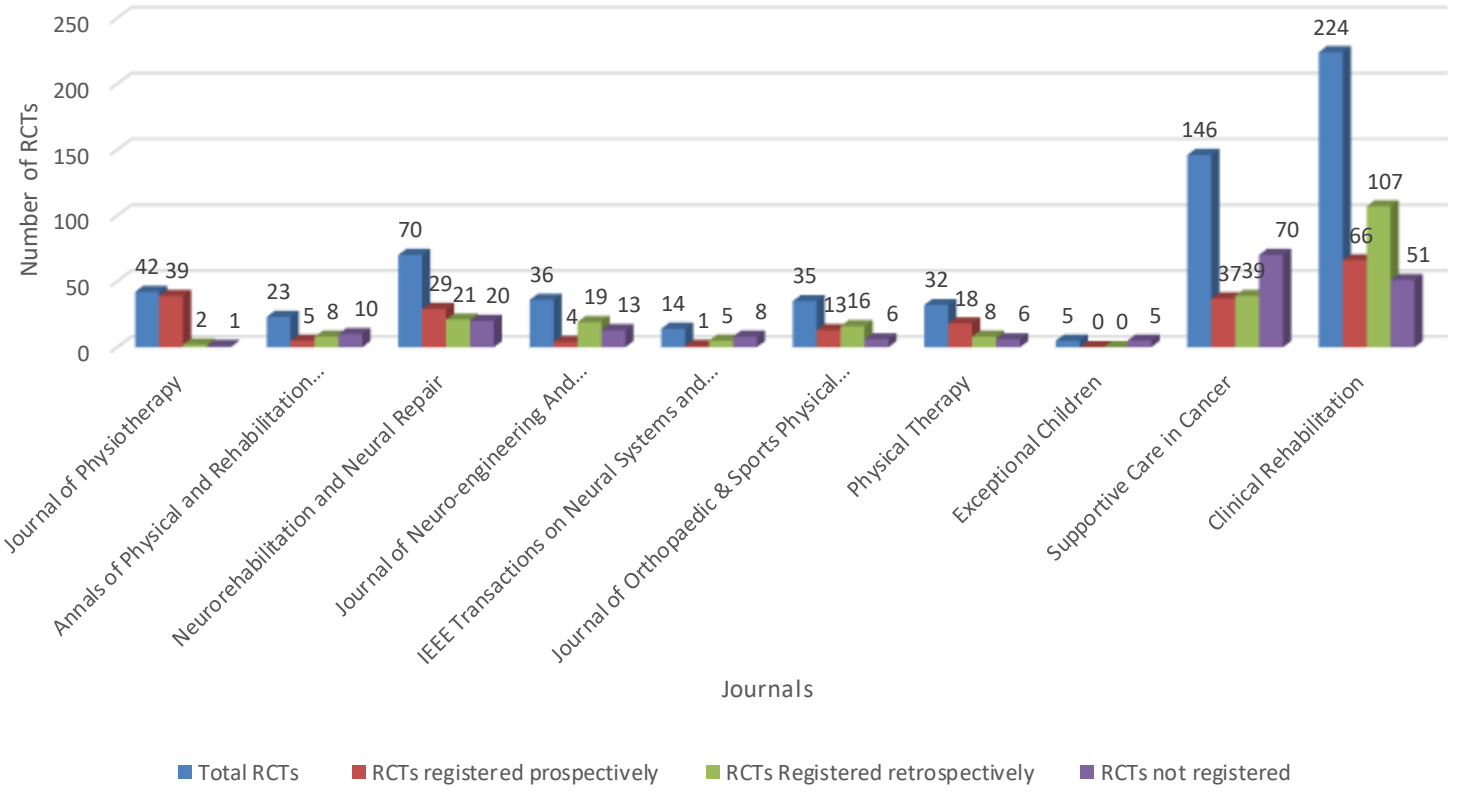


Table 5.3. Proportion of RCT registrations status by year (Google Scholar Metrics 2020).

Journal	2015	2016	2017	2018	2019	2020	Total
RCTs registered prospectively							
Archives of Physical Medicine and Rehabilitation	3	4	13	11	13	17	**61**
Journal of Neuro-Engineering and Rehabilitation	0	1	1	0	1	1	**4**
IEEE Trans on Neural Systems & Rehab Eng.	0	0	0	0	0	1	**1**
Neurorehabilitation and Neural Repair	5	5	3	7	4	5	**29**
Clinical Rehabilitation	3	2	11	14	15	21	**66**
Disability and Rehabilitation	0	3	3	6	12	3	**27**
Journal of Head Trauma Rehabilitation	0	1	1	1	3	4	**10**
Manual Therapy	2	3	0	0	0	0	**5**
Brain Injury	0	0	1	0	0	0	**1**
PM & R	0	0	2	4	1	2	**9**
Total	13	19	35	43	49	54	**213**
RCTs registered retrospectively							
Archives of Physical Medicine and Rehabilitation	8	8	22	16	9	11	**74**
Journal of Neuro-Engineering and Rehabilitation	2	3	2	5	4	3	**19**
IEEE Trans on Neural Systems & Rehab Eng.	1	0	0	0	4	0	**5**
Neurorehabilitation and Neural Repair	6	3	3	3	4	2	**21**
Clinical Rehabilitation	6	4	18	26	32	21	**107**
Disability and Rehabilitation	1	2	4	3	3	1	**14**
Journal of Head Trauma Rehabilitation	1	0	1	1	0	2	**5**
Manual Therapy	4	5	0	0	0	0	**9**
Brain Injury	0	0	1	1	0	2	**4**
PM & R	1	2	1	3	1	0	**8**
Total	30	27	52	58	57	42	**266**
RCTs not registered							
Archives of Physical Medicine and Rehabilitation	11	10	5	3	4	0	**33**
Journal of Neuro-Engineering and Rehabilitation	0	2	1	4	4	2	**13**
IEEE Trans on Neural Systems & Rehab Eng.	0	2	1	2	3	0	**8**
Neurorehabilitation and Neural Repair	4	2	5	2	6	1	**20**
Clinical Rehabilitation	10	23	8	2	5	3	**51**
Disability and Rehabilitation	0	10	9	6	1	1	**27**
Journal of Head Trauma Rehabilitation	3	1	4	2	2	2	**14**
Manual Therapy	5	8	0	0	0	0	**13**
Brain Injury	2	2	3	4	1	1	**13**
PM & R	3	5	2	1	1	2	**14**
Total	38	65	38	26	27	12	**206**

Table 5.4. Proportion of RCT registrations status by year (ISI Journal Citation Reports 2018).

Journal	2015	2016	2017	2018	2019	2020	Total
RCTs registered prospectively							
Journal of Physiotherapy	3	10	6	7	9	4	**39**
Annals of Physical and Rehabilitation Medicine	0	0	0	1	2	2	**5**
Neurorehabilitation and Neural Repair	5	5	3	7	4	5	**29**
Journal of Neuro-engineering And Rehabilitation	0	1	1	0	1	1	**4**
IEEE Trans on Neural Systems & Rehab Eng.	0	0	0	0	0	1	**1**
Journal of Orthopaedic & Sports Physical Therapy	0	3	2	2	3	3	**13**
Physical Therapy	1	3	1	2	5	6	**18**
Exceptional Children	0	0	0	0	0	0	**0**
Supportive Care in Cancer	2	5	4	6	10	10	**37**
Clinical Rehabilitation	3	2	11	14	15	21	**66**
Total	14	29	28	39	49	53	**212**
RCTs registered retrospectively							
Journal of Physiotherapy	1	0	0	0	0	1	**2**
Annals of Physical and Rehabilitation Medicine	0	0	0	1	3	4	**8**
Neurorehabilitation and Neural Repair	6	3	3	3	4	2	**21**
Journal of Neuro-engineering And Rehabilitation	2	3	2	5	4	3	**19**
IEEE Trans on Neural Systems & Rehab Eng.	1	0	0	0	4	0	**5**
Journal of Orthopaedic & Sports Physical Therapy	3	4	3	3	2	1	**16**
Physical Therapy	0	1	1	2	3	1	**8**
Exceptional Children	0	0	0	0	0	0	**0**
Supportive Care in Cancer	3	11	3	6	9	7	**39**
Clinical Rehabilitation	6	4	18	26	32	21	**107**
Total	22	26	30	46	61	40	**225**
RCTs not registered							
Journal of Physiotherapy	0	0	1	0	0	0	**1**
Annals of Physical and Rehabilitation Medicine	1	2	3	3	0	1	**10**
Neurorehabilitation and Neural Repair	4	2	5	2	6	1	**20**
Journal of Neuro-engineering And Rehabilitation	0	2	1	4	4	2	**13**
IEEE Trans on Neural Systems & Rehab Eng.	0	2	1	2	3	0	**8**
Journal of Orthopaedic & Sports Physical Therapy	2	3	1	0	0	0	**6**
Physical Therapy	2	3	0	0	1	0	**6**
Exceptional Children	1	0	2	0	2	0	**5**
Supportive Care in Cancer	6	18	13	9	12	12	**70**
Clinical Rehabilitation	10	23	8	2	5	3	**51**
Total	26	55	35	22	33	19	**190**

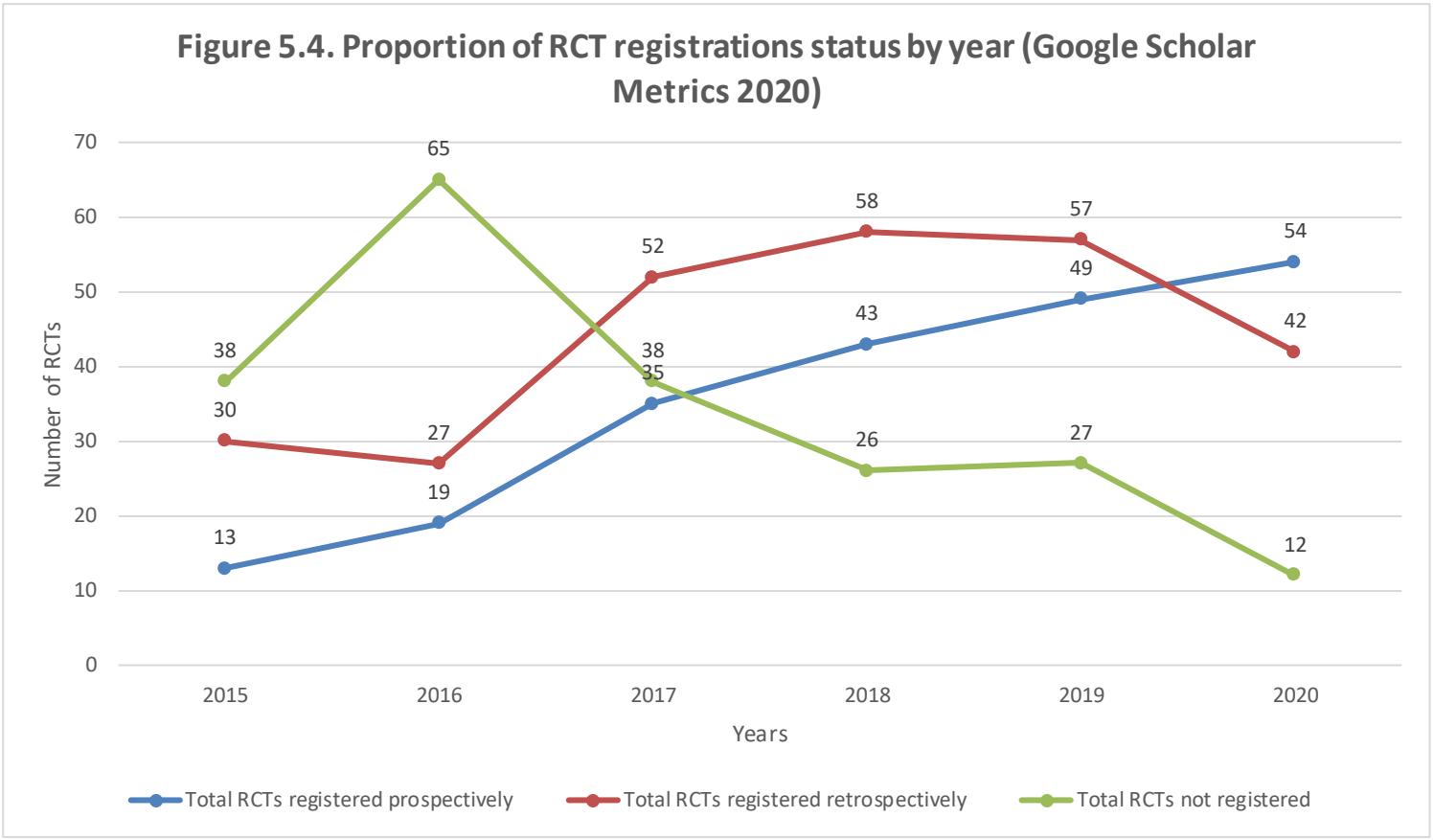


Figure 5.4. Proportion of RCT registrations status by year (Google Scholar Metrics 2020)
70
60
50
40
30
20
10
0
Number of RCTs
65
58
57
54
52
49
43
42
38
38
35
30
27
26
27
19
13
12
2015
2016
2017
2018
2019
2020
Years
Total RCTs registered prospectively
Total RCTs registered retrospectively
Total RCTs not registered

Figure 5.5. Proportion of RCT registrations status by year (ISI Journal Citation Reports 2018)

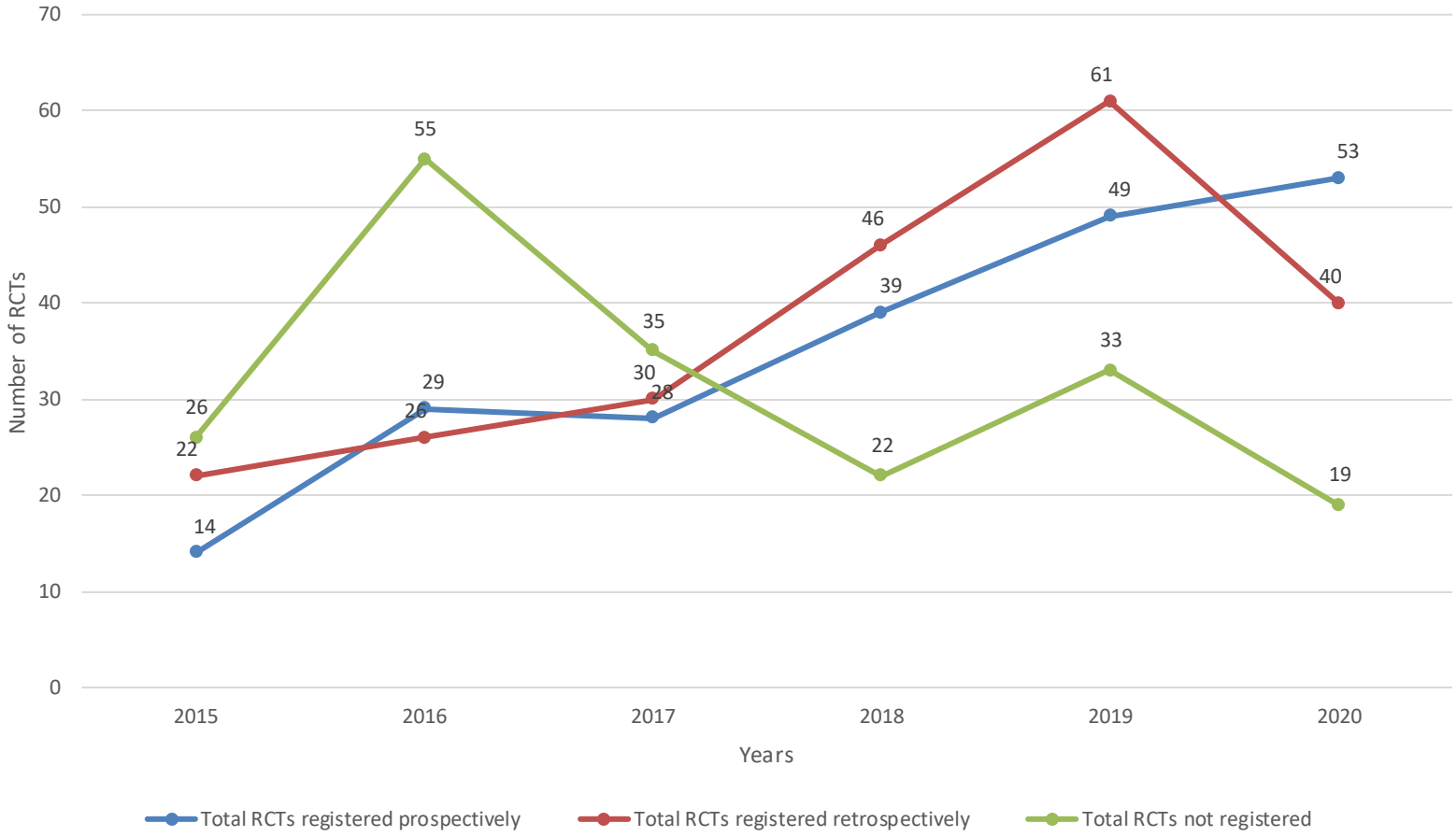
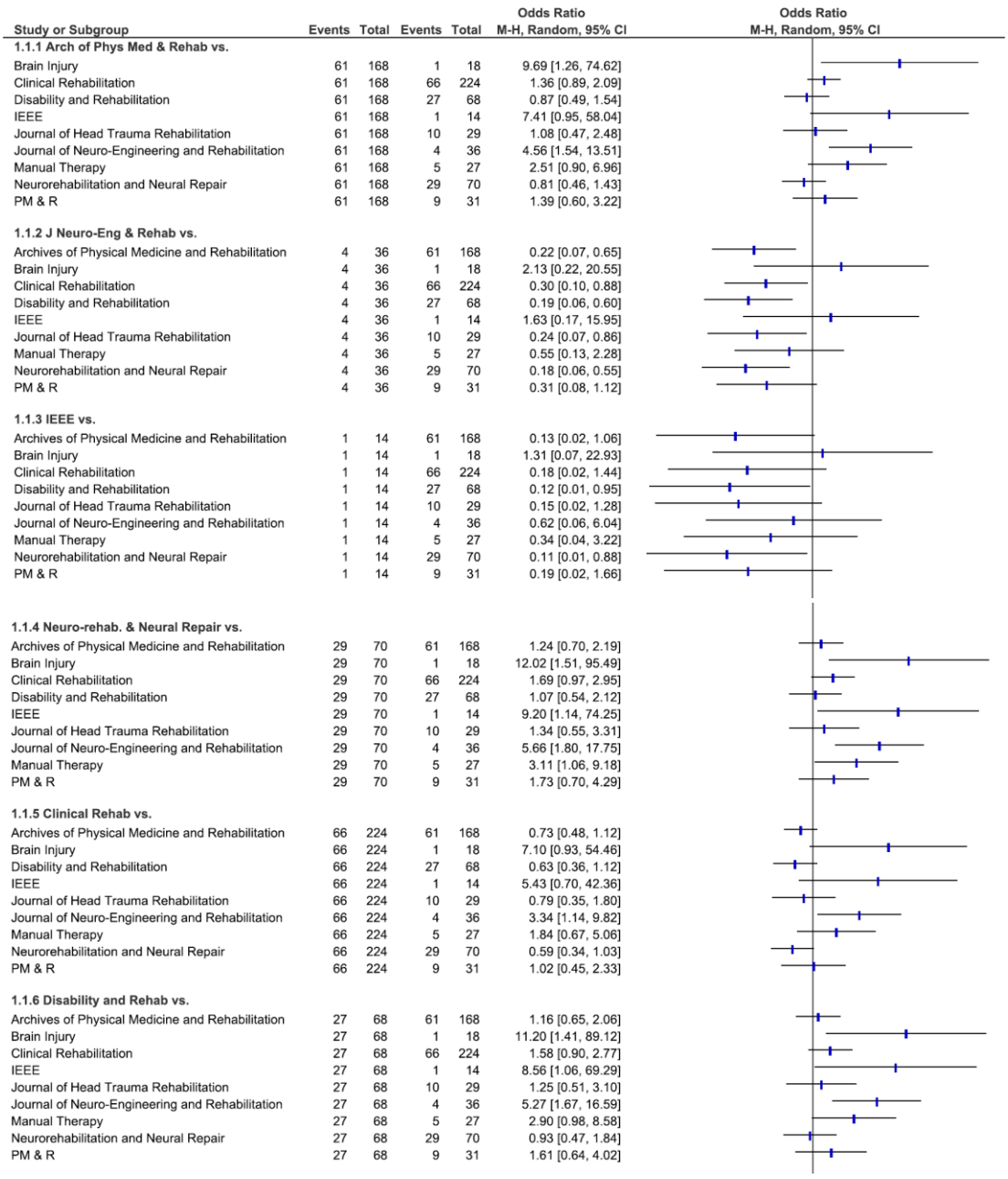
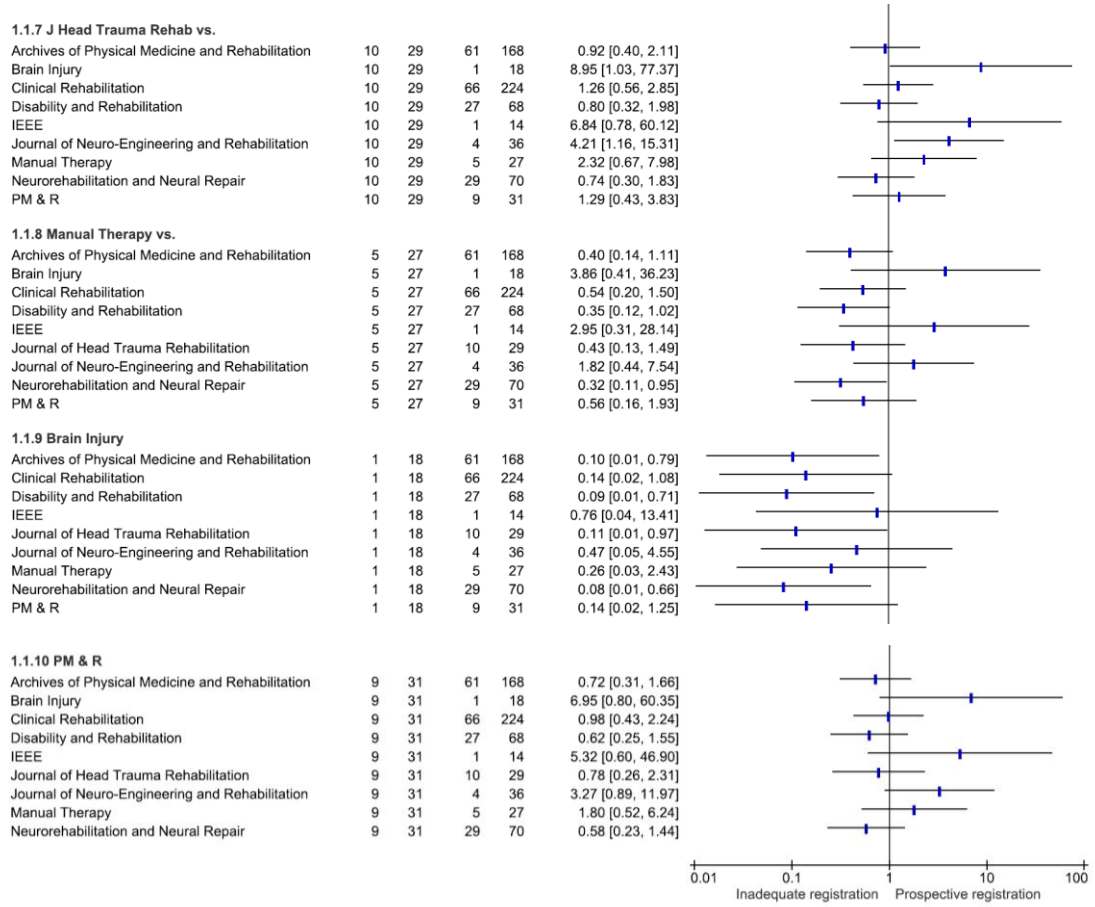


Figure 5.6 Association between RCT Registration and Journals (Google Scholar Metrics 2020).




1.1.7 J Head Trauma Rehab vs.
Archives of Physical Medicine and Rehabilitation 10 29 61 168 0.92 [0.40, 2.11]
Brain Injury 10 29 1 18 8.95 [1.03, 77.37]
Clinical Rehabilitation 10 29 66 224 1.26 [0.56, 2.85]
Disability and Rehabilitation 10 29 27 68 0.80 [0.32, 1.98]
IEEE 10 29 1 14 6.84 [0.78, 60.12]
Journal of Neuro-Engineering and Rehabilitation 10 29 4 36 4.21 [1.16, 15.31]
Manual Therapy 10 29 5 27 2.32 [0.67, 7.98]
Neurorehabilitation and Neural Repair 10 29 29 70 0.74 [0.30, 1.83]
PM & R 10 29 9 31 1.29 [0.43, 3.83]
1.1.8 Manual Therapy vs.
Archives of Physical Medicine and Rehabilitation 5 27 61 168 0.40 [0.14, 1.11]
Brain Injury 5 27 1 18 3.86 [0.41, 36.23]
Clinical Rehabilitation 5 27 66 224 0.54 [0.20, 1.50]
Disability and Rehabilitation 5 27 27 68 0.35 [0.12, 1.02]
IEEE 5 27 1 14 2.95 [0.31, 28.14]
Journal of Head Trauma Rehabilitation 5 27 10 29 0.43 [0.13, 1.49]
Journal of Neuro-Engineering and Rehabilitation 5 27 4 36 1.82 [0.44, 7.54]
Neurorehabilitation and Neural Repair 5 27 29 70 0.32 [0.11, 0.95]
PM & R 5 27 9 31 0.56 [0.16, 1.93]
1.1.9 Brain Injury
Archives of Physical Medicine and Rehabilitation 1 18 61 168 0.10 [0.01, 0.79]
Clinical Rehabilitation 1 18 66 224 0.14 [0.02, 1.08]
Disability and Rehabilitation 1 18 27 68 0.09 [0.01, 0.71]
IEEE 1 18 1 14 0.76 [0.04, 13.41]
Journal of Head Trauma Rehabilitation 1 18 10 29 0.11 [0.01, 0.97]
Journal of Neuro-Engineering and Rehabilitation 1 18 4 36 0.47 [0.05, 4.55]
Manual Therapy 1 18 5 27 0.26 [0.03, 2.43]
Neurorehabilitation and Neural Repair 1 18 29 70 0.08 [0.01, 0.66]
PM & R 1 18 9 31 0.14 [0.02, 1.25]
1.1.10 PM & R
Archives of Physical Medicine and Rehabilitation 9 31 61 168 0.72 [0.31, 1.66]
Brain Injury 9 31 1 18 6.95 [0.80, 60.35]
Clinical Rehabilitation 9 31 66 224 0.98 [0.43, 2.24]
Disability and Rehabilitation 9 31 27 68 0.62 [0.25, 1.55]
IEEE 9 31 1 14 5.32 [0.60, 46.90]
Journal of Head Trauma Rehabilitation 9 31 10 29 0.78 [0.26, 2.31]
Journal of Neuro-Engineering and Rehabilitation 9 31 4 36 3.27 [0.89, 11.97]
Manual Therapy 9 31 5 27 1.80 [0.52, 6.24]
Neurorehabilitation and Neural Repair 9 31 29 70 0.58 [0.23, 1.44]
0.01
0.1
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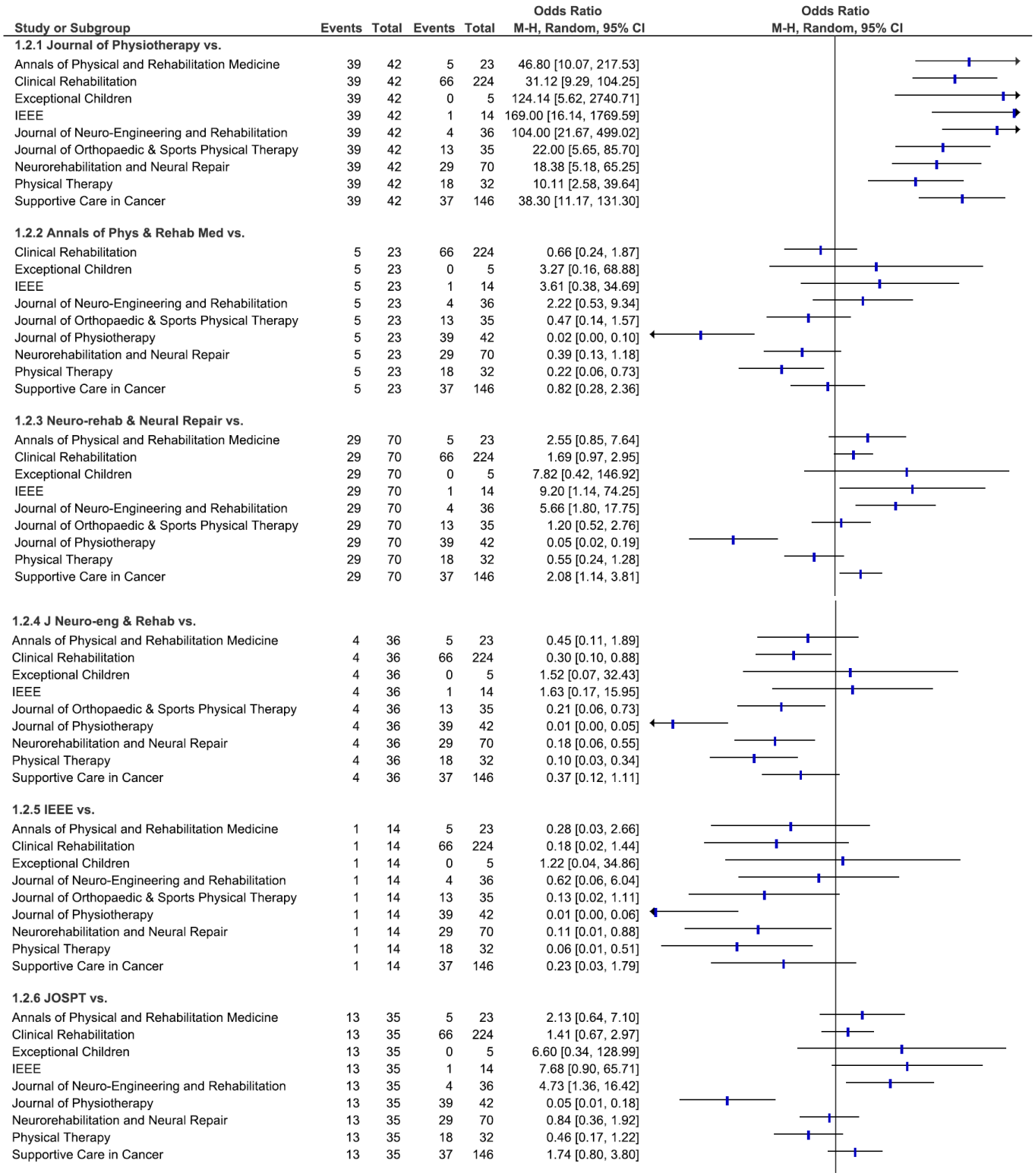
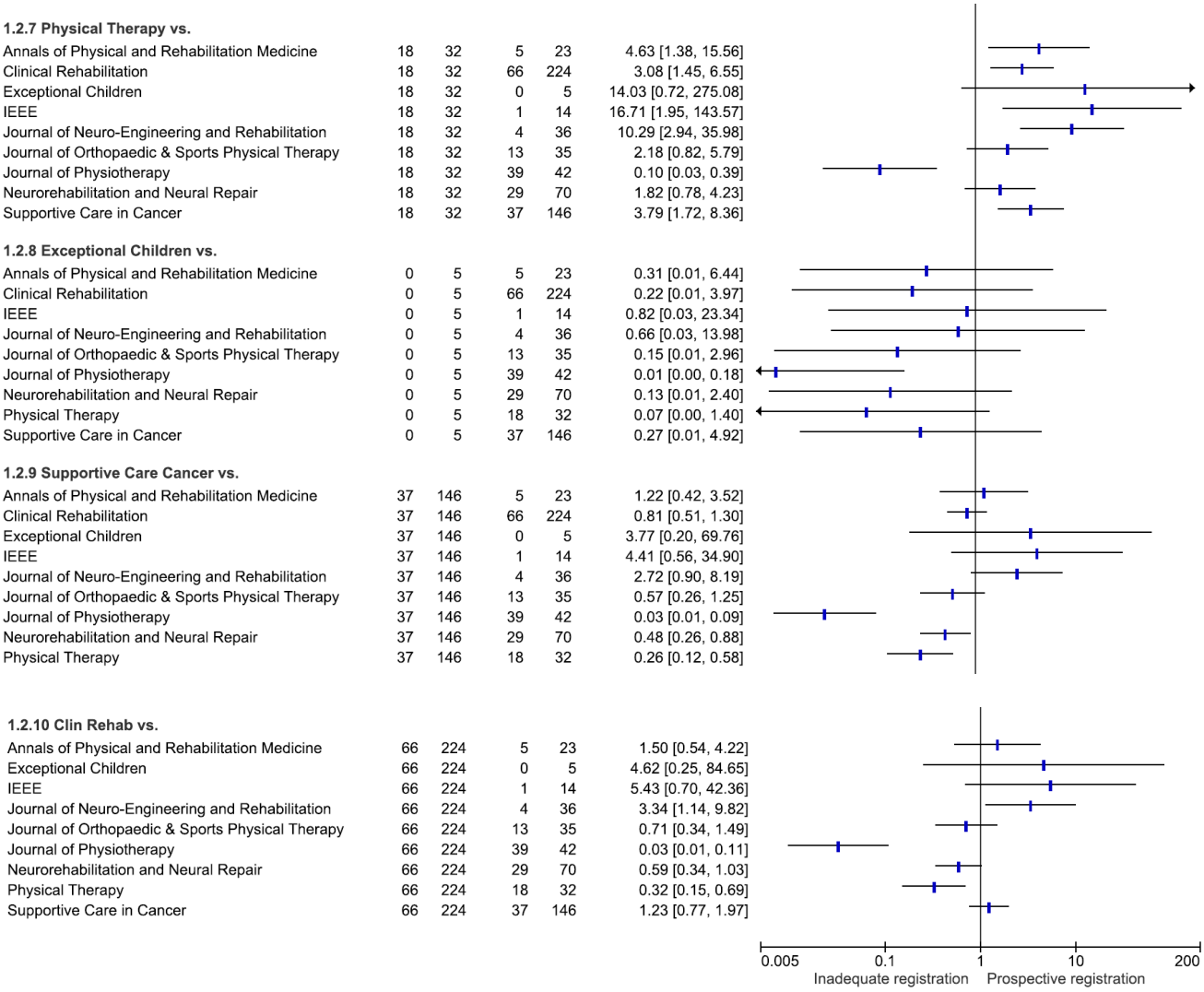
10
100
Inadequate registration
Prospective registration

Figure 5.7 Association between RCT Registration and Journals (ISI Journal Citation Reports 2018)




1.2.7 Physical Therapy vs.
Annals of Physical and Rehabilitation Medicine 18 32 5 23 4.63 [1.38, 15.56]
Clinical Rehabilitation 18 32 66 224 3.08 [1.45, 6.55]
Exceptional Children 18 32 0 5 14.03 [0.72, 275.08]
IEEE 18 32 1 14 16.71 [1.95, 143.57]
Journal of Neuro-Engineering and Rehabilitation 18 32 4 36 10.29 [2.94, 35.98]
Journal of Orthopaedic & Sports Physical Therapy 18 32 13 35 2.18 [0.82, 5.79]
Journal of Physiotherapy 18 32 39 42 0.10 [0.03, 0.39]
Neurorehabilitation and Neural Repair 18 32 29 70 1.82 [0.78, 4.23]
Supportive Care in Cancer 18 32 37 146 3.79 [1.72, 8.36]
1.2.8 Exceptional Children vs.
Annals of Physical and Rehabilitation Medicine 0 5 5 23 0.31 [0.01, 6.44]
Clinical Rehabilitation 0 5 66 224 0.22 [0.01, 3.97]
IEEE 0 5 1 14 0.82 [0.03, 23.34]
Journal of Neuro-Engineering and Rehabilitation 0 5 4 36 0.66 [0.03, 13.98]
Journal of Orthopaedic & Sports Physical Therapy 0 5 13 35 0.15 [0.01, 2.96]
Journal of Physiotherapy 0 5 39 42 0.01 [0.00, 0.18]
Neurorehabilitation and Neural Repair 0 5 29 70 0.13 [0.01, 2.40]
Physical Therapy 0 5 18 32 0.07 [0.00, 1.40]
Supportive Care in Cancer 0 5 37 146 0.27 [0.01, 4.92]
1.2.9 Supportive Care Cancer vs.
Annals of Physical and Rehabilitation Medicine 37 146 5 23 1.22 [0.42, 3.52]
Clinical Rehabilitation 37 146 66 224 0.81 [0.51, 1.30]
Exceptional Children 37 146 0 5 3.77 [0.20, 69.76]
IEEE 37 146 1 14 4.41 [0.56, 34.90]
Journal of Neuro-Engineering and Rehabilitation 37 146 4 36 2.72 [0.90, 8.19]
Journal of Orthopaedic & Sports Physical Therapy 37 146 13 35 0.57 [0.26, 1.25]
Journal of Physiotherapy 37 146 39 42 0.03 [0.01, 0.09]
Neurorehabilitation and Neural Repair 37 146 29 70 0.48 [0.26, 0.88]
Physical Therapy 37 146 18 32 0.26 [0.12, 0.58]
1.2.10 Clin Rehab vs.
Annals of Physical and Rehabilitation Medicine 66 224 5 23 1.50 [0.54, 4.22]
Exceptional Children 66 224 0 5 4.62 [0.25, 84.65]
IEEE 66 224 1 14 5.43 [0.70, 42.36]
Journal of Neuro-Engineering and Rehabilitation 66 224 4 36 3.34 [1.14, 9.82]
Journal of Orthopaedic & Sports Physical Therapy 66 224 13 35 0.71 [0.34, 1.49]
Journal of Physiotherapy 66 224 39 42 0.03 [0.01, 0.11]
Neurorehabilitation and Neural Repair 66 224 29 70 0.59 [0.34, 1.03]
Physical Therapy 66 224 18 32 0.32 [0.15, 0.69]
Supportive Care in Cancer 66 224 37 146 1.23 [0.77, 1.97]
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Inadequate registration
Prospective registration

Chapter 6

6 The Efficacy of Firefighter-specific Shoulder Exercises vs Standard Rehabilitation Exercises on Pain Intensity levels in Active Duty Firefighters with Subacromial Impingement Syndrome. A Protocol for a randomized controlled trial

Trial Summary

What is the principal research question? In active duty firefighters with shoulder pain, does a firefighter-specific rehabilitation exercise program decrease shoulder pain intensity at 3-, 6- and 12-months compared to a standard rehabilitation exercise program.

PICOT Format

Population: Active duty firefighters with subacromial impingement syndrome.

Intervention: Firefighter-specific shoulder exercise program.

Comparator: standard rehabilitation exercises.

Outcome: Shoulder pain Intensity levels

Timeline: 1-year follow-up

Outcome: Shoulder pain intensity levels at 3-, 6- and 12-months will be our primary outcome and will be assessed using the Visual Analog Scale (VAS 0 – 10) – 0 - "no pain" and 10 - "worst possible pain". Firefighters will be instructed to indicate on the scale their pain level. Secondary outcomes that will be collected and examined will consist of the global assessment of change (using Global Rating of Change) and function (using Patient-Specific Functional Scale).

Timeline: The maximum follow-up will be 1 year. The target of this trial will be to demonstrate superiority of the firefighter-specific exercises versus standard rehabilitation exercises on pain reduction at 3-, 6- and 12-month follow-ups.

Study Design: This study will be a single center (fire-station), investigator-blinded, randomized, 12-month, parallel-group, superiority study

Trial registration: ClinicalTrials.gov (intended)

6.1 Introduction

6.1.1 Impact of Subacromial Impingement Syndrome

Evidence indicates that approximately 1 out of 50 adults seek medical care for new onset of subacromial impingement syndrome every year.[1] Subacromial impingement syndrome is considered one of the most common underlying causes of shoulder pain – pain in the upper arm close to the deltoid muscle insertion, aggravated by overhead activity and worsened at night.[2-3] Shoulder pain is regarded as the third most limiting musculoskeletal disorder which causes declines in quality of life, capacity to work and/or do household tasks.[4] Shoulder pain has been reported to pose a major economic burden of $7 billion to society as a consequence of direct health-care costs.[5]

6.1.2 Prevalence, Incidence, Age, Sex/Gender in Subacromial Impingement Syndrome

The monthly prevalence of subacromial impingement syndrome ranges between 18% to 31% in the general population, whereas the lifetime prevalence ranges between 6.7% to 66.7% based on the setting (higher in primary care) and age (higher in elderly) of the study population.[2-3,6] The 20-year incidence of subacromial impingement syndrome in women (10 to 90+ years) was higher than that in men [women 90 per 100,000 person-years (95% CI 88 to 91)] vs [men 83 per 100,000 (95% CI 82 to 85)].[7] Similarly, age-adjusted incidence was higher for women [83 per 100,000 person-years (95% CI 82 to 84)] than men [78 per 100,000 person-years (95% CI 77 to 80)].[7] Peak incidence of 198 per 100,000 person-years (95% CI 192 to 204) was reported at 55 to 59 years of age, with no significant difference between men and women.[7] Men aged between 25 – 34.9 years (40 to 63 per 100,000 person-years) were found to have a significantly higher incidence than women 25 – 34.9 years (35 to 55 per 100,000 person-years).[7] However, women aged between 40 – 54.9 years (~100 to 204 per 100,000 person-years) had a significantly higher incidence than men 40 – 54.9 years (~90 to 163 per 100,000 person-years).[7] After 65 years the incidence declined, and no statistically significant difference in incidence was found between the men (170 to 50 per 100,000 person-years) and women (166 to 40 per 100,000 person-years) between

65 – 90+ years of age.[7] Biological (sex) differences in anatomy (smaller stature), less muscle strength, hormonal variation in estrogens and thyroxin – which may influence collagen and matrix metabolism at a structural and biochemical level – neuromuscular control – and musculoskeletal flexibility, may place women more at risk.[8] Similarly, gender differences in access to resources, gender biases in referral to specialist or surgery can result in gendered health services.[8] However, the male predominance in high-risk occupations like construction, factory work and first responders place men at higher risk of traumatic injuries.[7-8] One out of every two individuals with shoulder pain are successfully treated and completely recover in six months.[2,9] Nevertheless, the remaining 50% continue to experience and report pain and reduced functional output up to 2 years after the onset of the condition.[2,9]

6.1.3 Firefighter-specific exercises for shoulder pain and the need for a trial?

Firefighting is a physiologically demanding and high-risk profession that places tremendous stress on the musculoskeletal system increasing the likelihood of sustaining work-related injuries.[10-12] Our systematic review and meta-analysis of studies of prevalence of musculoskeletal disorders (MSDs) among Canadian firefighters indicated high point-prevalence estimates of neck, shoulder, arm/elbow/hand, back, and knee pain among both male and female firefighters.[13] In particular, the point-prevalence of shoulder pain was reported at 23% among Canadian firefighters (29% in males; 24% in females).[13] This evidence synthesis identified and compared the prevalence of MSDs among various populations (firefighter vs professional athletes vs military personnel) and put an emphasis on the importance of developing data-driven firefighter-specific rehabilitation programs.[13] Our latest systematic review and meta-analysis of RCTs indicated that there were no clinically meaningful differences in outcomes of pain or function between surgery plus physiotherapy (exercises) vs physiotherapy (exercises) alone, at any 3-, 6-months, 1-, 2-, 5- or ≥ 10-year follow ups in patients with shoulder impingement syndrome (pain).[14]
Empirical evidence and expert recommendations state that physiotherapy rehabilitation exercises be considered as the first and main component of intervention programs for

treatment of individuals with shoulder pain.[3-4,14] Furthermore, the American Academy of Orthopedic Surgeons (AAOS) guidelines on management of shoulder pain (subacromial impingement syndrome) includes a series of standard rotator cuff muscle stretching and strengthening exercises that aim to reduce pain and restore normal glenohumeral function.[15]

Empirical evidence – observational studies (among firefighters) and RCTs conducted in active-duty military personnel – indicate that the design, development and implementation of occupation-specific rehabilitation exercises (that incorporate postural/scapulothoracic control, weight-bearing, neuromuscular re-education, proprioception/motor control and functional exercises involving the upper extremities) are effective in improving outcomes by clinically important amounts in individuals with shoulder pain when compared to standard rehabilitation exercises.[17-32] What is currently unknown, is whether the design, development and/or modification of previously displayed effective occupation-specific (firefighting) exercises in consultation with physiotherapists, orthopedic surgeons, active-duty firefighters and researchers with a keen understanding and knowledge of firefighting occupational requirements and specific biomechanical demands on the musculoskeletal system would be effective in improving clinical outcomes in active duty Canadian firefighters with shoulder pain when compared to standard rehabilitation exercises.

To address this, we aimed to design an RCT to assess the effectiveness of occupation-specific rehabilitation exercises when compared to standard rehabilitation exercises in active duty Canadian firefighters with subacromial impingement syndrome (shoulder pain).

6.2 Objectives of the Study

6.2.1 Primary Objective

The first objective of this study is to assess if firefighter-specific rehabilitation exercises when compared to standard rehabilitation exercises, can reduce shoulder pain intensity

levels in active duty firefighters with subacromial impingement syndrome (shoulder pain), at 3-, 6- and 12-month follow ups.

6.2.2 Secondary Objectives

1. To assess if firefighter-specific rehabilitation exercises when compared to standard rehabilitation exercises, can establish overall improvement of the condition in active duty firefighters with subacromial impingement syndrome, at 3-, 6- and 12-month follow ups.
2. To assess if firefighter-specific rehabilitation exercises when compared to standard rehabilitation exercises, can improve function in active duty firefighters with subacromial impingement syndrome, at 3-, 6- and 12-month follow ups.

6.3 Methods

6.3.1 Study design

This study will be a single center (fire-station), investigator-blinded, randomized, 12-month, parallel-group, superiority study. The study flow is presented in Figure 6.2.

6.3.2 Setting / Recruitment

This study will be conducted in a single center (Hamilton downtown fire-station) in Hamilton, Ontario, Canada. Advertisements will be placed at regular intervals in local and regional newspapers and on (firefighter-specific) social media platforms. This will be accompanied by regular posting of advertisements through professional associations including the Hamilton and Burlington Professional Firefighters Associations. Firefighters with shoulder pain will be contacted to schedule an initial visit at Hamilton downtown fire-station with a research coordinator. All participants who meet the eligibility criteria and provide an informed written signed consent, will be offered an opportunity to enroll in the study. Participants with shoulder pain will then complete demographic data such as age,

gender/sex, email address, height, weight, years of service, rank, educational level and a set of outcome measures.

6.3.3 Eligibility Criteria

Our sample will include active duty firefighters (males and females) between 18 and 65 years old with ONLY ONE positive finding from the following categories:

1. Firefighters with report of subacromial impingement syndrome / shoulder pain – pain in the upper arm close to the deltoid muscle insertion – which is aggravated by overhead activity and becomes worse at night (lying on the affected side),[2,16]
2. Presence of a painful arch – pain occurring between 60° and 120° of passive glenohumeral flexion / abduction (positive likelihood ration of 3.7, 95% CI: 1.9 to 7.0; negative likelihood ration of 0.36, CI: 0.23 to 0.54),[2,16]
3. Positive Neer's or Kennedy-Hawkins Test, [2,16]
4. Pain on resisted external (lateral) rotation, abduction or Empty Can Test,[2,16]
5. Do not use strong pain medications. Any pain medication that requires a prescription from a medical doctor is considered a strong pain medication.[16]
6. Individuals able to speak and write in English,
7. Have access to electronic devices (e.g. computer) and internet.

Participants (firefighters) will be excluded if they have:

1. shoulder related surgeries, dislocations, fractures, capsulitis, a full thickness rotator cuff tears identified any imagery, in the last 12 months,[2,16]
2. displayed any signs or symptoms of a systematic or neurological diseases/pathology,[2,16]
3. a confirmation of other diagnosis by imagery or declared unable to attend the intervention sessions.[2,16]

6.3.4 Interventions

Standard Rehabilitation Exercises (SRE)

The SRE was developed through a round-table discussion involving physiotherapists, researchers and orthopedic surgeons from the Hand and Upper Limb Centre (HULC) clinical research lab in June 2019 based on the rotator cuff exercises outlined in the American Academy of Orthopedic Surgeons (AAOS) guidelines on management of rotator cuff problems.[15] SRE will involve 25 – 45 min of exercises, three times a week for 12-weeks.

A total of 5 stretching and 4 strengthening rotator cuff exercises were recommended. The five 5 stretching exercises will include

1) pendulum: (2 sets of 10 repetitions, performed 5 to 6 times per week)

2) crossover arm stretch: (4 sets of 30-second hold per side, performed 5 to 6 times per week)

3) passive internal rotation: (4 sets of 30-second hold per side, performed 5 to 6 times per week)

4) passive external rotation: (4 sets of 30-second hold per side, performed 5 to 6 times per week)

5) sleeper stretches: (4 sets of 30-second hold per side, performed 7 times per week)

The four strengthening exercises will include:

1) standing row: 3 sets of 8 repetitions, performed 3 times per week)

2) external rotation with arm abducted 90°: (3 sets of 8 repetitions, performed 3 times per week)

3) internal rotation: (3 sets of 8 repetitions, performed 3 times per week)

4) external rotation: (3 sets of 8 repetitions, performed 3 times per week)

(Appendix E).[15]

Firefighter-specific Rehabilitation Exercises (Fire-RE)

Fire-RE was developed in consultation with physiotherapists, orthopedic surgeons, active-duty firefighters, researchers and through clinical experience and literature review. The Fire-RE will include 25–45 minutes of exercise per session, three times a week for 12-weeks. The exercises, parameters, and their progressions are developed in order to optimize strength, neuromuscular control and motor (re)learning, in keeping with motor learning principles as well as to encourage and simulate actual firefighting tasks.[33-34]

The Fire-RE will include 9 exercise stations, each one incorporating several exercises of increasing difficulty. Firefighters will begin with the first exercise in each of the 9 stations (least difficult exercise first). The exercises performed will be assessed by a physiotherapist (not involved in the conduct of the RCT, hence unaware of RCT intervention groups) on weekly basis. Firefighters will be allowed to perform the more challenging exercises per each station if 1) proper movement of exercises is performed, 2) the exercise is no longer a challenge, 3) shoulder pain levels (VAS 0 – 10) is 3/10 or less and 4) in absence of compensatory movements. The exercises will be altered or paused, if firefighters' shoulder pain is greater than 3/10. It is possible for the firefighters to not complete all exercises or 9 stations within one session; however, if firefighters continued to challenge themselves properly (VAS 3/10 or less), they would be considered following the intention of the Fire-RE program. The goal is for the firefighters to perform all the exercises per stations and reach the 9th exercise station by the end of the 12th week. The Fire-RE will provide a platform and allow for the individualized progressions of a series of exercises with weekly physiotherapist supervision.

The stations will include

1. postural and scapulothoracic control (station 1 – four exercises);
   Exercise 1: Maintain the position for 10 seconds (1 set).
   Exercise 2: Perform 1 set of 15 repetitions.
   Exercise 3: Maintain the position for 10-15 seconds (1 set).
   Exercise 4: Perform (external rotation) 1 set of 15 repetition (1-10 Lbs. dumbbell)

2. weight-bearing exercises (station 2 – five exercises);
   Exercise 1: Maintain the position for 30 seconds (3 set).
   Exercise 2: Maintain the position for 30 seconds (3 set).
   Exercise 3: Maintain the position for 30 seconds (3 set).
   Exercise 4: Maintain the position for 30 seconds (3 set).
   Exercise 5: Maintain the position for 30 seconds (3 set).

3. neuromuscular re-education of rotator cuff complex (stations 3 – five exercises);
   Exercise 1: Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).
   Exercise 2: Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).
   Exercise 3: Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).
   Exercise 4: Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets)
   Exercise 5: Perform 2 sets of 15 repetitions, slow return, on each side

4. neuromuscular re-education of the serratus anterior (station 4 – three exercises);
   Exercise 1: Perform 2 sets of 15 repetitions
   Exercise 2: Perform 2 sets of 15 repetitions.
   Exercise 3: Perform 2 sets of 15 repetitions

5. neuromuscular re-education of the trapezius (station 5 – two exercises);
   Exercise 1: Pull backs: close to the body. Perform 2 sets of 15 repetitions
   Exercise 2: Pull backs: the arms at 90 degrees Perform 2 sets of 15 repetitions.

6. proprioception and motor control exercises (station 6 – five exercises);
   Exercise 1: Perform 3 sets of 20 repetitions (small circles)
   Exercise 2: Perform 3 sets of 20 repetitions (figure 8).
   Exercise 3: Perform 3 sets of 20 repetitions (small circles).
   Exercise 4: Perform 3 sets of 20 repetitions (small circles).
   Exercise 5: Perform 3 sets of 20 repetitions (small circles).

7. firefighting Push activities (station 7 – three exercises);
   Exercise 1: Ladder raise and lower (3 sets 12-20 repetitions)
   Exercise 2: Medicine ball throw (squat) (3 sets 12-20 repetitions)
   Exercise 3: Sled push with gym mat (3 sets for 10 – 30 meters)

8. firefighting Pull activities (station 8 – three exercises);
   Exercise 1: Charged attack hose pull (3 sets 15-60 seconds)
   Exercise 2: Battle hose (3 sets 15-60 seconds)
   Exercise 3: Kneeling lateral cable pull (3 sets 12-20 repetitions)

9. firefighting Drag activities (station 9 – two exercises);
   Exercise 1: Tire Drag (3 sets for 10 – 30 meters)
   Exercise 2: Bear crawl and drag (3 sets for 5 – 20 meters – 5-20 lbs wight)

(Appendix F).

6.3.5 Outcomes

Shoulder pain intensity levels at 3-, 6- and 12-months will be our primary outcome and will be examined using Visual Analog Scale (VAS).[35] The VAS is a bidirectional 11 point (0 – 10) responsiveness scale; 0 - "no pain" and 10 - "worst possible pain". Firefighters will be asked to indicate their pain level at follow ups.[35] Planned secondary outcomes will include of the Global Rating of Change,[36] and Patient-Specific Function Scale.[37] While multiple domains can be assessed in shoulder condition trials, BMJ Rapid Recommendations expert group has identified pain, function and global assessment as the 3 core variables/outcomes required for inclusions in shoulder-related studies.[38]

6.3.6 Participant Timeline

Outcome measures will be collected at baseline, at 3-months, 6-months and 12-months.

6.3.7 Sample Size Estimation

Response to treatment was based on BMJ Rapid Recommendations expert group.[38] According to these criteria, a response has occurred if the patients experience an absolute reduction of ≥ 1.5 points on shoulder pain intensity (0 – 10 cm VAS). If we consider 15% as a clinical important margin on VAS pain scale, 80% power at 5% significance level and assuming a scenario of 25% loss of follow-up a total sample size of 216 patients will be needed (Figure 6.1).

6.3.8 Allocation

We will use block randomization with blocks of randomly selected sizes through a central web-based randomization system in a 1:1 ratio for the two groups/arms (SRE and Fire-RE). Central randomization will be performed using a central randomization web-based program. The randomization process and the web-based system will be accessed and initiated by the trial coordinator who will enter the participants' (firefighters') information

and confirm eligibility criteria. Study participants will be registered in the trial only once, subsequently a random allocation will be generated by central randomization. In this manner allocation will be concealed (minimizing selection bias) and we will control for any confounding factors during randomization and to eliminate "selection bias".[39-40]

6.3.9 Blinding

Participants will be aware that two procedures (SRE vs Fire-RE interventions) are being compared. However, to minimize performance bias,[41] they will be unaware of the fact that one treatment is a control (SRE is the control), as neither the consent forms nor the verbal explanations referred to the SRE intervention as a control treatment. Thus, participants could reasonably expect an improvement regardless of treatment received. Furthermore, a physiotherapist – not involved in the design, conduct or analysis of RCT data – will provide instructions to recruited participants (firefighters) on how to properly perform the rehabilitation exercises as well as assess whether proper movement of exercises are performed to allow participants to progress to more challenging exercises in the Fire-RE group. Participants will receive additional virtual ongoing support and guidance regarding the intervention by an independent physiotherapist (not involved in the design, conduct or analysis of RCT data) if needed. To protect against detection bias,[41] the RCT outcomes will be collected online using an electronic database (REDCap). Automatic email reminders will be sent to the firefighters one week prior to their follow up periods. They will be emailed the website, a unique username, password and instructions for completing the online questionnaires. Contamination will be minimized through monitoring the treatment logs completed at each session. Furthermore, participants will be instructed to note down any adverse events experienced and share that information with the trial coordinator.

6.4 Data Collection

6.4.1 Primary outcome

Shoulder pain will be the primary outcome measure at 3-, 6- and 12-months, and it will be quantified using a 10cm VAS by asking "on this line, where would you rate your pain, using the last 7 days as a timeframe".[35] The VAS is a bidirectional 10 cm responsiveness scale with two anchors at either end of the scale; 0 - "no pain" and 10 - "worst possible pain".[35] Participants will be asked to indicate their shoulder pain level.[35] The VAS scale is a reliable, valid and responsive tool in assessing shoulder pain.[35,38]

6.4.2 Secondary Outcomes

Global rating of change (GRoC) is considered as a patient-reported outcome that will be administered at 3-, 6- and 12-months follow-up to assess the overall improvement or deterioration of condition (subacromial impingement syndrome).[36] Participants will be asked to rate their overall change in shoulder pain on a six- point Likert scale (completely recovered, much improved, improved, no change, worse, much worse).[36] GRoC has been used to evaluate outcomes in clinical trials of shoulder pain.[36]

Patient-Specific Functional Scale (PSFS) was developed by Stratford and colleagues and it assesses functional change mainly individuals with musculoskeletal conditions.[37] In administering the PSFS, the individual is required to identify up to 5 important activities that the person is unable to carry out or have difficulty with as a result of their current condition.[37] Then the individual is asked to provide a numerical (0 – 10) rating for each of the identified activities on an 11-point scale (0 unable to perform activity; 10 able to perform activity at preinjury level).[37] At follow-up intervals, the patient is presented with the previously identified limiting activities and their corresponding ratings (0 – 10) and is asked to re-rate each activity based on his/her current perception of function.[37] The PSFS scale is a reliable, valid and responsive tool to assessing function in patients with shoulder pain/disorders.[36,38]

6.5 Data Management

Data will entered/downloaded into the database by the study personnel. We will have 2 full-time clinical research coordinators and 1 research assistants with research-related duties that will be involved in preparing all study forms and materials, complete and maintain ethics approvals, study databases and management. A trial coordinator will be primarily responsible for participant recruitment and maintaining consent documentation and updating the trial policies and procedures manual (if needed), monitor staff compliance with university/hospital research policies and certifications manual and updating participants in study processes and outcomes and support the team in the conduct of the research.

6.6 Statistical Methods

6.6.1 Statistical Analysis

Study participants will be analyzed according to the intervention group to which they were randomized (SRE or Fire-RE), regardless of the treatment that they will actually receive – to ensure that an intention-to-treat analysis is followed. Descriptive statistics will be used to summarize firefighters' baseline characteristics. For the primary and secondary outcomes, Generalized Linear Modeling (GLM) will test the between group differences over time, with age and gender as covariates. The magnitude of the treatments will be quantified as effect sizes for the whole group and by gender. Clinically important differences along with 95% confidence intervals will also be quantified and reported for between- and within-group differences. In case of missing data, we will use Multiple Imputation (MI) to resolve any missing data issues. We will also calculate and report the Number-Needed-to-Treat (NNT).

6.7 Data Monitoring

The data monitoring ethics committee (DMEC) will be independent of the trial and will be responsible with monitoring ethical, safety and data integrity. The DMEC will be

assembled by 1 orthopedic surgeon, 1 physical therapist, 1 epidemiologist and 1 senior statistician. All adverse events occurring after entry into the study and until end of study will be recorded.

6.8 Ethics and Dissemination

6.8.1 Research Ethics Approval

The protocol document will be submitted, reviewed and approved by the Western's institutional research ethical board (REB) to ensure compliance with applicable research and human subjects' regulations.

6.8.2 Informed Consent Process

All participants (firefighters) will provide written informed consent to participate in the RCT.

6.8.3 Confidentiality

Data collection will adhere to Health Insurance Portability and Accountability Act (HIPAA) guidelines.

6.8.4 Declaration of Interests

The authors declare no conflict(s) of interest

6.8.5 Access to Data

Data will be stored at Hand and Upper Limb Centre (HULC) lab which is very secure place and only authorized personnel have access to that area. Data can be made available upon request.

6.8.6 Ancillary and Post-trial Care

No specific post-trial care will be required.

6.8.7 Dissemination and Policy

The study results will be presented at the *Canadian Institute for Military and Veteran Health Research* (*CIMVHR*). Data obtained from this trial will be published in open access peer review journal.

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Figure 6-1 Sample Size calculation

Outcome: *Pain levels (0 – 10) Visual Analogue Scale.*

Alpha α error = 0.05

Beta β error = 0.2

N=size per group;

z_x= the z-score/standard normal deviate for a two-sided x;

δ = a clinically acceptable margin;

S^2= Pooled standard deviation of both comparison groups;

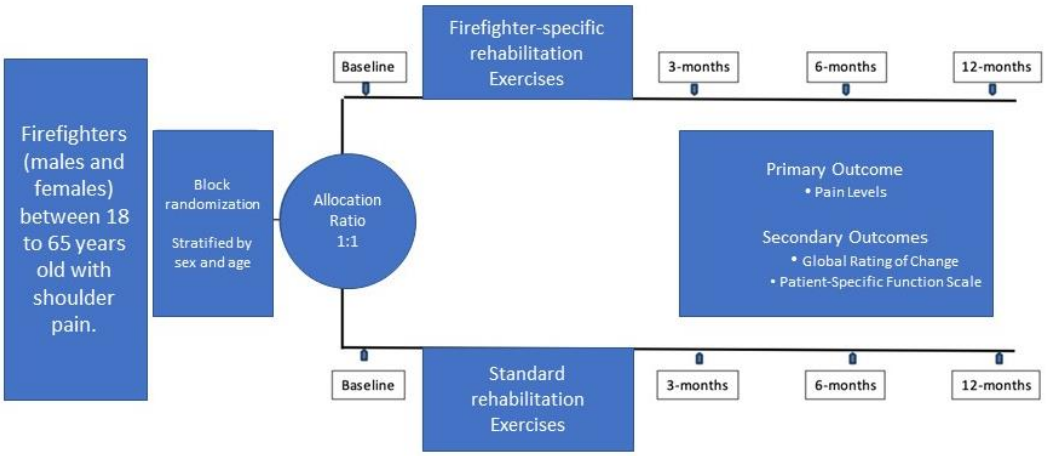
$$N = 2 \times \left(\frac{z_{1-\frac{\alpha}{2}} + Z_{1-\beta}}{\delta} \right)^2 \times s^2$$

N = 2 x $(1.96 + 0.842/1.5)^2$ x 3.5^2 = 86 per group.

Accounting for 25% drop out → 1.25 x 86 = 108 per group

Total = 2 x 108 = **<u>216</u>**

Figure 6-2 Study Flow diagram



Chapter 7

7 General discussion and future directions

7.1 Overview of this dissertation

The purpose of this thesis was to first synthesize and summarize the clinical evidence (RCTs) on the effectiveness of various surgical and conservative treatment options for rotator cuff disease – subacromial impingement syndrome and rotator cuff tears. In Chapter 2, both arthroscopic and mini-open techniques to rotator cuff repairs with post-operative rehabilitation exercises were effective in terms of improving clinical outcomes of function, pain and shoulder range of motion in patients with rotator cuff tears.[1] However, the difference in outcomes (function, pain, range of motion) were too small to be clinically important between the two surgical techniques.[1] In chapter 3, the effects of surgery plus physiotherapy (exercises) vs physiotherapy (exercises) alone on pain and function were too small to be clinically important at 3-, 6-months, 1-, 2-, 5- and ≥ 10-years follow up.[3] Further highlighting that physiotherapy exercises be considered as the first treatment approach in patients with subacromial impingement syndrome (shoulder pain).[3] In chapter 4, our systematic review and meta-analysis of prevalence of MSDs found high point-prevalence estimates of neck, shoulder, arm/elbow/hand, back, and knee pain among both male and female Canadian firefighters.[4] Specifically, the prevalence of self-reported shoulder pain was 23% among Canadian firefighters (males 29% and females 24%).[4] This review emphasized the importance of developing data-driven occupation-specific rehabilitation exercise programs for Canadian firefighters.[4] In chapter 5, we found that fifteen years after the introduction of standards for RCT registration, only one-third of the RCTs in the field of rehabilitation therapy were prospectively registered between years 2015 to 2020. The remaining two-thirds were inadequately registered (retrospective or no registration). Subsequently, the emergence of empirical evidence and publication of observational (cohort) studies in firefighters and RCTs in active-duty military personnel – indicating the clinical effectiveness of occupation-specific rehabilitation exercises – further emphasized the rationale for the design and conduct of an RCT to assess the effectiveness of firefighter-

specific rehabilitation exercises among Canadian firefighter with shoulder pain (chapter 6).[5-21]

The glenohumeral joint and shoulder function is essential for many of the physically demanding tasks that firefighters perform on the fire ground such as lifting/carrying heavy tools or equipment, dragging hoses, raising ladders, forcible entry, ventilation, overhaul of ceilings and walls and rescuing victims.[4] Preservation of active duty is critical to the mission of fire service – serving of communities. Research findings that aim to enhance firefighters' physical health play a pivotal role in minimizing the cumulative effects of injuries that frequently result in work-loss or mark the end of a firefighter's career.[4] Therefore, it is critical to assess the efficiency and effectiveness of firefighter health care services for the rehabilitation of shoulder injuries. To our knowledge, our RCT will be the first RCT comparing firefighter-specific rehabilitation exercises with a standard exercises program among Canadian firefighters for the management subacromial impingement syndrome (shoulder pain). In addition, the possible set-up of a rehabilitation center nested within a fire-station with appropriate equipment, remote and weekly physiotherapist supervision, may provide an easy, relatively inexpensive and resource effective option to improve firefighters' physical health. This approach could potentially offer a morally favorable option for firefighters by facilitating active engagement in their own rehabilitation while improving and encouraging unit (firetruck) cohesiveness, ultimately improving their motivation and adherence to treatment.

7.2 Potential clinical and research implications

We continue to suggest that the difference in outcome of pain, function and range of motion between arthroscopic vs mini-open rotator cuff repair techniques are too small to be clinically important in patients with rotator cuff tears.[1] Future well-designed large-scale high quality RCTs assessing the difference in outcomes between the two surgical approaches are needed to ensure that the true (no difference) effect lies close to that of the estimate of the effect.[1] Regarding subacromial impingement syndrome, we suggest exercise as the first and main component of physiotherapy intervention programs for

treatment of patients with shoulder impingement syndrome (shoulder pain) and similarly emphasize the need for high quality evidence.[3] With the conduct of our newly developed RCT, there is the potential for firefighter-specific rehabilitation exercises to have superior and clinically important effects on pain and function in active duty Canadian firefighters than standard rehabilitation exercises. The firefighter-specific exercises may have the potential to increase access to physiotherapy care while decreasing wait-time for treatment among active-duty firefighters with shoulder pain. Establishing clinically relevant effects of firefighter-specific rehabilitation exercises will warrant further research incorporating multiple fire stations across Ontario and ultimately across Canada and hence facilitating the uptake and adoption of our firefighter-specific rehabilitation exercises.

7.3 Limitations

In this dissertation we conducted 4 systematic reviews and meta-analyses and designed and developed 1 protocol for a superiority trial to provide more effective firefighter-specific rehabilitation exercises for Canadian firefighters. Despite our review findings and potential useful RCT results, our work has some limitations that need to be considered when interpreting our findings. We only synthesized low to moderate evidence. High quality evidence may yield different outcomes. Furthermore, the use of a half standard deviation unit indicative of clinical importance was a very conservative approach. However, we believe that even with a lower threshold, the majority of outcome would have still been clinically unimportant.

7.4 Reference

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21. Kerrigan, D, and Moss, J. (2016). Firefighter Functional Fitness: The Essential Guide for Opitmal Firefighter Performance & Longevity. Firefighter Toolbox LLC. ISBN 9780990844242.

Appendices

Appendix A: Optimal Information Size (OIS)

Alpha α error = 0.05;

Beta β error = 0.2;

N=size per group;

z_x= the z-score/standard normal deviate for a two-sided x;

δ = a clinically acceptable margin;

S^2= Polled standard deviation of both comparison groups;

$$N = 2 \times \left(\frac{z_{1-\frac{\alpha}{2}} + Z_{1-\beta}}{\delta} \right)^2 \times s^2$$

N = 2 x $(1.96 + 0.842/4.9)^2$ x 24.0^2 = 377 per group.

Total = 2 x 377 = **754**

Appendix B: Optimal Information Size (OIS) for outcomes Pain and Function.

Outcome: *Pain levels (0 – 10) Visual Analogue Scale.*

Alpha α error = 0.05;

Beta β error = 0.2;

N=size per group;

z_x= the z-score/standard normal deviate for a two-sided x;

δ = a clinically acceptable margin;

S^2= Pooled standard deviation of both comparison groups;

$$N = 2 \times \left(\frac{z_{1-\frac{\alpha}{2}} + z_{1-\beta}}{\delta} \right)^2 \times s^2$$

N = 2 x $(1.96 + 0.842/1.5)^2$ x 3.5^2 = 86 per group.

Total = 2 x 86 = **172**

Outcome: *Function (0 – 100) Constant score.*

Alpha α error = 0.05;

Beta β error = 0.2;

N=size per group;

z_x= the z-score/standard normal deviate for a two-sided x;

δ = a clinically acceptable margin;

S^2= Pooled standard deviation of both comparison groups;

$$N = 2 \times \left(\frac{z_{1-\frac{\alpha}{2}} + z_{1-\beta}}{\delta} \right)^2 \times s^2$$

N = 2 x $(1.96 + 0.842/10.0)^2$ x 31.5^2 = 154 per group.

Total = 2 x 154 = **308**

Appendix C: List of Excluded Studies

1	Harrison, S. L., Laver, K. E., Ninnis, K., Rowett, C., Lannin, N. A., & Crotty, M. (2019). Effectiveness of external cues to facilitate task performance in people with neurological disorders: a systematic review and meta-analysis. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2018.1448465	Ineligible study design (systematic review and meta-analysis)
2	Niemeier, J. P., Kreutzer, J. S., Marwitz, J. H., & Sima, A. P. (2019). A Randomized Controlled Pilot Study of a Manualized Intervention for Caregivers of Patients With Traumatic Brain Injury in Inpatient Rehabilitation. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2018.07.422	Ineligible study design (pilot RCT)
3	Gyllensten, H., Koinberg, I., Carlström, E., Olsson, L. E., & Hansson Olofsson, E. (2019). Economic evaluation of a person-centred care intervention in head and neck oncology: results from a randomized controlled trial. Supportive Care in Cancer. https://doi.org/10.1007/s00520-018-4436-2	Ineligible study design (economic evaluation)
4	Rosenfeldt, A. B., Linder, S. M., Davidson, S., Clark, C., Zimmerman, N. M., Lee, J. J., & Alberts, J. L. (2019). Combined Aerobic Exercise and Task Practice Improve Health-Related Quality of Life Poststroke: A Preliminary Analysis. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2018.11.011	Ineligible study design (secondary data analysis)
5	Casey, B., Coote, S., Hayes, S., & Gallagher, S. (2018). Changing Physical Activity Behavior in People With Multiple Sclerosis: A Systematic Review and Meta-Analysis. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2017.12.013	Ineligible study design (systematic review and meta-analysis)
6	Seo, H. G., Yi, Y. G., Choi, Y. A., Leigh, J. ho, Yi, Y., Kim, K., & Bang, M. S. (2019). Oropharyngeal Dysphagia in Adults With Dyskinetic Cerebral Palsy and Cervical Dystonia: A Preliminary Study. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2018.05.024	Ineligible study design (observational cross-sectional study)
7	Campos FV; Neves LM; Da Silva VZ; Cipriano GF; Chiappa GR; Cahalin L; Arena R; Cipriano GHemodynamic Effects Induced by Transcutaneous Electrical Nerve Stimulation in Apparently Healthy Individuals: A Systematic Review With Meta-Analysis.	Ineligible study design (systematic review and meta-analysis)
8	Bianchini, C., Consentino, C., Paci, M., & Baccini, M. (2020). Open Access Physical Therapy Journals: Do Predatory Journals Publish Lower-Quality Randomized Controlled Trials? Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2019.12.012	Ineligible study design (review paper)
9	Houlihan, B. V., Everhart-Skeels, S., Gutnick, D., Pernigotti, D., Zazula, J., Brody, M., … Jette, A. (2016). Empowering Adults With Chronic Spinal Cord Injury to Prevent Secondary Conditions. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2016.04.005	Ineligible study design (qualitative pilot study)
10	Leite, V. F., Daud Amadera, J. E., & Buehler, A. M. (2018). Viscosupplementation for Hip Osteoarthritis: A Systematic Review and Meta-Analysis of the Efficacy on Pain and Disability,	Ineligible study design (systematic review and meta-

	and the Occurrence of Adverse Events. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2017.07.010	analysis)
11	Rethorn, Z. D., & Pettitt, C. D. (2019). What Is the Effect of Health Coaching Delivered by Physical Therapists? A Systematic Review of Randomized Controlled Trials. Physical Therapy. https://doi.org/10.1093/ptj/pzz098	Ineligible study design (systematic review)
12	Bouzas, S., Martínez-Lemos, R. I., & Ayán, C. (2019). Effects of exercise on the physical fitness level of adults with intellectual disability: a systematic review. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2018.1491646	Ineligible study design (systematic review)
13	Dupuis, L. L., Roscoe, J. A., Olver, I., Aapro, M., & Molassiotis, A. (2017). 2016 updated MASCC/ESMO consensus recommendations: Anticipatory nausea and vomiting in children and adults receiving chemotherapy. Supportive Care in Cancer. https://doi.org/10.1007/s00520-016-3330-z	Ineligible study design (systematic review)
14	Brown, D., Watson, M., & Schloss, J. (2019). Pharmacological evidence of medicinal cannabis in oncology: a systematic review. Supportive Care in Cancer. https://doi.org/10.1007/s00520-019-04774-5	Ineligible study design (systematic review)
15	Marques, I. A., Silva, M. B., Silva, A. N., Luiz, L. M. D., Soares, A. B., & Naves, E. L. M. (2019). Measurement of post-stroke spasticity based on tonic stretch reflex threshold: implications of stretch velocity for clinical practice. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2017.1381183	Ineligible study design (measurement study)
16	Bozzetti, F. (2019). Nutritional interventions in elderly gastrointestinal cancer patients: the evidence from randomized controlled trials. Supportive Care in Cancer. https://doi.org/10.1007/s00520-018-4532-3	Ineligible study design (review paper)
17	Scorza, F., Rodrigues, L., Oliveira, L., Andersen, M., Tufik, S., & Finsterer, J. (2020). On "Comparative Effectiveness of mHealth-Supported Exercise Compared With Exercise Alone for People With Parkinson Disease: Randomized Controlled Pilot Study." Ellis TD, Cavanaugh, JT, DeAngelis, T, Hendron, K, Thomas, CA, Saint-Hilaire, M, Pencina, K, Latham, NK. Phys Ther. 2019; 99;203–216. Physical Therapy. https://doi.org/10.1093/ptj/pzaa061	Ineligible study design (administrative data)
18	De Vrieze, T., Gebruers, N., Nevelsteen, I., Tjalma, W. A. A., Thomis, S., De Groef, A., … Devoogdt, N. (2020). Physical activity level and age contribute to functioning problems in patients with breast cancer-related lymphedema: a multicentre cross-sectional study. Supportive Care in Cancer. https://doi.org/10.1007/s00520-020-05375-3	Ineligible study design (cross-sectional study)
19	Lin, S., Zhu, B., Huang, G., Wang, C., Zeng, Q., Zhang, S. (2020). Short-Term Effect of Kinesiotaping on Chronic Nonspecific Low Back Pain and Disability: A Meta-Analysis of Randomized Controlled Trials. Phys Ther., 7;100(2):238-254. doi: 10.1093/ptj/pzz163.	Ineligible study design (meta-Analysis)
20	Morris, J. H., John, A., Wedderburn, L., Rauchhaus, P., & Donnan, P. T. (2019). Dynamic	Ineligible study design

	Lycra® orthoses as an adjunct to arm rehabilitation after stroke: a single-blind, two-arm parallel group, randomized controlled feasibility trial. Clinical Rehabilitation. https://doi.org/10.1177/0269215519840403	(feasibility RCT)
21	Wiklander, M., Strandquist, J., Obol, C. M., Eriksson, L. E., Winterling, J., Rodriguez-Wallberg, K. A., … Wettergren, L. (2017). Feasibility of a self-help web-based intervention targeting young cancer patients with sexual problems and fertility distress. Supportive Care in Cancer. https://doi.org/10.1007/s00520-017-3793-6	Ineligible study design (feasibility RCT)
22	Marshall, V. K., Given, C. W., Sikorskii, A., Given, B. A., & Lehto, R. H. (2020). How adverse events and permanent medication stoppages affect changes in patients' beliefs about oral antineoplastic agents. Supportive Care in Cancer. https://doi.org/10.1007/s00520-019-05073-9	Ineligible study design (secondary dataanalysis)
23	de Pauli Paglioni, M., Alves, C. G. B., Fontes, E. K., Lopes, M. A., Ribeiro, A. C. P., Brandão, T. B., … Santos-Silva, A. R. (2019). Is photobiomodulation therapy effective in reducing pain caused by toxicities related to head and neck cancer treatment? A systematic review. Supportive Care in Cancer. https://doi.org/10.1007/s00520-019-04939-2	Ineligible study design (systematic review)
24	Jeffares, I., Merriman, N. A., Rohde, D., McLoughlin, A., Scally, B., Doyle, F., … Hickey, A. (2019). A systematic review and meta-analysis of the effects of cardiac rehabilitation interventions on cognitive impairment following stroke. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2019.1641850	Ineligible study design (systematic review and meta-analysis)
25	Anderson, J. K., Turner, A., & Clyne, W. (2017). Development and feasibility of the Help to Overcome Problems Effectively (HOPE) self-management intervention for people living with multiple sclerosis. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2016.1181211	Ineligible study design (feasibility RCT)
26	Nash, M. S., & Kressler, J. (2016). Model Programs to Address Obesity and Cardiometabolic Disease: Interventions for Suboptimal Nutrition and Sedentary Lifestyles. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2016.05.026	Ineligible study design (monograph of RCT)
27	Baker, F. A., Tamplin, J., Rickard, N., Ponsford, J., New, P. W., & Lee, Y. E. C. (2019). A therapeutic songwriting intervention to promote reconstruction of self-concept and enhance well-being following brain or spinal cord injury: pilot randomized controlled trial. Clinical Rehabilitation. https://doi.org/10.1177/0269215519831417	Ineligible study design (pilot RCT)
28	Nazari, G., Bobos, P., MacDermid, J. C., & Birmingham, T. (2019). The Effectiveness of Instrument-Assisted Soft Tissue Mobilization in Athletes, Participants Without Extremity or Spinal Conditions, and Individuals with Upper Extremity, Lower Extremity, and Spinal Conditions: A Systematic Review. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2019.01.017	Ineligible study design (systematic review)
29	Miller, W. C., Best, K. L., Eng, J. J., & Routhier, F. (2019). Influence of Peer-led Wheelchair Training on Wheelchair Skills and Participation in Older Adults: Clinical Outcomes of a	Ineligible study design (feasibility RCT)

	Randomized Controlled Feasibility Trial. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2018.10.018	
30	Cox, V., Schepers, V., Ketelaar, M., van Heugten, C., & Visser-Meily, A. (2020). Participation Restrictions and Satisfaction With Participation in Partners of Patients With Stroke. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2019.09.012	Ineligible study design (cross-sectional)
31	Tanigor, G., and Hepguler, S., (2020). Extracorporeal Shockwave Therapy and Knee Osteoarthritis: Defining a Placebo Group. Arch Phys Med Rehabil., 101(7):1265. doi: 10.1016/j.apmr.2020.02.018.	Ineligible study design (letter to editor)
32	Wu, T., Fu, Y., Song, H. X., Ye, Y., Dong, Y., & Li, J. H. (2015). Effectiveness of Botulinum Toxin for Shoulder Pain Treatment: A Systematic Review and Meta-Analysis. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2015.06.018	Ineligible study design (systematic review and meta-analysis)
33	Gismervik, S., Fimland, M. S., Fors, E. A., Johnsen, R., & Rise, M. B. (2019). The acceptance and commitment therapy model in occupational rehabilitation of musculoskeletal and common mental disorders: a qualitative focus group study. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2018.1490824	Ineligible study design (qualitative study)
34	Burton, E., Farrier, K., Lewin, G., Petrich, M., Boyle, E., & Hill, K. D. (2020). Are interventions effective in improving the ability of older adults to rise from the floor independently? A mixed method systematic review. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2018.1508509	Ineligible study design (systematic review)
35	Chen, Y., Gao, Q., He, C.-Q., & Bian, R. (2020). Effect of Virtual Reality on Balance in Individuals With Parkinson Disease: A Systematic Review and Meta-Analysis of Randomized Controlled Trials. Physical Therapy. https://doi.org/10.1093/ptj/pzaa042	Ineligible study design (systematic review and meta-analysis)
36	Mukhopadhyay, S., Kwatra, G., K, P. A., & Badyal, D. (2017). Erratum to: Role of olanzapine in chemotherapy-induced nausea and vomiting on platinum-based chemotherapy patients: a randomized controlled study. Supportive Care in Cancer. https://doi.org/10.1007/s00520-016-3416-7	Ineligible study design (Erratum, but original RCT included and erratum info considered)
37	Einhorn, L. H., Rapoport, B., Navari, R. M., Herrstedt, J., & Brames, M. J. (2017). 2016 updated MASCC/ESMO consensus recommendations: prevention of nausea and vomiting following multiple-day chemotherapy, high-dose chemotherapy, and breakthrough nausea and vomiting. Supportive Care in Cancer. https://doi.org/10.1007/s00520-016-3449-y	Ineligible study design (systematic literature review)
38	Gravesande, J., & Richardson, J. (2017). Identifying non-pharmacological risk factors for falling in older adults with type 2 diabetes mellitus: a systematic review. Disability and Rehabilitation. https://doi.org/10.1080/09638288.2016.1199741	Ineligible study design (systematic review)
39	Myrhaug, H. T., Mbalilaki, J. A., Lie, N. E. K., Hansen, T., & Nordvik, J. E. (2020). The effects of multidisciplinary psychosocial interventions on adult cancer patients: a systematic review and meta-analysis*. Disability and Rehabilitation.	Ineligible study design (systematic review and meta-analysis)

	https://doi.org/10.1080/09638288.2018.1515265	
40	Wittkopf PG; Lloyd DM; Johnson MI. Managing limb pain using virtual reality: a systematic review of clinical and experimental studies. Disabil Rehabil Dec 2019;41(26):3103-3117	Ineligible study design (systematic review)
41	Cunha AB; Lima-Alvarez CD; Rocha ACP; Tudella E Effects of elastic therapeutic taping on motor function in children with motor impairments: a systematic review. Disabil Rehabil Jul 2018;40(14):1609-1617	Ineligible study design (systematic review)
42	Robertson J; Chadwick D; Baines S; Emerson E; Hatton C. People with intellectual disabilities and dysphagia. Disabil Rehabil Jun 2018;40(11):1345-1360	Ineligible study design (narrative review)
43	Marotta N; Demeco A; Indino A; de Scorpio G; Moggio L; Ammendolia A Nintendo Wii(TM) versus Xbox Kinect(TM) for functional locomotion in people with Parkinson's disease: a systematic review and network meta-analysis. Disabil Rehabil Jun 2020;():1-6	Ineligible study design (systematic review and meta-analysis)
44	Palma S; Keilani M; Hasenoehrl T; Crevenna R Impact of supportive therapy modalities on heart rate variability in cancer patients - a systematic review. Disabil Rehabil Jan 2020;42(1):36-43	Ineligible study design (systematic review)
45	Saueressig T. On "Short-Term Effect of Kinesiotaping on Chronic Nonspecific Low Back Pain and Disability: A Meta-Analysis of Randomized Controlled Trials." Lin S, Zhu, B. Phys Ther. 2020;100:238-254. Phys Ther Mar 2020;():https://doi.org/10.1093/ptj/pzaa037	Ineligible study design (meta-analysis)
46	Romeo A, Vanti C, Boldrini V, et al. Cervical radiculopathy: effectiveness of adding traction to physical therapy-a systematic review and meta-analysis of randomized controlled trials. Phys Ther. 2018;98:231-242. Phys Ther Aug 2018;98(8):727. https://doi.org/10.1093/physth/pzy001	Ineligible study design (systematic review and meta-analysis)
47	Lehmacher W; Klasser M; Duering A. Letter to the editor: no increased febrile neutropenia risk to cancer patients receiving lipegfilgrastim--correction of a systematic review and meta-analysis of randomized controlled trials with G-CSF. Support Care Cancer May 2016;24(5):1935-1937	Ineligible study design (letter to editor)
48	Danhauer SC; Addington EL; Sohl SJ; Chaoul A; Cohen L. Review of yoga therapy during cancer treatment. Support Care Cancer Apr 2017;25(4):1357-1372	Ineligible study design (review paper)
49	Iversen MD; Schwartz TA; von Heideken J; Callahan LF; Golightly YM; Goode A; Hill C; Huffman K; Pathak A; Cooke J; Allen KD Sociodemographic and Clinical Correlates of Physical Therapy Utilization in Adults With Symptomatic Knee Osteoarthritis. Phys Ther Aug 2018;98(8):670-678	Ineligible study design (secondary data analysis)
50	Ariie T Complete Transparency of a Systematic Review for Readers: On "Cervical Radiculopathy: Effectiveness of Adding Traction to Physical Therapy-A Systematic Review and Meta-analysis of Randomized Controlled Trials," Romeo A, Vanti C, Boldrini V, et al. Phys Th	Ineligible study design (systematic review and meta-analysis)

	Phys Ther Jan 2019;99(1):121	
51	Lopez G; Christie AJ; Powers-James C; Bae MS; Dibaj SS; Gomez T; Williams JL; Bruera E The effects of inpatient music therapy on self-reported symptoms at an academic cancer center: a preliminary report. Support Care Cancer Nov 2019;27(11):4207-4212	Ineligible study design (retrospective study)
52	Liang Z; Fu C; Zhang Q; Xiong F; Peng L; Chen L; He C; Wei Q Effects of water therapy on disease activity, functional capacity, spinal mobility and severity of pain in patients with ankylosing spondylitis: a systematic review and meta-analysis. Disabil Rehabil Jul 2019;():1-8	Ineligible study design (systematic review and meta-analysis)
53	Dodds SE; Pace TW; Bell ML; Fiero M; Negi LT; Raison CL; Weihs KL Erratum to: Feasibility of Cognitively-Based Compassion Training (CBCT) for breast cancer survivors: a randomized, wait list controlled pilot study. Support Care Cancer Dec 2015;23(12):3609-11	Ineligible study design (Erratum to pilot and Feasibility RCT)
54	Dodds SE; Pace TW; Bell ML; Fiero M; Negi LT; Raison CL; Weihs KL Feasibility of Cognitively-Based Compassion Training (CBCT) for breast cancer survivors: a randomized, wait list controlled pilot study. Support Care Cancer Dec 2015;23(12):3599-608	Ineligible study design (pilot and Feasibility RCT)
55	Erickson LN.; Lucas KCH.; Davis KA.; Jacobs CA.; Thompson KL.; Hardy PA.; Andersen AH.; Fry CS.; Noehren BW. Effect of Blood Flow Restriction Training on Quadriceps Muscle Strength, Morphology, Physiology, and Knee Biomechanics Before and After Anterior Cruciate Ligament Reconstruction: Protocol for a Randomized Clinical Trial. Physical therapy 08 2019;99(8):1010-1019	Ineligible study design (protocol of RCT)
56	Vayne-Bossert P; Afsharimani B; Good P; Gray P; Hardy J Interventional options for the management of refractory cancer pain--what is the evidence? Support Care Cancer Mar 2016;24(3):1429-38	Ineligible study design (review paper)
57	Da-Silva RH.; Moore SA.; Rodgers H.; Shaw L.; Sutcliffe L.; van Wijck F.; Price CI. Wristband Accelerometers to motiVate arm Exercises after Stroke (WAVES): a pilot randomized controlled trial. Clinical rehabilitation Aug 2019;33(8):1391-1403	Ineligible study design (pilot RCT)
58	Kadakia KC; Loprinzi CL; Atherton PJ; Fee-Schroeder KC; Sood A; Barton DL Phase II evaluation of S-adenosyl-L-methionine (SAMe) for the treatment of hot flashes. Support Care Cancer Mar 2016;24(3):1061-9	Ineligible study design (single-arm trial)
59	Yen HC.; Chen WS.; Jeng JS.; Luh JJ.; Lee YY.; Pan GS. Standard early rehabilitation and lower limb transcutaneous nerve or neuromuscular electrical stimulation in acute stroke patients: a randomized controlled pilot study. Clinical rehabilitation Aug 2019;33(8):1344-1354	Ineligible study design (pilot RCT)

60	Ter Hoeve N.; Sunamura M.; Stam HJ.; van Domburg RT.; van den Berg-Emons RJ. A secondary analysis of data from the OPTICARE randomized controlled trial investigating the effects of extended cardiac rehabilitation on functional capacity, fatigue, and participation in society. Clinical rehabilitation Aug 2019;33(8):1355-1366	Ineligible study design (secondary data analysis)
61	Richardson AE; Broadbent E; Morton RP A systematic review of psychological interventions for patients with head and neck cancer. Support Care Cancer Jun 2019;27(6):2007-2021	Ineligible study design (systematic review)
62	Kleijn G.; van Uden-Kraan CF.; Bohlmeijer ET.; Becker-Commissaris A.; Pronk M.; Willemsen V.; Cuijpers P.; Verdonck-de Leeuw IM. Patients' experiences of life review therapy combined with memory specificity training (LRT-MST) targeting cancer patients in palliative care. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2019;27(9):3311-3319	Ineligible study design (qualitatively study)
63	Hope C; Reilly J; Lund J; Andreyev H Systematic review: the effect of right hemicolectomy for cancer on postoperative bowel function. Support Care Cancer May 2020;():	Ineligible study design (systematic review)
64	Liew AC; Peh KK; Tan BS; Zhao W; Tangiisuran B Evaluation of chemotherapy-induced toxicity and health-related quality of life amongst early-stage breast cancer patients receiving Chinese herbal medicine in Malaysia. Support Care Cancer Dec 2019;27(12):4515-4524	Ineligible study design (non-randomised longitudinal study)
65	Mosher CE; Winger JG; Given BA; Shahda S; Helft PR A systematic review of psychosocial interventions for colorectal cancer patients. Support Care Cancer Jul 2017;25(7):2349-2362	Ineligible study design (systematic review)
66	Wakefield CE; Sansom-Daly UM; McGill BC; Ellis SJ; Doolan EL; Robertson EG; Mathur S; Cohn RJ Acceptability and feasibility of an e-mental health intervention for parents of childhood cancer survivors: "Cascade". Support Care Cancer Jun 2016;24(6):2685-94	Ineligible study design (feasibility study)
67	Schulz SVW; Laszlo R; Otto S; Prokopchuk D; Schumann U; Ebner F; Huober J; Steinacker JM Feasibility and effects of a combined adjuvant high-intensity interval/strength training in breast cancer patients: a single-center pilot study. Disabil Rehabil Jun 2018;40(13):1501-1508	Ineligible study design (feasibility/pilot study)
68	Cassiani C; Stinson J; Lindsay S E-mentoring for youth with physical disabilities preparing for employment: a content analysis	Ineligible study design (qualitative study)

	of support exchanged between participants of a mentored and non-mentored group. Disabil Rehabil Jan 2019;():1-8	
69	Sabus C; Johns B; Schultz N; Gagnon K Exploration of Content and Reach of Physical Therapy-Related Discussion on Twitter. Phys Ther Aug 2019;99(8):1048-1055	Ineligible study design (observational study)
70	de Lima PB; Brasil VL; de Castro JF; de Moraes Ramos-Perez FM; Alves FA; dos Anjos Pontual ML; da Cruz Perez DE Knowledge and attitudes of Brazilian dental students and dentists regarding bisphosphonate-related osteonecrosis of the jaw. Support Care Cancer Dec 2015;23(12):3421-6	Ineligible study design (cross-sectional study)
71	Kahraman T; Özdoğar AT; Honan CA; Ertekin Ö; Özakbaş S The multiple sclerosis work difficulties questionnaire: translation and cross-cultural adaptation to Turkish and assessment of validity and reliability. Disabil Rehabil Oct 2019;41(21):2556-2562	Ineligible study design (measurement study)
72	Dorstyn D; Roberts R; Murphy G; Kneebone I; Migliorini C; Craig A; Hutchinson C; Field D Piloting an email-based resource package for job seekers with multiple sclerosis. Disabil Rehabil May 2017;39(9):867-873	Ineligible study design (pilote study)
73	Nagib W; Wilton R Gender matters in career exploration and job-seeking among adults with autism spectrum disorder: evidence from an online community. Disabil Rehabil Apr 2019;():1-12	Ineligible study design (qualitative study)
74	Wang PM; Hsu CW; Liu CT; Lai TY; Tzeng FL; Huang CF Effect of acupressure on constipation in patients with advanced cancer. Support Care Cancer Sep 2019;27(9):3473-3478	Ineligible study design (non-randomized study)
75	Voyer AP; Nadeau L; Tessier R Social dominance in children with cerebral palsy during a problem-solving task with peers. Disabil Rehabil Sep 2018;40(19):2288-2292	Ineligible study design (part of a longitudinal study)
76	Klein PJ; Schneider R; Rhoads CJ Qigong in cancer care: a systematic review and construct analysis of effective Qigong therapy. Support Care Cancer Jul 2016;24(7):3209-22	Ineligible study design (systematic review)
77	Silverman AM; Pitonyak JS; Nelson IK; Matsuda PN; Kartin D; Molton IR Instilling positive beliefs about disabilities: pilot testing a novel experiential learning activity for rehabilitation students. Disabil Rehabil May 2018;40(9):1108-1113	Ineligible study design (pilote study)
78	van der Vorst MJ; Neefjes EC; Konings IR; Verheul HM Prophylactic treatment for delayed chemotherapy-induced nausea and vomiting after non-AC	Ineligible study design (systematic review)

	based moderately emetogenic chemotherapy: a systematic review of randomized controlled trials. Support Care Cancer Aug 2015;23(8):2499-506	
79	Cave J; Paschalis A; Huang CY; West M; Copson E; Jack S; Grocott MPW A systematic review of the safety and efficacy of aerobic exercise during cytotoxic chemotherapy treatment. Support Care Cancer Oct 2018;26(10):3337-3351	Ineligible study design (systematic review)
80	Ryösä A; Laimi K; Äärimaa V; Lehtimäki K; Kukkonen J; Saltychev M Surgery or conservative treatment for rotator cuff tear: a meta-analysis. Disabil Rehabil Jul 2017;39(14):1357-1363	Ineligible study design (meta-analysis)
81	Coulter EH; Bond S; Dalgas U; Paul L The effectiveness of interventions targeting physical activity and/or sedentary behaviour in people with Multiple Sclerosis: a systematic review. Disabil Rehabil Mar 2020;42(5):594-612	Ineligible study design (systematic review)
82	Da Campo L; Hauck M; Marcolino MAZ; Pinheiro D; Plentz RDM; Cechetti F Effects of aerobic exercise using cycle ergometry on balance and functional capacity in post-stroke patients: a systematic review and meta-analysis of randomised clinical trials. Disabil Rehabil Oct 2019;():1-7	Ineligible study design (systematic review and meta-analysis)
83	Beatty L; Binnion C; Kemp E; Koczwara B A qualitative exploration of barriers and facilitatorsto adherence to an online self-help intervention for cancer-related distress. Support Care Cancer Aug 2017;25(8):2539-2548	Ineligible study design (qualitative study)
84	Kendall F; Oliveira J; Peleteiro B; Pinho P; Bastos PT Inspiratory muscle training is effective to reduce postoperative pulmonary complications and length of hospital stay: a systematic review and meta-analysis. Disabil Rehabil Apr 2018;40(8):864-882	Ineligible study design (systematic review and meta-analysis)
85	Johansson M; Finizia C; Persson J; Tuomi L Cost-effectiveness analysis of voice rehabilitation for patients with laryngeal cancer: a randomized controlled study. Support Care Cancer Feb 2020;():	Ineligible study design (cost-effectiveness)
86	de Almeida LB; Trevizan PF; Laterza MC; Hallack Neto AE; Perrone ACASJ; Martinez DG Safety and feasibility of inspiratory muscle training for hospitalized patients undergoing hematopoietic stem cell transplantation: a randomized controlled study. Support Care Cancer Dec 2019;():	Ineligible study design (feasibility RCT)
87	Barclay L; Robins L; Migliorini C; Lalor A Community integration programs and interventions for people with spinal cord injury: a scoping review.	Ineligible study design (scoping review)

	Disabil Rehabil May 2020;():1-11	
88	Myers JS.; Mitchell M.; Krigel S.; Steinhoff A.; Boyce-White A.; Van Goethem K.; Valla M.; Dai J.; He J.; Liu W.; Sereika SM.; Bender CM. Qigong intervention for breast cancer survivors with complaints of decreased cognitive function. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2019;27(4):1395-1403	Ineligible study design (pilot RCT)
89	Unger J.; Chan K.; Scovil CY.; Craven BC.; Mansfield A.; Masani K.; Musselman KE. Intensive Balance Training for Adults With Incomplete Spinal Cord Injuries: Protocol for an Assessor-Blinded Randomized Clinical Trial. Physical therapy 04 2019;99(4):420-427	Ineligible study design (RCT protocol)
90	Moukarzel M.; Di Rienzo F.; Lahoud JC.; Hoyek F.; Collet C.; Guillot A.; Hoyek N. The therapeutic role of motor imagery during the acute phase after total knee arthroplasty: a pilot study. Disability and rehabilitation 04 2019;41(8):926-933	Ineligible study design (pilot RCT)
91	Pin TW.; Butler PB. The effect of interactive computer play on balance and functional abilities in children with moderate cerebral palsy: a pilot randomized study. Clinical rehabilitation Apr 2019;33(4):704-710	Ineligible study design (pilot RCT)
92	Chen X.; Hou L.; Zhang Y.; Liu X.; Shao B.; Yuan B.; Li J.; Li M.; Cheng H.; Teng L.; Guo M.; Wang Z.; Chen T.; Liu J.; Liu Y.; Liu Z.; Liu X.; Guo Q. The effects of five days of intensive preoperative inspiratory muscle training on postoperative complications and outcome in patients having cardiac surgery: a randomized controlled trial. Clinical rehabilitation May 2019;33(5):913-922	Ineligible study design (pilot RCT)
93	Rogers JM.; Duckworth J.; Middleton S.; Steenbergen B.; Wilson PH. Elements virtual rehabilitation improves motor, cognitive, and functional outcomes in adult stroke: evidence from a randomized controlled pilot study. Journal of neuroengineering and rehabilitation 05 2019;16(1):56	Ineligible study design (pilot RCT)
94	Song S; Yu J; Ruan Y; Liu X; Xiu L; Yue X Ameliorative effects of Tai Chi on cancer-related fatigue: a meta-analysis of randomized controlled trials. Support Care Cancer Jul 2018;26(7):2091-2102	Ineligible study design (meta-analysis)
95	Sabel M; Sjölund A; Broeren J; Arvidsson D; Saury JM; Blomgren K; Lannering B; Emanuelson I Active video gaming improves body coordination in survivors of childhood brain tumours. Disabil Rehabil Oct 2016;38(21):2073-84	Ineligible study design (pilot RCT)
96	Holavanahalli RK; Helm PA; Kowalske KJ; Hynan LS	Ineligible study design (pilot

	Effectiveness of Paraffin and Sustained Stretch in Treatment of Shoulder Contractures Following a Burn Injury. Arch Phys Med Rehabil Jan 2020;101(1S):S42-S49	RCT)
97	Corli O.; Roberto A.; Corsi N.; Galli F.; Pizzuto M. Opioid switching and variability in response in pain cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2019;27(6):2321-2327	Ineligible study design (post hoc analysis)
98	Huisstede BM; Gladdines S; Randsdorp MS; Koes BW Effectiveness of Conservative, Surgical, and Postsurgical Interventions for Trigger Finger, Dupuytren Disease, and De Quervain Disease: A Systematic Review. Arch Phys Med Rehabil Aug 2018;99(8):1635-1649.e21	Ineligible study design (systematic review)
99	Gunn H; Markevics S; Haas B; Marsden J; Freeman J Systematic Review: The Effectiveness of Interventions to Reduce Falls and Improve Balance in Adults With Multiple Sclerosis. Arch Phys Med Rehabil Oct 2015;96(10):1898-912	Ineligible study design (systematic review)
100	Wang H; Zhang C; Gao C; Zhu S; Yang L; Wei Q; He C Effects of short-wave therapy in patients with knee osteoarthritis: a systematic review and meta-analysis. Clin Rehabil May 2017;31(5):660-671	Ineligible study design (systematic review and meta-analysis)
101	Cattaneo D; Coote S; Rasova K; Gervasoni E; Groppo E; Prokopiusova T; Reznickova J; Montesano A; Jonsdottir J Factors influencing balance improvement in multiple sclerosis rehabilitation: A pragmatic multicentric trial. Ann Phys Rehabil Med Mar 2020;63(2):93-98	Ineligible study design (retrospective study)
102	Stretton CM; Mudge S; Kayes NM; McPherson KM Interventions to improve real-world walking after stroke: a systematic review and meta-analysis. Clin Rehabil Mar 2017;31(3):310-318	Ineligible study design (systematic review and meta-analysis)
103	Castellini G; Gianola S; Bonovas S; Moja L Improving Power and Sample Size Calculation in Rehabilitation Trial Reports: A Methodological Assessment. Arch Phys Med Rehabil Jul 2016;97(7):1195-201	Ineligible study design (methodological assessment)
104	Van Criekinge T; Truijen S; Schröder J; Maebe Z; Blanckaert K; van der Waal C; Vink M; Saeys W The effectiveness of trunk training on trunk control, sitting and standing balance and mobility post-stroke: a systematic review and meta-analysis. Clin Rehabil Jun 2019;33(6):992-1002	Ineligible study design (systematic review and meta-analysis)

105	Thompson AR; Christopherson Z; Marshall LM; Carlson HL; Carlson NL A Pilot Randomized Controlled Trial for Aerobic and Strengthening Exercises on Physical Function and Pain for Hip Osteoarthritis. PM R Mar 2020;12(3):229-237	Ineligible study design (pilot RCT)
106	Jacob AE; Kaelin DL; Roach AR; Ziegler CH; LaFaver K Motor Retraining (MoRe) for Functional Movement Disorders: Outcomes From a 1-Week Multidisciplinary Rehabilitation Program. PM R Nov 2018;10(11):1164-1172	Ineligible study design (retrospective study)
107	Morris DM; Taub E; Mark VW; Liu W; Brenner L; Pickett T; Stearns-Yoder K; Bishop-McKay S; Taylor A; Reder L; Adams T; Rimmer J; Dew D; Szaflarski J; Womble B; Stevens L; Rothman D; Uswatte G Protocol for a Randomized Controlled Trial of CI Therapy for Rehabilitation of Upper Extremity Motor Deficit: The Bringing Rehabilitation to American Veterans Everywhere Project. J Head Trauma Rehabil Jul/Aug 2019;34(4):268-279	Ineligible study design (RCT protocol)
108	Hickey L; Anderson V; Hearps S; Jordan B Family Forward: a social work clinical trial promoting family adaptation following paediatric acquired brain injury. Brain Inj 2018;32(7):867-878	Ineligible study design (prospective study part of larger RCT)
109	Jette AM Touching Base on Clinical Trial Registration. Phys Ther Jan 2019;99(1):1-2	Ineligible study design (editorial)
110	McCormick ZL; Cushman D; Marshall B; Caldwell M; Patel J; Ghannad L; Eng C; Makovitch S; Babu A; Chu SK; Marciniak C; Walega DR; Press J; Plastaras C; Kennedy DJ Pain Reduction and Repeat Injections After Transforaminal Epidural Injection With Particulate Versus Nonparticulate Steroid for the Treatment of Chronic Painful Lumbosacral Radiculopathy. PM R Nov 2016;8(11):1039-1045	Ineligible study design (retrospective study)
111	Kampe K; Kohler M; Albrecht D; Becker C; Hautzinger M; Lindemann U; Pfeiffer K Hip and pelvic fracture patients with fear of falling: development and description of the " Step by Step" treatment protocol. Clin Rehabil May 2017;31(5):571-581	Ineligible study design (RCT protocol)
112	Heppe ECM; Willemen AM; Kef S; Schuengel C Improving social participation of adolescents with a visual impairment with community-based mentoring: results from a randomized controlled trial. Disabil Rehabil May 2019;():1-12	Ineligible study design (sub-study of a larger RCT)
113	Hansen A; Søgaard K; Minet LR; Jarden JO	Ineligible study design

	A 12-week interdisciplinary rehabilitation trial in patients with gliomas - a feasibility study. Disabil Rehabil Jun 2018;40(12):1379-1385	(feasibility RCT)
114	Wang Q; Markopoulos P; Yu B; Chen W; Timmermans A Interactive wearable systems for upper body rehabilitation: a systematic review. J Neuroeng Rehabil Mar 2017;14(1):20	Ineligible study design (systematic review)
115	Lefmann S; Russo R; Hillier S The effectiveness of robotic-assisted gait training for paediatric gait disorders: systematic review. J Neuroeng Rehabil Jan 2017;14(1):1	Ineligible study design (systematic review)
116	Li Y; Yin Y; Jia G; Chen H; Yu L; Wu D Effects of kinesiotape on pain and disability in individuals with chronic low back pain: a systematic review and meta-analysis of randomized controlled trials. Clin Rehabil Apr 2019;33(4):596-606	Ineligible study design (systematic review and meta-analysis)
117	Baque E; Sakzewski L; Barber L; Boyd RN Systematic review of physiotherapy interventions to improve gross motor capacity and performance in children and adolescents with an acquired brain injury. Brain Inj 2016;30(8):948-59	Ineligible study design (systematic review)
118	Fu X; Wang Y; Wang C; Wu H; Li J; Li M; Ma Q; Yang W A mixed treatment comparison on efficacy and safety of treatments for spasticity caused by multiple sclerosis: a systematic review and network meta-analysis. Clin Rehabil Jun 2018;32(6):713-721	Ineligible study design (systematic review and network meta-analysis)
119	Knippenberg E; Verbrugghe J; Lamers I; Palmaers S; Timmermans A; Spooren A Markerless motion capture systems as training device in neurological rehabilitation: a systematic review of their use, application, target population and efficacy. J Neuroeng Rehabil Jun 2017;14(1):61	Ineligible study design (systematic review)
120	Northgraves MJ; Arunachalam L; Madden LA; Marshall P; Hartley JE; MacFie J; Vince RV Feasibility of a novel exercise prehabilitation programme in patients scheduled for elective colorectal surgery: a feasibility randomised controlled trial. Support Care Cancer Jul 2020;28(7):3197-3206	Ineligible study design (feasibility RCT)
121	Schmidt AM; Terkildsen Maindal H; Laurberg TB; Schiøttz-Christensen B; Ibsen C; Bak Gulstad K; Maribo T The Sano study: justification and detailed description of a multidisciplinary biopsychosocial rehabilitation programme in patients with chronic low back pain. Clin Rehabil Nov 2018;32(11):1431-1439	Ineligible study design (RCT protocol)
122	Ainpradub K; Sitthipornvorakul E; Janwantanakul P; van der Beek AJ Response to Letter to the Editor Re: "Effect of education on non-specific neck and low back pain: A meta-analysis of randomized controlled trials".	Ineligible study design (meta-analysis)

	Man Ther Jun 2016;23():e5-6	
123	Wade SL; Kurowski BG Behavioral Clinical Trials in Moderate to Severe Pediatric Traumatic Brain Injury: Challenges, Potential Solutions, and Lessons Learned. J Head Trauma Rehabil Nov/Dec 2017;32(6):433-437	Ineligible study design (commentary)
124	Harorani M; Noruzi Zamenjani M; Golitaleb M; Davodabady F; Zahedi S; Jadidi A; Rezaei M Correction to: Effects of relaxation on self-esteem of patients with cancer: a randomized clinical trial. Support Care Cancer Jan 2020;28(1):413	Ineligible study design (Erratum, but original RCT included and erratum info considered)
125	Corrigendum to 'Effect of manual therapy in patients with hemophilia and ankle arthropathy: a randomized clinical trial'. Clin Rehabil Jan 2020;34(1):NP1	Ineligible study design (Erratum, but original RCT included and erratum info considered)
126	Ferreira G; Stieven F; Araujo F; Wiebusch M; Rosa C; Plentz R; Silva M Trial of neurodynamic treatment was reported accurately and appropriately. J Physiother Jan 2017;63(1):59-60	Ineligible study design (Appraisal correspondence)
127	Pyszora A; Budzyński J; Wójcik A; Prokop A; Krajnik M Erratum to: physiotherapy programme reduces fatigue in patients with advanced cancer receiving palliative care: randomized controlled trial. Support Care Cancer Sep 2017;25(9):2909	Ineligible study design (Erratum, but original RCT included and erratum info considered)
128	van Erp RM; Huijnen IP; Verbunt JA; Smeets RJ Erratum to 'A biopsychosocial primary care intervention (Back on Track) versus primary care as usual in a subgroup of people with chronic low back pain: protocol for a randomised, controlled trial' [JPHYS 61/3 (2015) 155]. J Physiother Apr 2016;62(2):59	Ineligible study design (Erratum for RCT protocol)
129	Tang Q; Zhang K Is acupuncture effective for knee osteoarthritis? Comment on a recent trial. Clin Rehabil Oct 2019;33(10):1697-1698	Ineligible study design (letter to the editor)
130	Skinner EH A randomised trial of an intensive physiotherapy program for patients in intensive care [synopsis]. J Physiother Jul 2016;62(3):166	Ineligible study design (synopsis)
131	Berney SC A randomised trial of an intensive physiotherapy program for patients in intensive care [commentary]. J Physiother Jul 2016;62(3):166	Ineligible study design (commentary)

132	Shen X; Wong-Yu IS; Mak MK Effects of Exercise on Falls, Balance, and Gait Ability in Parkinson's Disease: A Meta-analysis. Neurorehabil Neural Repair Jul 2016;30(6):512-27	Ineligible study design (Meta-analysis)
133	Keenan HT; Bratton SL; Dixon RR Pediatricians' Knowledge, Attitudes, and Behaviors to Screening Children After Complicated Mild TBI: A Survey. J Head Trauma Rehabil Nov/Dec 2017;32(6):385-392	Ineligible study design (Survey)
134	Chan L; Heinemann AW Clinical Trial Registration: The Time Has Come…. Arch Phys Med Rehabil Dec 2015;96(12):2093	Ineligible study design (editorial)
135	Kamper SJ Control Groups: Linking Evidence to Practice. J Orthop Sports Phys Ther Nov 2018;48(11):905-906	Ineligible study design (evidence in practice/editorial)
136	Elsner B; Kwakkel G; Kugler J; Mehrholz J Transcranial direct current stimulation (tDCS) for improving capacity in activities and arm function after stroke: a network meta-analysis of randomised controlled trials. J Neuroeng Rehabil Sep 2017;14(1):95	Ineligible study design (network meta-analysis)
137	Salter KL; McClure JA; Foley NC; Sequeira K; Teasell RW Pharmacotherapy for Depression Posttraumatic Brain Injury: A Meta-analysis. J Head Trauma Rehabil Jul-Aug 2016;31(4):E21-32	Ineligible study design (Meta-analysis)
138	Bodien YG; McCrea M; Dikmen S; Temkin N; Boase K; Machamer J; Taylor SR; Sherer M; Levin H; Kramer JH; Corrigan JD; McAllister TW; Whyte J; Manley GT; Giacino JT Optimizing Outcome Assessment in Multicenter TBI Trials: Perspectives From TRACK-TBI and the TBI Endpoints Development Initiative. J Head Trauma Rehabil May/Jun 2018;33(3):147-157	Ineligible study design (review paper)
139	Kamper SJ Blinding: Linking Evidence to Practice. J Orthop Sports Phys Ther Oct 2018;48(10):825-826	Ineligible study design (evidence in practice/editorial)
140	Bubalo JS; Herrington JD; Takemoto M; Willman P; Edwards MS; Williams C; Fisher A; Palumbo A; Chen E; Blanke C; Lopez CD Phase II open label pilot trial of aprepitant and palonosetron for the prevention of chemotherapy-induced nausea and vomiting (CINV) in patients receiving moderately emetogenic FOLFOX chemotherapy for the treatment of colorectal cancer. Support Care Cancer Apr 2018;26(4):1273-1279	Ineligible study design (pilot trial)
141	Mathevon L; Declemy A; Laffont I; Perennou D Immunogenicity induced by botulinum toxin injections for limb spasticity: A systematic	Ineligible study design (systematic review)

	review. Ann Phys Rehabil Med Jul 2019;62(4):241-251	
142	Bernhardt J; Hayward KS; Kwakkel G; Ward NS; Wolf SL; Borschmann K; Krakauer JW; Boyd LA; Carmichael ST; Corbett D; Cramer SC Agreed Definitions and a Shared Vision for New Standards in Stroke Recovery Research: The Stroke Recovery and Rehabilitation Roundtable Taskforce. Neurorehabil Neural Repair Sep 2017;31(9):793-799	Ineligible study design (Consensus statements)
143	Shin J; von Luhmann A; Blankertz B; Kim DW; Jeong J; Hwang HJ; Muller KR Open Access Dataset for EEG+NIRS Single-Trial Classification. IEEE Trans Neural Syst Rehabil Eng Oct 2017;25(10):1735-1745	Ineligible study design (not an RCT)
144	de Bakker M; den Uijl I; Ter Hoeve N; van Domburg RT; Geleijnse ML; van den Berg-Emons RJ; Boersma E; Sunamura M Association Between Exercise Capacity and Health-Related Quality of Life During and After Cardiac Rehabilitation in Acute Coronary Syndrome Patients: A Substudy of the OPTICARE Randomized Controlled Trial. Arch Phys Med Rehabil Apr 2020;101(4):650-657	Ineligible study design (prospective study)
145	Agubuzu O; Beckworth WJ Cephalad Lead Migration During a Spinal Cord Stimulation Trial: A Case Presentation. PM R Jan 2018;10(1):101-104	Ineligible study design (Case presentation)
146	Deng A; Yang S; Xiong R Effects of an integrated transitional care program for stroke survivors living in a rural community: a randomized controlled trial. Clin Rehabil Apr 2020;34(4):524-532	Ineligible study design (pilot RCT)
147	Balossier A; Etard O; Descat C; Vivien D; Emery E Epidural Cortical Stimulation as a Treatment for Poststroke Aphasia: A Systematic Review of the Literature and Underlying Neurophysiological Mechanisms. Neurorehabil Neural Repair Feb 2016;30(2):120-30	Ineligible study design (Systematic review)
148	Shahtalebi S; Mohammadi A Bayesian Optimized Spectral Filters Coupled With Ternary ECOC for Single-Trial EEG Classification. IEEE Trans Neural Syst Rehabil Eng Dec 2018;26(12):2249-2259	Ineligible study design (Bayesian framework)
149	Tanadini LG; Hothorn T; Jones LA; Lammertse DP; Abel R; Maier D; Rupp R; Weidner N; Curt A; Steeves JD Toward Inclusive Trial Protocols in Heterogeneous Neurological Disorders: Prediction-Based Stratification of Participants With Incomplete Cervical Spinal Cord Injury. Neurorehabil Neural Repair Oct 2015;29(9):867-77	Ineligible study design (retrospective study)
150	Lee D; Heffron JL; Mirza M	Ineligible study design

	Content and Effectiveness of Interventions Focusing on Community Participation Poststroke: A Systematic Review. Arch Phys Med Rehabil Nov 2019;100(11):2179-2192.e1	(Systematic review)
151	Levy J; Prigent H; Bensmail D Respiratory rehabilitation in multiple sclerosis: A narrative review of rehabilitation techniques. Ann Phys Rehabil Med Jan 2018;61(1):38-45	Ineligible study design (narrative review)
152	Nguyen C; Lefèvre-Colau MM; Poiraudeau S; Rannou F Rehabilitation (exercise and strength training) and osteoarthritis: A critical narrative review. Ann Phys Rehabil Med Jun 2016;59(3):190-195	Ineligible study design (narrative review)
153	Zafonte RD; Fregni F; Bergin MJG; Goldstein R; Boudreau N; Monge I; Luz M; Frazier J; Giacino JT Huperzine A for the treatment of cognitive, mood, and functional deficits after moderate and severe TBI (HUP-TBI): results of a Phase II randomized controlled pilot study: implications for understanding the placebo effect. Brain Inj 2020;34(1):34-41	Ineligible study design (pilot RCT)
154	Razzak I; Blumenstein M; Xu G Multiclass Support Matrix Machines by Maximizing the Inter-Class Margin for Single Trial EEG Classification. IEEE Trans Neural Syst Rehabil Eng Jun 2019;27(6):1117-1127	Ineligible study design (mathematical)
155	de Paz RH; Serrano-Muñoz D; Pérez-Nombela S; Bravo-Esteban E; Avendaño-Coy J; Gómez-Soriano J Combining transcranial direct-current stimulation with gait training in patients with neurological disorders: a systematic review. J Neuroeng Rehabil Sep 2019;16(1):114	Ineligible study design (Systematic review)
156	Park M; Ko MH; Oh SW; Lee JY; Ham Y; Yi H; Choi Y; Ha D; Shin JH Effects of virtual reality-based planar motion exercises on upper extremity function, range of motion, and health-related quality of life: a multicenter, single-blinded, randomized, controlled pilot study. J Neuroeng Rehabil Oct 2019;16(1):122	Ineligible study design (pilot RCT)
157	Villepinte C; Verma A; Dimeglio C; Boissezon X; Gasq D Responsiveness of kinematic and clinical measures of upper-limb motor function after stroke: a systematic review and meta-analysis. Ann Phys Rehabil Med Mar 2020;():	Ineligible study design (systematic review and meta-analysis)
158	Bailey C; Meyer J; Briskin S; Tangen C; Hoffer SA; Dundr J; Brennan B; Smith P Multidisciplinary Concussion Management: A Model for Outpatient Concussion Management in the Acute and Post-Acute Settings. J Head Trauma Rehabil Nov/Dec 2019;34(6):375-384	Ineligible study design (pilot RCT)

159	Kreitzer N; Ancona R; McCullumsmith C; Kurowski BG; Foreman B; Ngwenya LB; Adeoye O The Effect of Antidepressants on Depression After Traumatic Brain Injury: A Meta-analysis. J Head Trauma Rehabil May/Jun 2019;34(3):E47-E54	Ineligible study design (meta-analysis)
160	Wu IX; Lam VC; Ho RS; Cheung WK; Sit RW; Chou LW; Zhang Y; Leung TH; Chung VC Acupuncture and related interventions for carpal tunnel syndrome: systematic review. Clin Rehabil Jan 2020;34(1):34-44	Ineligible study design (Systematic review)
161	Barrows PD; Thomas SA Assessment of mood in aphasia following stroke: validation of the Dynamic Visual Analogue Mood Scales (D-VAMS). Clin Rehabil Jan 2018;32(1):94-102	Ineligible study design (Cross-sectional observational study)
162	Petrantonakis PC; Kompatsiaris I Single-Trial NIRS Data Classification for Brain-Computer Interfaces Using Graph Signal Processing. IEEE Trans Neural Syst Rehabil Eng Sep 2018;26(9):1700-1709	Ineligible study design
163	Cochrane A; Higgins NM; FitzGerald O; Gallagher P; Ashton J; Corcoran O; Desmond D Early interventions to promote work participation in people with regional musculoskeletal pain: a systematic review and meta-analysis. Clin Rehabil Nov 2017;31(11):1466-1481	Ineligible study design (systematic review and meta-analysis)
164	Meinel A; Kolkhorst H; Tangermann M Mining Within-Trial Oscillatory Brain Dynamics to Address the Variability of Optimized Spatial Filters. IEEE Trans Neural Syst Rehabil Eng Mar 2019;27(3):378-388	Ineligible study design
165	Wee TC Clinical trial on the effects of amantadine on traumatic brain injury outcome. Is there more than meets the eye? Brain Inj 2019;33(3):397-398	Ineligible study design (letter to editor)
166	Martens G; Fregni F; Carrière M; Barra A; Laureys S; Thibaut A Single tDCS session of motor cortex in patients with disorders of consciousness: a pilot study. Brain Inj 2019;33(13-14):1679-1683	Ineligible study design (pilot RCT)
167	Jansons P; Robins L; O'Brien L; Haines T Gym-based exercise was more costly compared with home-based exercise with telephone support when used as maintenance programs for adults with chronic health conditions: cost-effectiveness analysis of a randomised trial. J Physiother Jan 2018;64(1):48-54	Ineligible study design (cost-effectiveness analysis)
168	Ouyang JH; Chang KH; Hsu WY; Cho YT; Liou TH; Lin YN	Ineligible study design

	Non-elastic taping, but not elastic taping, provides benefits for patients with knee osteoarthritis: systemic review and meta-analysis. Clin Rehabil Jan 2018;32(1):3-17	(systemic review and meta-analysis.)
169	Gailey R; Gaunaurd I; Raya M; Kirk-Sanchez N; Prieto-Sanchez LM; Roach K Effectiveness of an Evidence-Based Amputee Rehabilitation Program: A Pilot Randomized Controlled Trial. Phys Ther May 2020;100(5):773-787	Ineligible study design (pilot RCT)
170	Willaert J; De Vries AW; Tavernier J; Van Dieen JH; Jonkers I; Verschueren S Does a novel exergame challenge balance and activate muscles more than existing off-the-shelf exergames? J Neuroeng Rehabil Jan 2020;17(1):6	Ineligible study design (feasibility trial)
171	Bisson EJ; Fakolade A; Pétrin J; Lamarre J; Finlayson M Exercise interventions in multiple sclerosis rehabilitation need better reporting on comorbidities: a systematic scoping review. Clin Rehabil Oct 2017;31(10):1305-1312	Ineligible study design (systematic scoping review)
172	Ben-Ami N; Shapiro Y; Pincus T Outcomes in Distressed Patients With Chronic Low Back Pain: Subgroup Analysis of a Clinical Trial. J Orthop Sports Phys Ther Jun 2018;48(6):491-495	Ineligible study design (Subgroup analysis)
173	Esquenazi A; Stoquart G; Hedera P; Jacinto LJ; Dimanico U; Constant-Boyer F; Brashear A; Grandoulier AS; Vilain C; Picaut P; Gracies JM Efficacy and Safety of Abobotulinumtoxin A for the Treatment of Hemiparesis in Adults with Lower Limb Spasticity Previously Treated With Other Botulinum Toxins: A Secondary Analysis of a Randomized Controlled Trial. PM R Feb 2020;():	Ineligible study design (Secondary analysis)
174	Keogh A; Tully MA; Matthews J; Hurley DA A review of behaviour change theories and techniques used in group based self-management programmes for chronic low back pain and arthritis. Man Ther Dec 2015;20(6):727-35	Ineligible study design (review paper)
175	Gardinier ES; Kelly BM; Wensman J; Gates DH A controlled clinical trial of a clinically-tuned powered ankle prosthesis in people with transtibial amputation. Clin Rehabil Mar 2018;32(3):319-329	Ineligible study design (laboratory RCT)
176	Barbuto S; Martelli D; Isirame O; Lee N; Bishop L; Kuo SH; Agrawal S; Lee S; O'Dell M; Stein J Phase I Single-Blinded Randomized Controlled Trial Comparing Balance and Aerobic Training in Degenerative Cerebellar Disease. PM R May 2020;():	Ineligible study design (Phase I)

177	Meske S; Hazzard JB Jr; Ni M; Hanson T; Van Horn L; Smith J The Prevalence of Traumatic Brain Injury and On-Campus Service Utilization Among Undergraduate Students. J Head Trauma Rehabil Jan/Feb 2019;34(1):E18-E26	Ineligible study design (descriptive study-surveys)
178	Mat S; Ng CT; Tan PJ; Ramli N; Fadzli F; Rozalli FI; Mazlan M; Hill KD; Tan MP Effect of Modified Otago Exercises on Postural Balance, Fear of Falling, and Fall Risk in Older Fallers With Knee Osteoarthritis and Impaired Gait and Balance: A Secondary Analysis. PM R Mar 2018;10(3):254-262	Ineligible study design (Secondary analysis)
179	Lee I. (2015) The effect of postural control intervention for congenital muscular torticollis: a randomized controlled trial. Clinical Rehabilitation 29(8): 795–802. DOI: 10.1177/0269215514555037. Retraction Notice. Clin Rehabil Mar 2018;32(3):425	Ineligible study design (Retracted)
180	Kootker JA; Rasquin SM; Smits P; Geurts AC; van Heugten CM; Fasotti L An augmented cognitive behavioural therapy for treating post-stroke depression: description of a treatment protocol. Clin Rehabil Sep 2015;29(9):833-43	Ineligible study design (RCT protocol)
181	Moran U; Gottlieb U; Gam A; Springer S Functional electrical stimulation following anterior cruciate ligament reconstruction: a randomized controlled pilot study. J Neuroeng Rehabil Jul 2019;16(1):89	Ineligible study design (pilot RCT)
182	Bekkers EMJ; Mirelman A; Alcock L; Rochester L; Nieuwhof F; Bloem BR; Pelosin E; Avanzino L; Cereatti A; Della Croce U; Hausdorff JM; Nieuwboer A Do Patients With Parkinson's Disease With Freezing of Gait Respond Differently Than Those Without to Treadmill Training Augmented by Virtual Reality? Neurorehabil Neural Repair May 2020;34(5):440-449	Ineligible study design (Secondary analysis)
183	Basu AP; Kirkpatrick EV; Pearse J Critical appraisal leaves our upper limb therapy intervention trial misrepresented. J Physiother Jul 2017;63(3):189	Ineligible study design (Appraisal paper)
184	Smedes F; Heidmann M; Schaefer C; Fischer N Commentary on Horst R et al. Activity- vs. structural-oriented treatment approach for frozen shoulder: a randomized controlled trial. Clin Rehabil Dec 2017;31(12):1696-1698	Ineligible study design (Commentary)
185	Tikkanen AU; Rhodes J; Landzberg M; Bhatt A; Systrom DM; Waxman A; Moko L; Bradley R; Crouter S; Opotowsky A Poster 26 A Randomized Trial of Cardiac Rehabilitation for Adolescents and Adults with Congenital Heart Disease. PM R Sep 2016;8(9S):S169	Ineligible study design (poster)

186	Uszynski MK; Purtill H; Donnelly A; Coote S Comparing the effects of whole-body vibration to standard exercise in ambulatory people with Multiple Sclerosis: a randomised controlled feasibility study. Clin Rehabil Jul 2016;30(7):657-68	Ineligible study design (feasibility study)
187	Mine K; Nakayama T; Milanese S; Grimmer K Acute effects of stretching on maximal muscle strength and functional performance: A systematic review of Japanese-language randomised controlled trials. Man Ther Feb 2016;21():54-62	Ineligible study design (systematic review)
188	Grigoriu AI; Dinomais M; Rémy-Néris O; Brochard S Impact of Injection-Guiding Techniques on the Effectiveness of Botulinum Toxin for the Treatment of Focal Spasticity and Dystonia: A Systematic Review. Arch Phys Med Rehabil Nov 2015;96(11):2067-78.e1	Ineligible study design (systematic review)
189	Yang JD; Liao CD; Huang SW; Tam KW; Liou TH; Lee YH; Lin CY; Chen HC Effectiveness of electrical stimulation therapy in improving arm function after stroke: a systematic review and a meta-analysis of randomised controlled trials. Clin Rehabil Aug 2019;33(8):1286-1297	Ineligible study design (systematic review and a meta-analysis)
190	Johnsen AT; Petersen MA; Sjøgren P; Pedersen L; Neergaard MA; Damkier A; Gluud C; Fayers P; Lindschou J; Strömgren AS; Nielsen JB; Higginson IJ; Groenvold M Exploratory analyses of the Danish Palliative Care Trial (DanPaCT): a randomized trial of early specialized palliative care plus standard care versus standard care in advanced cancer patients. Support Care Cancer May 2020;28(5):2145-2155	Ineligible study design (Exploratory analyses)
191	Bamman MM; Cutter GR; Brienza DM; Chae J; Corcos DM; DeLuca S; Field-Fote E; Fouad MN; Lang CE; Lindblad A; Motl RW; Perna CG; Reisman D; Saag KM; Savitz SI; Schmitz KH; Stevens-Lapsley J; Whyte J; Winstein CJ; Michel ME Medical Rehabilitation: Guidelines to Advance the Field With High-Impact Clinical Trials. Arch Phys Med Rehabil Dec 2018;99(12):2637-2648	Ineligible study design (Summary/special communication)
192	Deltombe T; Lejeune T; Gustin T Botulinum toxin type A or selective neurotomy for treating focal spastic muscle overactivity? Ann Phys Rehabil Med Jul 2019;62(4):220-224	Ineligible study design (Expert opinion)
193	Kwakkel G; Lannin NA; Borschmann K; English C; Ali M; Churilov L; Saposnik G; Winstein C; van Wegen EEH; Wolf SL; Krakauer JW; Bernhardt J Standardized Measurement of Sensorimotor Recovery in Stroke Trials: Consensus-Based Core Recommendations from the Stroke Recovery and Rehabilitation Roundtable. Neurorehabil Neural Repair Sep 2017;31(9):784-792	Ineligible study design (Consensus statements)
194	Zheng Q; Zhu F; Heng PA Robust Support Matrix Machine for Single Trial EEG Classification.	Ineligible study design

	IEEE Trans Neural Syst Rehabil Eng Mar 2018;26(3):551-562	
195	McIntyre A; Janzen S; Richardson M; Kwok C; Teasell R An Overview of Acquired Brain Injury Rehabilitation Randomized Controlled Trials. J Head Trauma Rehabil Nov-Dec 2015;30(6):E47-53	Ineligible study design (Systematic review)
196	Lawrence BJ; Gasson N; Bucks RS; Troeung L; Loftus AM Cognitive Training and Noninvasive Brain Stimulation for Cognition in Parkinson's Disease: A Meta-analysis. Neurorehabil Neural Repair Jul 2017;31(7):597-608	Ineligible study design (Meta-analysis)
197	Hsieh YW; Liing RJ; Lin KC; Wu CY; Liou TH; Lin JC; Hung JW Sequencing bilateral robot-assisted arm therapy and constraint-induced therapy improves reach to press and trunk kinematics in patients with stroke. J Neuroeng Rehabil Mar 2016;13():31	Ineligible study design (part of larger RCT)
198	Nascimento LR; Teixeira-Salmela LF; Souza RB; Resende RA Hip and Knee Strengthening Is More Effective Than Knee Strengthening Alone for Reducing Pain and Improving Activity in Individuals With Patellofemoral Pain: A Systematic Review With Meta-analysis. J Orthop Sports Phys Ther Jan 2018;48(1):19-31	Ineligible study design (Systematic Review and meta-analysis)
199	Morris RP; Fletcher-Smith JC; Radford KA A systematic review of peer mentoring interventions for people with traumatic brain injury. Clin Rehabil Aug 2017;31(8):1030-1038	Ineligible study design (systematic review)
200	Miller L.; van Wijck F.; Lamont L.; Preston J.; Hair M. Sensory dynamic orthoses in mild to moderate upper limb tremor in multiple sclerosis: a mixed methods feasibility study. Clinical rehabilitation Nov 2016;30(11):1060-1073	Ineligible study design (feasibility study)
201	Pontes SS; de Carvalho ALR; Almeida KO; Neves MP; Ribeiro Schindler IFS; Alves IGN; Arcanjo FL; Gomes-Neto M Effects of isokinetic muscle strengthening on muscle strength, mobility, and gait in post-stroke patients: a systematic review and meta-analysis. Clin Rehabil Mar 2019;33(3):381-394	Ineligible study design (Systematic Review and meta-analysis)
202	Kannan P; Winser SJ; Choi Ho L; Hei LC; Kin LC; Agnieszka GE; Jeffrey LH Effectiveness of physiotherapy interventions for improving erectile function and climacturia in men after prostatectomy: a systematic review and meta-analysis of randomized controlled trials. Clin Rehabil Aug 2019;33(8):1298-1309	Ineligible study design (Systematic Review and meta-analysis)
203	Tuakli-Wosornu YA.; Selzer F.; Losina E.; Katz JN. Predictors of Exercise Adherence in Patients With Meniscal Tear and Osteoarthritis. Archives of physical medicine and rehabilitation 11 2016;97(11):1945-1952	Ineligible study design (Secondary data analysis)

204	Frawley HC; Lin KY; Granger CL; Higgins R; Butler M; Denehy L An allied health rehabilitation program for patients following surgery for abdomino-pelvic cancer: a feasibility and pilot clinical study. Support Care Cancer Mar 2020;28(3):1335-1350	Ineligible study design (feasibility and pilot RCT)
205	Mehta P; Syrop I; Singh JR; Kirschner J Systematic Review of the Efficacy of Particulate Versus Nonparticulate Corticosteroids in Epidural Injections. PM R May 2017;9(5):502-512	Ineligible study design (Systematic review)
206	Takacs J.; Krowchuk NM.; Garland SJ.; Carpenter MG.; Hunt MA. Dynamic Balance Training Improves Physical Function in Individuals With Knee Osteoarthritis: A Pilot Randomized Controlled Trial. Archives of physical medicine and rehabilitation 08 2017;98(8):1586-1593	Ineligible study design (pilot RCT)
207	Milne SC; Corben LA; Georgiou-Karistianis N; Delatycki MB; Yiu EM Rehabilitation for Individuals With Genetic Degenerative Ataxia: A Systematic Review. Neurorehabil Neural Repair Jul 2017;31(7):609-622	Ineligible study design (Systematic review)
208	Nguyen S.; McKay A.; Wong D.; Rajaratnam SM.; Spitz G.; Williams G.; Mansfield D.; Ponsford JL. Cognitive Behavior Therapy to Treat Sleep Disturbance and Fatigue After Traumatic Brain Injury: A Pilot Randomized Controlled Trial. Archives of physical medicine and rehabilitation 08 2017;98(8):1508-1517.e2	Ineligible study design (pilot RCT)
209	Imam B.; Miller WC.; Finlayson H.; Eng JJ.; Jarus T. A randomized controlled trial to evaluate the feasibility of the Wii Fit for improving walking in older adults with lower limb amputation. Clinical rehabilitation Jan 2017;31(1):82-92	Ineligible study design (feasibility study)
210	Martin KJ; Sinclair EJ; das Nair R Descriptions of memory rehabilitation group interventions for neurological conditions: a systematic review. Clin Rehabil Jul 2016;30(7):705-13	Ineligible study design (Systematic review)
211	Mikkelsen LR.; Petersen AK.; Mechlenburg I.; Mikkelsen S.; Søballe K.; Bandholm T. Description of load progression and pain response during progressive resistance training early after total hip arthroplasty: secondary analyses from a randomized controlled trial. Clinical rehabilitation Jan 2017;31(1):11-22	Ineligible study design (Secondary data analysis)
212	Fridriksdottir N; Gunnarsdottir S; Zoëga S; Ingadottir B; Hafsteinsdottir EJG Effects of web-based interventions on cancer patients' symptoms: review of randomized trials. Support Care Cancer Feb 2018;26(2):337-351	Ineligible study design (review papers)
213	Sutton BS; Ottomanelli L; Njoh E; Barnett S; Goetz L	Ineligible study design

	Economic evaluation of a supported employment program for veterans with spinal cord injury. Disabil Rehabil May 2020;42(10):1423-1429	(Economic evaluation)
214	Abo S; Ritchie D; Denehy L; Panek-Hudson Y; Irving L; Granger CL A hospital and home-based exercise program to address functional decline in people following allogeneic stem cell transplantation. Support Care Cancer Jun 2018;26(6):1727-1736	Ineligible study design (feasibility/prospective case series)
215	Beard D; Hamilton D; Davies L; Cook J; Hirst A; McCulloch P; Paez A Evidence-Based Evaluation of Practice and Innovation in Physical Therapy Using the IDEAL-Physio Framework. Phys Ther Feb 2018;98(2):108-121	Ineligible study design (Perspective)
216	Edwards A; Chepeha J; Jones A; Sheps DM; Beaupré L Can clinical assessment differentiate partial thickness rotator cuff tears from full thickness rotator cuff tears? A secondary analysis. Disabil Rehabil Feb 2019;():1-8	Ineligible study design (Secondary data analysis)
217	Morgan JE; Cleminson J; Atkin K; Stewart LA; Phillips RS Systematic review of reduced therapy regimens for children with low risk febrile neutropenia. Support Care Cancer Jun 2016;24(6):2651-60	Ineligible study design(Systematic review)
218	Luo X; Zhang J; Zhang C; He C; Wang P The effect of whole-body vibration therapy on bone metabolism, motor function, and anthropometric parameters in women with postmenopausal osteoporosis. Disabil Rehabil Nov 2017;39(22):2315-2323	Ineligible study design (systematic review)
219	Grant SR; Noticewala SS; Mainwaring W; Lin TA; Miller AB; Jethanandani A; Espinoza AF; Gunn GB; Fuller CD; Thomas CR Jr; Portelance L; Ludmir EB Non-English language validation of patient-reported outcome measures in cancer clinical trials. Support Care Cancer Jun 2020;28(6):2503-2505	Ineligible study design (commentary)
220	Piringer G; Fridrik M; Fridrik A; Leiherer A; Zabernigg A; Greil R; Eisterer W; Tschmelitsch J; Lang A; Frantal S; Burgstaller S; Gnant M; Thaler J A prospective, multicenter pilot study to investigate the feasibility and safety of a 1-year controlled exercise training after adjuvant chemotherapy in colorectal cancer patients. Support Care Cancer Apr 2018;26(4):1345-1352	Ineligible study design (pilot RCT)
221	Huisstede BM; Hoogvliet P; Franke TP; Randsdorp MS; Koes BW Carpal Tunnel Syndrome: Effectiveness of Physical Therapy and Electrophysical Modalities. An Updated Systematic Review of Randomized Controlled Trials. Arch Phys Med Rehabil Aug 2018;99(8):1623-1634.e23	Ineligible study design (systematic review)
222	Leganger J; Fonnes S; Kulas Søborg ML; Rosenberg J; Burcharth J The most common comorbidities in patients with Ehlers-Danlos syndrome: a 15-year nationwide population-based cohort study.	Ineligible study design (cohort study)

	Disabil Rehabil May 2020;():1-5	
223	Ukovic B; Porter J Nutrition interventions to improve the appetite of adults undergoing cancer treatment: a systematic review. Support Care Cancer May 2020;():	Ineligible study design (systematic review)
224	Provencher V; Desrosiers J; Demers L; Carmichael PH Optimizing social participation in community-dwelling older adults through the use of behavioral coping strategies. Disabil Rehabil 2016;38(10):972-8	Ineligible study design (not an RCT)
225	Li M; Chan CWH; Chow KM; Xiao J; Choi KC A systematic review and meta-analysis of couple-based intervention on sexuality and the quality of life of cancer patients and their partners. Support Care Cancer Apr 2020;28(4):1607-1630	Ineligible study design (systematic review and meta-analysis)
226	Liu JJ; Butow P; Beith J Systematic review of interventions by non-mental health specialists for managing fear of cancer recurrence in adult cancer survivors. Support Care Cancer Nov 2019;27(11):4055-4067	Ineligible study design (Systematic review)
227	Tian L; Lu HJ; Lin L; Hu Y Effects of aerobic exercise on cancer-related fatigue: a meta-analysis of randomized controlled trials. Support Care Cancer Feb 2016;24(2):969-983	Ineligible study design (meta-analysis)
228	Santos Salas A; Fuentes Contreras J; Armijo-Olivo S; Saltaji H; Watanabe S; Chambers T; Walter L; Cummings GG Non-pharmacological cancer pain interventions in populations with social disparities: a systematic review and meta-analysis. Support Care Cancer Feb 2016;24(2):985-1000	Ineligible study design (systematic review and meta-analysis)
229	Pinkerton E; Good P; Gibbons K; Hardy J An open-label pilot study of oral vitamin C as an opioid-sparing agent in patients with chronic pain secondary to cancer. Support Care Cancer Feb 2017;25(2):341-343	Ineligible study design (pilot study)
230	Hasenoehrl T; Palma S; Ramazanova D; Kölbl H; Dorner TE; Keilani M; Crevenna R Resistance exercise and breast cancer-related lymphedema-a systematic review update and meta-analysis. Support Care Cancer May 2020;():	Ineligible study design (systematic review and meta-analysis)
231	Gorgon EJR Caregiver-Provided Physical Therapy Home Programs for Children with Motor Delay: A Scoping Review.	Ineligible study design (Scoping review)

	Phys Ther Jun 2018;98(6):480-493	
232	Pires D; Cruz EB; Gomes LA; Nunes C How Do Physical Therapists Measure Treatment Outcomes in Adults With Chronic Low Back Pain? A Systematic Review. Phys Ther Mar 2020;():	Ineligible study design (Systematic review)
233	Lee JLC; Leong LP; Lim SL Nutrition intervention approaches to reduce malnutrition in oncology patients: a systematic review. Support Care Cancer Jan 2016;24(1):469-480	Ineligible study design (Systematic review)
234	Abdollahipour R; Land WM; Cereser A; Chiviacowsky S External relative to internal attentional focus enhances motor performance and learning in visually impaired individuals. Disabil Rehabil Feb 2019;():1-10	Ineligible study design (quasi-random)
235	Dennis K; Jamani R; McGrath C; Makhani L; Lam H; Bauer P; De Angelis C; Coburn N; Wong CS; Chow E A systematic review of methodologies, endpoints, and outcome measures in randomized trials of radiation therapy-induced nausea and vomiting. Support Care Cancer Jun 2017;25(6):2019-2033	Ineligible study design (systematic review)
236	Ward R; Reynolds JE; Pieterse B; Elliott C; Boyd R; Miller L Utilisation of coaching practices in early interventions in children at risk of developmental disability/delay: a systematic review. Disabil Rehabil Apr 2019;():1-22	Ineligible study design (systematic review)
237	Gernier F; Joly F; Klein D; Mercier M; Velten M; Licaj I Cancer-related fatigue among long-term survivors of breast, cervical, and colorectal cancer: a French registry-based controlled study. Support Care Cancer Apr 2020;():	Ineligible study design (registry–based study)
238	Clemons M; Mazzarello S; Hilton J; Joy A; Price-Hiller J; Zhu X; Verma S; Kehoe A; Ibrahim MF; Sienkiewicz M; Stober C; Vandermeer L; Hutton B; Mallick R; Fergusson D Feasibility of using a pragmatic trials model to compare two primary febrile neutropenia prophylaxis regimens (ciprofloxacin versus G-CSF) in patients receiving docetaxel-cyclophosphamide chemotherapy for breast cancer (REaCT-TC). Support Care Cancer Apr 2019;27(4):1345-1354	Ineligible study design (feasibility study)
239	Roila F; Warr D; Hesketh PJ; Gralla R; Herrstedt J; Jordan K; Aapro M; Ballatori E; Rapoport B 2016 updated MASCC/ESMO consensus recommendations: Prevention of nausea and vomiting following moderately emetogenic chemotherapy. Support Care Cancer Jan 2017;25(1):289-294	Ineligible study design (consensus recommendations)

240	Haas R; O'Brien L; Bowles KA; Haines T Health professionals' perceptions of the allied health role in the acute setting following hip and knee joint replacement surgery: a qualitative study. Disabil Rehabil Jan 2020;42(1):93-101	Ineligible study design (qualitative study)
241	Ward R; Reynolds JE; Bear N; Elliott C; Valentine J What is the evidence for managing tone in young children with, or at risk of developing, cerebral palsy: a systematic review. Disabil Rehabil Apr 2017;39(7):619-630	Ineligible study design (systematic review)
242	Weis JB; Gschwendtner K; Giesler JM; Adams L; Wirtz MA Psychoeducational group intervention for breast cancer survivors: a non-randomized multi-center pilot study. Support Care Cancer Jul 2020;28(7):3033-3040	Ineligible study design (pilot study)
243	Rintala A; Hakala S; Paltamaa J; Heinonen A; Karvanen J; Sjögren T Effectiveness of technology-based distance physical rehabilitation interventions on physical activity and walking in multiple sclerosis: a systematic review and meta-analysis of randomized controlled trials. Disabil Rehabil Feb 2018;40(4):373-387	Ineligible study design (systematic review and meta-analysis)
244	Halvarsson A; Ståhle A Psychometric properties of the Swedish version of the Falls Efficacy Scale-International for older adults with osteoporosis, self-reported balance deficits and fear of falling. Disabil Rehabil Nov 2018;40(22):2658-2661	Ineligible study design (cross-sectional study)
245	Surkitt LD.; Ford JJ.; Chan AY.; Richards MC.; Slater SL.; Pizzari T.; Hahne AJ. Effects of individualised directional preference management versus advice for reducible discogenic pain: A pre-planned secondary analysis of a randomised controlled trial. Manual therapy Sep 2016;25():69-80	Ineligible study design (secondary data analysis)
246	Calder S; Ward R; Jones M; Johnston J; Claessen M The uses of outcome measures within multidisciplinary early childhood intervention services: a systematic review. Disabil Rehabil Nov 2018;40(22):2599-2622	Ineligible study design (systematic review)
247	Zhu Y.; Zhou C.; Liu Y.; Liu J.; Jin J.; Zhang S.; Bai Y.; Huang D.; Zhu B.; Xu Y.; Wu Y. Effects of modified constraint-induced movement therapy on the lower extremities in patients with stroke: a pilot study. Disability and rehabilitation 09 2016;38(19):1893-9	Ineligible study design (pilot study)
248	Ogawa T.; Omon K.; Yuda T.; Ishigaki T.; Imai R.; Ohmatsu S.; Morioka S. Short-term effects of goal-setting focusing on the life goal concept on subjective well-being and treatment engagement in subacute inpatients: a quasi-randomized controlled trial. Clinical rehabilitation Sep 2016;30(9):909-20	Ineligible study design (quasi-randomized trial)

249	Holtmaat K; van der Spek N; Lissenberg-Witte BI; Cuijpers P; Verdonck-de Leeuw IM Positive mental health among cancer survivors: overlap in psychological well-being, personal meaning, and posttraumatic growth. Support Care Cancer Feb 2019;27(2):443-450	Ineligible study design (sub-study from RCT)
250	Peng L; Ye X; Zhou Y; Zhang J; Zhao Q Meta-analysis of incidence and risk of peripheral neuropathy associated with intravenous bortezomib. Support Care Cancer Sep 2015;23(9):2813-24	Ineligible study design (Meta-analysis)
251	Johns SA.; Brown LF.; Beck-Coon K.; Talib TL.; Monahan PO.; Giesler RB.; Tong Y.; Wilhelm L.; Carpenter JS.; Von Ah D.; Wagner CD.; de Groot M.; Schmidt K.; Monceski D.; Danh M.; Alyea JM.; Miller KD.; Kroenke K. Randomized controlled pilot trial of mindfulness-based stress reduction compared to psychoeducational support for persistently fatigued breast and colorectal cancer survivors. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 10 2016;24(10):4085-96	Ineligible study design (pilot RCT)
252	Wasser JG; Vasilopoulos T; Zdziarski LA; Vincent HK Exercise Benefits for Chronic Low Back Pain in Overweight and Obese Individuals. PM R Feb 2017;9(2):181-192	Ineligible study design (review paper)
253	Mortenson P.; Singhal A.; Hengel AR.; Purtzki J. Impact of Early Follow-Up Intervention on Parent-Reported Postconcussion Pediatric Symptoms: A Feasibility Study. The Journal of head trauma rehabilitation ;31(6):E23-E32	Ineligible study design (feasibility study)
254	Kaneoka A; Pisegna JM; Saito H; Lo M; Felling K; Haga N; LaValley MP; Langmore SE A systematic review and meta-analysis of pneumonia associated with thin liquid vs. thickened liquid intake in patients who aspirate. Clin Rehabil Aug 2017;31(8):1116-1125	Ineligible study design (systematic review and meta-analysis)
255	de Vasconcelos GS; Cini A; Sbruzzi G; Lima CS Effects of proprioceptive training on the incidence of ankle sprain in athletes: systematic review and meta-analysis. Clin Rehabil Dec 2018;32(12):1581-1590	Ineligible study design (systematic review and meta-analysis)
256	McDonnell MN; Rischbieth B; Schammer TT; Seaforth C; Shaw AJ; Phillips AC Lee Silverman Voice Treatment (LSVT)-BIG to improve motor function in people with Parkinson's disease: a systematic review and meta-analysis. Clin Rehabil May 2018;32(5):607-618	Ineligible study design (systematic review and meta-analysis)
257	Alber R.; Moser H.; Gall C.; Sabel BA. Combined Transcranial Direct Current Stimulation and Vision Restoration Training in Subacute Stroke Rehabilitation: A Pilot Study.	Ineligible study design (pilot study)

	PM & R : the journal of injury, function, and rehabilitation Aug 2017;9(8):787-794	
258	de Campos TF.; Maher CG.; Clare HA.; da Silva TM.; Hancock MJ. Effectiveness of McKenzie Method-Based Self-Management Approach for the Secondary Prevention of a Recurrence of Low Back Pain (SAFE Trial): Protocol for a Pragmatic Randomized Controlled Trial. Physical therapy Aug 2017;97(8):799-806	Ineligible study design (RCT protocol)
259	Volovat C.; Bondarenko I.; Gladkov O.; Buchner A.; Lammerich A.; Müller U.; Bias P. Efficacy and safety of lipegfilgrastim compared with placebo in patients with non-small cell lung cancer receiving chemotherapy: post hoc analysis of elderly versus younger patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 12 2016;24(12):4913-4920	Ineligible study design (post hoc analysis)
260	Guinan EM; Doyle SL; O'Neill L; Dunne MR; Foley EK; O'Sullivan J; Reynolds JV; Hussey J Effects of a multimodal rehabilitation programme on inflammation and oxidative stress in oesophageal cancer survivors: the ReStOre feasibility study. Support Care Cancer Mar 2017;25(3):749-756	Ineligible study design (feasibility study)
261	Abbott JH 2016 JOSPT Awards: Additive Effects and Biological Mechanisms of Interventions Offer Important Insights. J Orthop Sports Phys Ther Apr 2017;47(4):225-227	Ineligible study design (editorial)
262	Meehan K; Wassinger C; Roy JS; Sole G Seven Key Themes in Physical Therapy Advice for Patients Living With Subacromial Shoulder Pain: A Scoping Review. J Orthop Sports Phys Ther Jun 2020;50(6):285-a12	Ineligible study design (Scoping review)
263	Behn N; Francis J; Togher L; Hatch E; Moss B; Hilari K Description and Effectiveness of Communication Partner Training in TBI: A Systematic Review. J Head Trauma Rehabil May 2020;():	Ineligible study design (Systematic review)
264	Mestre S.; Calais C.; Gaillard G.; Nou M.; Pasqualini M.; Ben Amor C.; Quere I. Interest of an auto-adjustable nighttime compression sleeve (MOBIDERM® Autofit) in maintenance phase of upper limb lymphedema: the MARILYN pilot RCT. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2017;25(8):2455-2462	Ineligible study design (pilot RCT)
265	Simoneau TL.; Kilbourn K.; Spradley J.; Laudenslager ML. An evidence-based stress management intervention for allogeneic hematopoietic stem cell transplant caregivers: development, feasibility and acceptability. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2017;25(8):2515-2523	Ineligible study design (feasibility study)

266	Hurd C.; Livingstone D.; Brunton K.; Teves M.; Zewdie E.; Smith A.; Ciechanski P.; Gorassini MA.; Kirton A.; Watt MJ.; Andersen J.; Yager J.; Yang JF. Early Intensive Leg Training to Enhance Walking in Children With Perinatal Stroke: Protocol for a Randomized Controlled Trial. Physical therapy Aug 2017;97(8):818-825	Ineligible study design (RCT protocol)
267	Zhao R; Zhang M; Zhang Q The Effectiveness of Combined Exercise Interventions for Preventing Postmenopausal Bone Loss: A Systematic Review and Meta-analysis. J Orthop Sports Phys Ther Apr 2017;47(4):241-251	Ineligible study design (Systematic review and meta-analysis)
268	Georgiadis K; Laskaris N; Nikolopoulos S; Kompatsiaris I Exploiting the heightened phase synchrony in patients with neuromuscular disease for the establishment of efficient motor imagery BCIs. J Neuroeng Rehabil Oct 2018;15(1):90	Ineligible study design (not an RCT)
269	Schloss JM.; Colosimo M.; Airey C.; Masci P.; Linnane AW.; Vitetta L. A randomised, placebo-controlled trial assessing the efficacy of an oral B group vitamin in preventing the development of chemotherapy-induced peripheral neuropathy (CIPN). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 01 2017;25(1):195-204	Ineligible study design (pilot RCT)
270	Wade SL.; Cassedy AE.; Fulks LE.; Taylor HG.; Stancin T.; Kirkwood MW.; Yeates KO.; Kurowski BG. Problem-Solving After Traumatic Brain Injury in Adolescence: Associations With Functional Outcomes. Archives of physical medicine and rehabilitation 08 2017;98(8):1614-1621	Ineligible study design (Cross-sectional study)
271	Fernández-González P; Carratalá-Tejada M; Monge-Pereira E; Collado-Vázquez S; Sánchez-Herrera Baeza P; Cuesta-Gómez A; Oña-Simbaña ED; Jardón-Huete A; Molina-Rueda F; Balaguer-Bernaldo de Quirós C; Miangolarra-Page JC; Cano-de la Cuerda R Leap motion controlled video game-based therapy for upper limb rehabilitation in patients with Parkinson's disease: a feasibility study. J Neuroeng Rehabil Nov 2019;16(1):133	Ineligible study design (feasibility study)
272	das Nair R.; Kontou E.; Smale K.; Barker A.; Lincoln NB. Comparing individual and group intervention for psychological adjustment in people with multiple sclerosis: a feasibility randomised controlled trial. Clinical rehabilitation Dec 2016;30(12):1156-1164	Ineligible study design (feasibility study)
273	Volpe D.; Giantin MG.; Manuela P.; Filippetto C.; Pelosin E.; Abbruzzese G.; Antonini A. Water-based vs. non-water-based physiotherapy for rehabilitation of postural deformities in Parkinson's disease: a randomized controlled pilot study. Clinical rehabilitation Aug 2017;31(8):1107-1115	Ineligible study design (pilot study)

274	Park HJ.; Oh DW.; Choi JD.; Kim JM.; Kim SY.; Cha YJ.; Jeon SJ. Action observation training of community ambulation for improving walking ability of patients with post-stroke hemiparesis: a randomized controlled pilot trial. Clinical rehabilitation Aug 2017;31(8):1078-1086	Ineligible study design (pilot study)
275	Garcia-Agundez A; Folkerts AK; Konrad R; Caserman P; Tregel T; Goosses M; Göbel S; Kalbe E Recent advances in rehabilitation for Parkinson's Disease with Exergames: A Systematic Review. J Neuroeng Rehabil Jan 2019;16(1):17	Ineligible study design (Systematic review)
276	Krebber AH.; van Uden-Kraan CF.; Melissant HC.; Cuijpers P.; van Straten A.; Becker-Commissaris A.; Leemans CR.; Verdonck-de Leeuw IM. A guided self-help intervention targeting psychological distress among head and neck cancer and lung cancer patients: motivation to start, experiences and perceived outcomes. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 01 2017;25(1):127-135	Ineligible study design (qualitative study)
277	Tomita Y; Mullick AA; Levin MF Reduced Kinematic Redundancy and Motor Equivalence During Whole-Body Reaching in Individuals With Chronic Stroke. Neurorehabil Neural Repair Feb 2018;32(2):175-186	Ineligible study design (not an RCT)
278	Hasegawa K; Kasuga S; Takasaki K; Mizuno K; Liu M; Ushiba J Ipsilateral EEG mu rhythm reflects the excitability of uncrossed pathways projecting to shoulder muscles. J Neuroeng Rehabil Aug 2017;14(1):85	Ineligible study design (not an RCT)
279	Chung YL.; Pui NNM. Confounding factors associated with oral mucositis assessment in patients receiving chemoradiotherapy for head and neck cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2017;25(9):2743-2751	Ineligible study design (post hoc analysis)
280	Haro-Martínez AM.; Lubrini G.; Madero-Jarabo R.; Díez-Tejedor E.; Fuentes B. Melodic intonation therapy in post-stroke nonfluent aphasia: a randomized pilot trial. Clinical rehabilitation Jan 2019;33(1):44-53	Ineligible study design (pilot trial)
281	Joseph C.; Brodin N.; Leavy B.; Hagströmer M.; Löfgren N.; Franzén E. Cost-effectiveness of the HiBalance training program for elderly with Parkinson's disease: analysis of data from a randomized controlled trial. Clinical rehabilitation Feb 2019;33(2):222-232	Ineligible study design (economic evaluation)
282	Kurowski BG.; Hugentobler J.; Quatman-Yates C.; Taylor J.; Gubanich PJ.; Altaye M.; Wade SL.	Ineligible study design (pilot RCT)

	Aerobic Exercise for Adolescents With Prolonged Symptoms After Mild Traumatic Brain Injury: An Exploratory Randomized Clinical Trial. The Journal of head trauma rehabilitation ;32(2):79-89	
283	Bayraktar D.; Guclu-Gunduz A.; Lambeck J.; Yazici G.; Aykol S.; Demirci H. A comparison of water-based and land-based core stability exercises in patients with lumbar disc herniation: a pilot study. Disability and rehabilitation 2016;38(12):1163-71	Ineligible study design (pilot study)
284	Ogollah R.; Bishop A.; Lewis M.; Grotle M.; Foster NE. Responsiveness and Minimal Important Change for Pain and Disability Outcome Measures in Pregnancy-Related Low Back and Pelvic Girdle Pain. Physical therapy 11 2019;99(11):1551-1561	Ineligible study design (measurement study)
285	Loprinzi C.; Le-Rademacher JG.; Majithia N.; McMurray RP.; O'Neill CR.; Bendel MA.; Beutler A.; Lachance DH.; Cheville A.; Strick DM.; Black DF.; Tilburt JC.; Smith TJ. Scrambler therapy for chemotherapy neuropathy: a randomized phase II pilot trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1183-1197	Ineligible study design (pilot trial)
286	Vieira ER.; Brunt D. Does wearing unstable shoes reduce low back pain and disability in nurses? A randomized controlled pilot study. Clinical rehabilitation Feb 2016;30(2):167-73	Ineligible study design (pilot study)
287	Markovic M; Schweisfurth MA; Engels LF; Farina D; Dosen S Myocontrol is closed-loop control: incidental feedback is sufficient for scaling the prosthesis force in routine grasping. J Neuroeng Rehabil Sep 2018;15(1):81	Ineligible study design (not an RCT)
288	Wilke MA; Niethammer C; Meyer B; Farina D; Dosen S Psychometric characterization of incidental feedback sources during grasping with a hand prosthesis. J Neuroeng Rehabil Dec 2019;16(1):155	Ineligible study design (measurement study)
289	Kim SY; Yang L; Park IJ; Kim EJ; Park MS; You SH; Kim YH; Ko HY; Shin YI Correction to "Effects of Innovative WALKBOT Robotic-Assisted Locomotor Training on Balance and Gait Recovery in Hemiparetic Stroke: A Prospective, Randomized, Experimenter Blinded Case Control Study With a Four-Week Follow-Up". IEEE Trans Neural Syst Rehabil Eng Nov 2015;23(6):1128	Ineligible study design (Correction, but original RCT included, Correction info considered)
290	Ehde DM.; Arewasikporn A.; Alschuler KN.; Hughes AJ.; Turner AP. Moderators of Treatment Outcomes After Telehealth Self-Management and Education in Adults With Multiple Sclerosis: A Secondary Analysis of a Randomized Controlled Trial. Archives of physical medicine and rehabilitation 07 2018;99(7):1265-1272	Ineligible study design (Secondary data analysis)

291	Alenazi AM.; Alshehri MM.; Alothman S.; Rucker J.; Dunning K.; D'Silva LJ.; Kluding PM. Functional Reach, Depression Scores, and Number of Medications Are Associated With Number of Falls in People With Chronic Stroke. PM & R : the journal of injury, function, and rehabilitation 08 2018;10(8):806-816	Ineligible study design (Secondary data analysis)
292	Nguyen S.; McKenzie D.; McKay A.; Wong D.; Rajaratnam SMW.; Spitz G.; Williams G.; Mansfield D.; Ponsford J. Exploring predictors of treatment outcome in cognitive behavior therapy for sleep disturbance following acquired brain injury. Disability and rehabilitation Aug 2018;40(16):1906-1913	Ineligible study design (data from pilot RCTs)
293	Jones KM.; Bhattacharjee R.; Krishnamurthi R.; Blanton S.; Barker-Collo S.; Theadom A.; Thrift AG.; Wolf SL.; Venketasubramanian N.; Parmar P.; Maujean A.; Ranta A.; Cadilhac D.; Sanya EO.; MacKay-Lyons M.; Pandian JD.; Arora D.; Obiako RO.; Saposnik G.; Balalla S.; Bornstein NM.; Langhorne P.; Norrving B.; Brown N.; Brainin M.; Taylor D.; Feigin VL. Determining the feasibility and preliminary efficacy of a stroke instructional and educational DVD in a multinational context: a randomized controlled pilot study. Clinical rehabilitation Aug 2018;32(8):1086-1097	Ineligible study design (pilot RCT)
294	Lee SH.; Lee JY.; Kim MY.; Jeon YJ.; Kim S.; Shin JH. Virtual Reality Rehabilitation With Functional Electrical Stimulation Improves Upper Extremity Function in Patients With Chronic Stroke: A Pilot Randomized Controlled Study. Archives of physical medicine and rehabilitation 08 2018;99(8):1447-1453.e1	Ineligible study design (pilot RCT)
295	Suri P.; Delaney K.; Rundell SD.; Cherkin DC. Predictive Validity of the STarT Back Tool for Risk of Persistent Disabling Back Pain in a U.S. Primary Care Setting. Archives of physical medicine and rehabilitation 08 2018;99(8):1533-1539.e2	Ineligible study design (Secondary data analysis)
296	Trevena-Peters J.; Ponsford J.; McKay A. Agitated Behavior and Activities of Daily Living Retraining During Posttraumatic Amnesia. The Journal of head trauma rehabilitation ;33(5):317-325	Ineligible study design (Secondary data analysis)
297	Griffiths C.; Kwon N.; Beaumont JL.; Paice JA. Cold therapy to prevent paclitaxel-induced peripheral neuropathy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2018;26(10):3461-3469	Ineligible study design (not a parallel group RCT)
298	Ormel HL.; van der Schoot GGF.; Westerink NL.; Sluiter WJ.; Gietema JA.; Walenkamp AME. Self-monitoring physical activity with a smartphone application in cancer patients: a randomized feasibility study (SMART-trial). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2018;26(11):3915-3923	Ineligible study design (feasibility study)

299	Lubetzky AV.; Hujsak BD.; Kelly JL.; Fu G.; Perlin K. Control Mechanisms of Static and Dynamic Balance in Adults With and Without Vestibular Dysfunction in Oculus Virtual Environments. PM & R : the journal of injury, function, and rehabilitation Nov 2018;10(11):1223-1236.e2 2018 Nov	Ineligible study design (feasibility study)
300	Christiansen CL.; Miller MJ.; Murray AM.; Stephenson RO.; Stevens-Lapsley JE.; Hiatt WR.; Schenkman ML. Behavior-Change Intervention Targeting Physical Function, Walking, and Disability After Dysvascular Amputation: A Randomized Controlled Pilot Trial. Archives of physical medicine and rehabilitation 11 2018;99(11):2160-2167	Ineligible study design (pilot trial)
301	Hawley L.; Gerber D.; Morey C. Improving personal self-advocacy skills for individuals with brain injury: A randomized pilot feasibility study. Brain injury 2017;31(3):290-296	Ineligible study design (feasibility study)
302	Stein E.; Howard W.; Rowhani-Rahbar A.; Rivara FP.; Zatzick D.; McCarty CA. Longitudinal trajectories of post-concussive and depressive symptoms in adolescents with prolonged recovery from concussion. Brain injury 2017;31(13-14):1736-1744	Ineligible study design (Secondary data analysis)
303	Liu JYW.; Kwan RYC.; Lai CK.; Hill KD. A simplified 10-step Tai-chi programme to enable people with dementia to improve their motor performance: a feasibility study. Clinical rehabilitation Dec 2018;32(12):1609-1623	Ineligible study design (feasibility study)
304	Lin LL.; Li YT.; Tu JF.; Yang JW.; Sun N.; Zhang S.; Wang TQ.; Shi GX.; Du Y.; Zhao JJ.; Xiong DC.; Hou HK.; Liu CZ. Effectiveness and feasibility of acupuncture for knee osteoarthritis: a pilot randomized controlled trial. Clinical rehabilitation Dec 2018;32(12):1666-1675	Ineligible study design (pilot RCT)
305	Schranz C.; Kruse A.; Belohlavek T.; Steinwender G.; Tilp M.; Pieber T.; Svehlik M. Does Home-Based Progressive Resistance or High-Intensity Circuit Training Improve Strength, Function, Activity or Participation in Children With Cerebral Palsy? Archives of physical medicine and rehabilitation 12 2018;99(12):2457-2464.e4	Ineligible study design (pilot RCT)
306	Wiegersma M.; Panman CMCR.; Hesselink LC.; Malmberg AGA.; Berger MY.; Kollen BJ.; Dekker JH. Predictors of Success for Pelvic Floor Muscle Training in Pelvic Organ Prolapse. Physical therapy 01 2019;99(1):109-117	Ineligible study design (secondary data analysis)
307	Gunnes M.; Langhammer B.; Aamot IL.; Lydersen S.; Ihle-Hansen H.; Indredavik B.; Reneflot KH.; Schroeter W.; Askim T.; .	Ineligible study design (prospective, longitudinal study)

	Adherence to a Long-Term Physical Activity and Exercise Program After Stroke Applied in a Randomized Controlled Trial. Physical therapy 01 2019;99(1):74-85	
308	Morris JH.; Kelly C.; Joice S.; Kroll T.; Mead G.; Donnan P.; Toma M.; Williams B. Art participation for psychosocial wellbeing during stroke rehabilitation: a feasibility randomised controlled trial. Disability and rehabilitation 01 2019;41(1):9-18	Ineligible study design (feasibility RCT)
309	Monjezi S.; Negahban H.; Tajali S.; Yadollahpour N.; Majdinasab N. Effects of dual-task balance training on postural performance in patients with Multiple Sclerosis: a double-blind, randomized controlled pilot trial. Clinical rehabilitation Feb 2017;31(2):234-241	Ineligible study design (pilot RCT)
310	Matchar DB.; Eom K.; Duncan PW.; Lee M.; Sim R.; Sivapragasam NR.; Lien CT.; Ong MEH. A Cost-Effectiveness Analysis of a Randomized Control Trial of a Tailored, Multifactorial Program to Prevent Falls Among the Community-Dwelling Elderly. Archives of physical medicine and rehabilitation 01 2019;100(1):1-8	Ineligible study design (Cost-effectiveness analysis)
311	Rocha S.; Silva E.; Foerster Á.; Wiesiolek C.; Chagas AP.; Machado G.; Baltar A.; Monte-Silva K. The impact of transcranial direct current stimulation (tDCS) combined with modified constraint-induced movement therapy (mCIMT) on upper limb function in chronic stroke: a double-blind randomized controlled trial. Disability and rehabilitation 2016;38(7):653-60	Ineligible study design (pilot RCT)
312	Giesbrecht EM.; Miller WC. Effect of an mHealth Wheelchair Skills Training Program for Older Adults: A Feasibility Randomized Controlled Trial. Archives of physical medicine and rehabilitation 11 2019;100(11):2159-2166 2019 11	Ineligible study design (feasibility RCT)
313	Shinde SS.; Seisler D.; Soori G.; Atherton PJ.; Pachman DR.; Lafky J.; Ruddy KJ.; Loprinzi CL. Can pregabalin prevent paclitaxel-associated neuropathy?--An ACCRU pilot trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):547-553	Ineligible study design (pilot RCT)
314	Tanaka Y.; Takahashi T.; Yamaguchi K.; Osada S.; Shimokawa T.; Yoshida K. Elemental diet plus glutamine for the prevention of mucositis in esophageal cancer patients receiving chemotherapy: a feasibility study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):933-941	Ineligible study design (feasibility study)
315	English C.; Healy GN.; Olds T.; Parfitt G.; Borkoles E.; Coates A.; Kramer S.; Bernhardt J.	Ineligible study design

	Reducing Sitting Time After Stroke: A Phase II Safety and Feasibility Randomized Controlled Trial. Archives of physical medicine and rehabilitation Feb 2016;97(2):273-80	(feasibility RCT)
316	Odin A.; Faletto-Passy D.; Assaban F.; Pérennou D. Modulating the internal model of verticality by virtual reality and body-weight support walking: A pilot study. Annals of physical and rehabilitation medicine Sep 2018;61(5):292-299	Ineligible study design (pilot study)
317	Tang CC.; Draucker C.; Tejani MA.; Von Ah D. Patterns of interactions among patients with advanced pancreatic cancer, their caregivers, and healthcare providers during symptom discussions. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2018;26(10):3497-3506	Ineligible study design (qualitative study)
318	Haas R.; O'Brien L.; Bowles KA.; Haines T. Effectiveness of a weekend physiotherapy service on short-term outcomes following hip and knee joint replacement surgery: a quasi-experimental study. Clinical rehabilitation Nov 2018;32(11):1493-1508	Ineligible study design (quasiexperimental/ secondary, subgroup analysis)
319	Rawstorn JC.; Gant N.; Rolleston A.; Whittaker R.; Stewart R.; Benatar J.; Warren I.; Meads A.; Jiang Y.; Maddison R. End Users Want Alternative Intervention Delivery Models: Usability and Acceptability of the REMOTE-CR Exercise-Based Cardiac Telerehabilitation Program. Archives of physical medicine and rehabilitation 11 2018;99(11):2373-2377	Ineligible study design (Secondary data analysis)
320	Hart T.; Vaccaro MJ. Goal intention reminding in traumatic brain injury: A feasibility study using implementation intentions and text messaging. Brain injury 2017;31(3):297-303	Ineligible study design (pilot/feasibility RCT)
321	Malfliet A.; Kregel J.; Meeus M.; Danneels L.; Cagnie B.; Roussel N.; Nijs J. Patients With Chronic Spinal Pain Benefit From Pain Neuroscience Education Regardless the Self-Reported Signs of Central Sensitization: Secondary Analysis of a Randomized Controlled Multicenter Trial. PM & R : the journal of injury, function, and rehabilitation Dec 2018;10(12):1330-1343.e1	Ineligible study design (Secondary data analysis)
322	Son SJ.; Kim H.; Seeley MK.; Hopkins JT. Efficacy of Sensory Transcutaneous Electrical Nerve Stimulation on Perceived Pain and Gait Patterns in Individuals With Experimental Knee Pain. Archives of physical medicine and rehabilitation 01 2017;98(1):25-35	Ineligible study design (Crossover,laboratory)
323	Guo YH.; Kuan TS.; Chen KL.; Lien WC.; Hsieh PC.; Hsieh IC.; Chiu SH.; Lin YC. Comparison Between Steroid and 2 Different Sites of Botulinum Toxin Injection in the Treatment of Lateral Epicondylalgia: A Randomized, Double-Blind, Active Drug-Controlled Pilot Study.	Ineligible study design (Pilot study)

	Archives of physical medicine and rehabilitation 01 2017;98(1):36-42	
324	Ben-Ami N.; Chodick G.; Mirovsky Y.; Pincus T.; Shapiro Y. Increasing Recreational Physical Activity in Patients With Chronic Low Back Pain: A Pragmatic Controlled Clinical Trial. The Journal of orthopaedic and sports physical therapy Feb 2017;47(2):57-66	Ineligible study design (non-randomized controlled clinical trial)
325	Kline PW.; Melanson EL.; Sullivan WJ.; Blatchford PJ.; Miller MJ.; Stevens-Lapsley JE.; Christiansen CL. Improving Physical Activity Through Adjunct Telerehabilitation Following Total Knee Arthroplasty: Randomized Controlled Trial Protocol. Physical therapy 01 2019;99(1):37-45	Ineligible study design (RCT protocol)
326	Hearn JH.; Cotter I.; Finlay KA. Efficacy of Internet-Delivered Mindfulness for Improving Depression in Caregivers of People With Spinal Cord Injuries and Chronic Neuropathic Pain: A Randomized Controlled Feasibility Trial. Archives of physical medicine and rehabilitation 01 2019;100(1):17-25	Ineligible study design (feasibility trial)
327	Ellis TD.; Cavanaugh JT.; DeAngelis T.; Hendron K.; Thomas CA.; Saint-Hilaire M.; Pencina K.; Latham NK. Comparative Effectiveness of mHealth-Supported Exercise Compared With Exercise Alone for People With Parkinson Disease: Randomized Controlled Pilot Study. Physical therapy 02 2019;99(2):203-216	Ineligible study design (Pilot study)
328	Sands S.; Ladas EJ.; Kelly KM.; Weiner M.; Lin M.; Ndao DH.; Dave A.; Vahdat LT.; Bender JG. Glutamine for the treatment of vincristine-induced neuropathy in children and adolescents with cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 03 2017;25(3):701-708	Ineligible study design (longitudinal observation study)
329	Magel J.; Fritz JM.; Greene T.; Kjaer P.; Marcus RL.; Brennan GP. Outcomes of Patients With Acute Low Back Pain Stratified by the STarT Back Screening Tool: Secondary Analysis of a Randomized Trial. Physical therapy 03 2017;97(3):330-337	Ineligible study design (Secondary data analysis)
330	Waddell KJ.; Strube MJ.; Bailey RR.; Klaesner JW.; Birkenmeier RL.; Dromerick AW.; Lang CE. Does Task-Specific Training Improve Upper Limb Performance in Daily Life Poststroke? Neurorehabilitation and neural repair 03 2017;31(3):290-300	Ineligible study design (Secondary data analysis)
331	Sweity S.; Finlay A.; Lees C.; Monk A.; Sherpa T.; Wade D. SleepSure: a pilot randomized-controlled trial to assess the effects of eye masks and earplugs on the quality of sleep for patients in hospital. Clinical rehabilitation Feb 2019;33(2):253-261	Ineligible study design (pilot RCT)

332	Standen PJ.; Threapleton K.; Richardson A.; Connell L.; Brown DJ.; Battersby S.; Platts F.; Burton A. A low cost virtual reality system for home based rehabilitation of the arm following stroke: a randomised controlled feasibility trial. Clinical rehabilitation Mar 2017;31(3):340-350	Ineligible study design (feasibility trial)
333	Porter LS.; Carson JW.; Olsen M.; Carson KM.; Sanders L.; Jones L.; Westbrook K.; Keefe FJ. Feasibility of a mindful yoga program for women with metastatic breast cancer: results of a randomized pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2019;27(11):4307-4316	Ineligible study design (pilot study)
334	Brunner E.; Probst M.; Meichtry A.; Luomajoki H.; Dankaerts W. Comparison of clinical vignettes and standardized patients as measures of physiotherapists' activity and work recommendations in patients with non-specific low back pain. Clinical rehabilitation Jan 2016;30(1):85-94	Ineligible study design (Validation study)
335	Zhang AY.; Ganocy S.; Fu AZ.; Kresevic D.; Ponsky L.; Strauss G.; Bodner DR.; Zhu H. Mood outcomes of a behavioral treatment for urinary incontinence in prostate cancer survivors. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Dec 2019;27(12):4461-4467	Ineligible study design (secondary data analysis)
336	Jansen F.; Lissenberg-Witte BI.; Krebber AMH.; Cuijpers P.; de Bree R.; Becker-Commissaris A.; Smit EF.; van Straten A.; Eeckhout GM.; Beekman ATF.; Leemans CR.; Verdonck-de Leeuw IM. Stepped care targeting psychological distress in head and neck cancer and lung cancer patients: which groups specifically benefit? Secondary analyses of a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Dec 2019;27(12):4543-4553	Ineligible study design (secondary data analysis)
337	Lambert SD.; McElduff P.; Girgis A.; Levesque JV.; Regan TW.; Turner J.; Candler H.; Mihalopoulos C.; Shih STF.; Kayser K.; Chong P. A pilot, multisite, randomized controlled trial of a self-directed coping skills training intervention for couples facing prostate cancer: accrual, retention, and data collection issues. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):711-722	Ineligible study design (pilot RCT)
338	Cherney LR. Epidural Cortical Stimulation as Adjunctive Treatment for Nonfluent Aphasia: Phase 1 Clinical Trial Follow-up Findings. Neurorehabilitation and neural repair Feb 2016;30(2):131-42	Ineligible study design (Phase 1 trials)
339	Villaron C.; Cury F.; Eisinger F.; Cappiello MA.; Marqueste T. Telehealth applied to physical activity during cancer treatment: a feasibility, acceptability, and randomized pilot study.	Ineligible study design (feasibility/pilot study)

	Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2018;26(10):3413-3421	
340	Straudi S.; Buja S.; Baroni A.; Pavarelli C.; Pranovi G.; Fregni F.; Basaglia N. The effects of transcranial direct current stimulation (tDCS) combined with group exercise treatment in subjects with chronic low back pain: a pilot randomized control trial. Clinical rehabilitation Oct 2018;32(10):1348-1356	Ineligible study design (pilot study)
341	Weinstein C.; Jordan K.; Green SA.; Camacho E.; Khanani S.; Beckford-Brathwaite E.; Pong A.; Noga SJ.; Rapoport BL. Evaluation of factors contributing to the response to fosaprepitant in a heterogeneous, moderately emetogenic chemotherapy population: an exploratory analysis of a randomized phase III trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2018;26(11):3773-3780	Ineligible study design (exploratory analysis)
342	Renaud MI.; van de Port IG.; Catsman-Berrevoets CE.; Bovens N.; Lambregts SA.; van Heugten CM. The Brains Ahead! intervention for children and adolescents with mild traumatic brain injury and their caregivers: rationale and description of the treatment protocol. Clinical rehabilitation Nov 2018;32(11):1440-1448	Ineligible study design (treatment protocol)
343	Baadjou V.; de Bie R.; Guptill C.; Smeets R. Psychometric properties of the performing arts module of the Disabilities of the Arm, Shoulder, and Hand questionnaire. Disability and rehabilitation 12 2018;40(24):2946-2952	Ineligible study design (secondary data analysis)
344	Roos M.; Roy JS. Effect of a rehabilitation program on performance-related musculoskeletal disorders in student and professional orchestral musicians: a randomized controlled trial. Clinical rehabilitation Dec 2018;32(12):1656-1665	Ineligible study design (pilot RCT)
345	Krch D.; Lequerica AH. The factor structure of the Disability Rating Scale in individuals with traumatic brain injury. Disability and rehabilitation 01 2019;41(1):98-103	Ineligible study design (data registry study)
346	Bergin ART.; Hovey E.; Lloyd A.; Marx G.; Parente P.; Rapke T.; de Souza P. Docetaxel-related fatigue in men with metastatic prostate cancer: a descriptive analysis. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2017;25(9):2871-2879	Ineligible study design (secondary data analysis)
347	Aminov A; Rogers JM; Middleton S; Caeyenberghs K; Wilson PH What do randomized controlled trials say about virtual rehabilitation in stroke? A systematic literature review and meta-analysis of upper-limb and cognitive outcomes. J Neuroeng Rehabil Mar 2018;15(1):29	Ineligible study design (systematic review and meta-analysis)

348	Loyd BJ.; Jennings JM.; Judd DL.; Kim RH.; Wolfe P.; Dennis DA.; Stevens-Lapsley JE. Influence of Hip Abductor Strength on Functional Outcomes Before and After Total Knee Arthroplasty: Post Hoc Analysis of a Randomized Controlled Trial. Physical therapy Sep 2017;97(9):896-903	Ineligible study design (Post hoc analysis)
349	Chisholm AE; Alamro RA; Williams AM; Lam T Overground vs. treadmill-based robotic gait training to improve seated balance in people with motor-complete spinal cord injury: a case report. J Neuroeng Rehabil Apr 2017;14(1):27	Ineligible study design (case report)
350	Shen X; Dutcher SK; Palmer J; Liu X; Kiptanui Z; Khokhar B; Al-Jawadi MH; Zhu Y; Zuckerman IH A Systematic Review of the Benefits and Risks of Anticoagulation Following Traumatic Brain Injury. J Head Trauma Rehabil Jul-Aug 2015;30(4):E29-37	Ineligible study design (Systematic review)
351	Kamper SJ Randomization: Linking Evidence to Practice. J Orthop Sports Phys Ther Sep 2018;48(9):730-731	Ineligible study design (evidence in practice/editorial)
352	Zwitter M Toxicity and quality of life in published clinical trials for advanced lung cancer. Support Care Cancer Oct 2018;26(10):3453-3459	Ineligible study design (sub-study of other RCT/review)
353	Darby J; Williamson T; Logan P; Gladman J Comprehensive geriatric assessment on an acute medical unit: a qualitative study of older people's and informal carer's perspectives of the care and treatment received. Clin Rehabil Jan 2017;31(1):126-134	Ineligible study design (qualitative/ constructivist epistemology study)
354	Bomyea J.; Lang AJ.; Schnurr PP. TBI and Treatment Response in a Randomized Trial of Acceptance and Commitment Therapy. The Journal of head trauma rehabilitation ;32(5):E35-E43	Ineligible study design (secondary data analysis)
355	Bombardier CH.; Fann JR.; Ludman EJ.; Vannoy SD.; Dyer JR.; Barber JK.; Temkin NR. The Relations of Cognitive, Behavioral, and Physical Activity Variables to Depression Severity in Traumatic Brain Injury: Reanalysis of Data From a Randomized Controlled Trial. The Journal of head trauma rehabilitation ;32(5):343-353	Ineligible study design (reanalysis of data from RCT)
356	Rafn BS.; Hung S.; Hoens AM.; McNeely ML.; Singh CA.; Kwan W.; Dingee C.; McKevitt EC.; Kuusk U.; Pao J.; Van Laeken N.; Goldsmith CH.; Campbell KL. Prospective surveillance and targeted physiotherapy for arm morbidity after breast cancer surgery: a pilot randomized controlled trial. Clinical rehabilitation Jun 2018;32(6):811-826	Ineligible study design (pilot RCT)
357	Skoffer B.; Dalgas U.; Maribo T.; Søballe K.; Mechlenburg I.	Ineligible study design (

	No Exacerbation of Knee Joint Pain and Effusion Following Preoperative Progressive Resistance Training in Patients Scheduled for Total Knee Arthroplasty: Secondary Analyses From a Randomized Controlled Trial. PM & R : the journal of injury, function, and rehabilitation 07 2018;10(7):687-692	Secondary data analyses)
358	Lee AC.; Harvey WF.; Price LL.; Han X.; Driban JB.; Iversen MD.; Desai SA.; Knopp HE.; Wang C. Dose-Response Effects of Tai Chi and Physical Therapy Exercise Interventions in Symptomatic Knee Osteoarthritis. PM & R : the journal of injury, function, and rehabilitation 07 2018;10(7):712-723	Ineligible study design (Secondary data analysis)
359	Christiansen MB.; Thoma LM.; Master H.; Schmitt LA.; Pohlig R.; White DK. A Physical Therapist-Administered Physical Activity Intervention After Total Knee Replacement: Protocol for a Randomized Controlled Trial. Physical therapy 07 2018;98(7):578-584	Ineligible study design (RCT protocol)
360	Séguin M.; Lahaie A.; Matte-Gagné C.; Beauchamp MH. Ready! Set? Let's Train!: Feasibility of an intensive attention training program and its beneficial effect after childhood traumatic brain injury. Annals of physical and rehabilitation medicine Jul 2018;61(4):189-196	Ineligible study design (feasibility study)
361	Tomei C.; Lebel S.; Maheu C.; Lefebvre M.; Harris C. Examining the preliminary efficacy of an intervention for fear of cancer recurrence in female cancer survivors: a randomized controlled clinical trial pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2018;26(8):2751-2762	Ineligible study design (pilot RCT)
362	Zhang A.; Ji Q.; Currin-McCulloch J.; Solomon P.; Chen Y.; Li Y.; Jones B.; Franklin C.; Nowicki J. The effectiveness of solution-focused brief therapy for psychological distress among Chinese parents of children with a cancer diagnosis: a pilot randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2018;26(8):2901-2910	Ineligible study design (pilot RCT)
363	Oh HM.; Park GY.; Choi YM.; Koo HJ.; Jang Y.; Im S. The Effects of Botulinum Toxin Injections on Plantar Flexor Spasticity in Different Phases After Stroke: A Secondary Analysis From a Double-Blind, Randomized Trial. PM & R : the journal of injury, function, and rehabilitation 08 2018;10(8):789-797	Ineligible study design (Secondary data analysis)
364	Mitchell C.; Bowen A.; Tyson S.; Conroy P. A feasibility randomized controlled trial of ReaDySpeech for people with dysarthria after stroke. Clinical rehabilitation Aug 2018;32(8):1037-1046	Ineligible study design (feasibility study)
365	Zeuner KE.; Knutzen A.; Kühl C.; Möller B.; Hellriegel H.; Margraf NG.; Deuschl G.; Stolze H.	Ineligible study design (pilot RCT)

	Functional impact of different muscle localization techniques for Botulinum neurotoxin A injections in clinical routine management of post-stroke spasticity. Brain injury 2017;31(1):75-82	
366	Werner C.; Rosner R.; Wiloth S.; Lemke NC.; Bauer JM.; Hauer K. Time course of changes in motor-cognitive exergame performances during task-specific training in patients with dementia: identification and predictors of early training response. Journal of neuroengineering and rehabilitation 11 2018;15(1):100	Ineligible study design (Secondary data analysis)
367	Gonzalez BD.; Manne SL.; Stapleton J.; Myers-Virtue S.; Ozga M.; Kissane D.; Heckman C.; Morgan M. Quality of life trajectories after diagnosis of gynecologic cancer: a theoretically based approach. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 02 2017;25(2):589-598	Ineligible study design (sub-study from larger RCT)
368	Nijenhuis SM.; Prange-Lasonder GB.; Stienen AH.; Rietman JS.; Buurke JH. Effects of training with a passive hand orthosis and games at home in chronic stroke: a pilot randomised controlled trial. Clinical rehabilitation Feb 2017;31(2):207-216	Ineligible study design (pilot RCT)
369	Hsieh YW.; Wu CY.; Wang WE.; Lin KC.; Chang KC.; Chen CC.; Liu CT. Bilateral robotic priming before task-oriented approach in subacute stroke rehabilitation: a pilot randomized controlled trial. Clinical rehabilitation Feb 2017;31(2):225-233	Ineligible study design (pilot RCT)
370	Lopes LCC.; Mota JF.; Prestes J.; Schincaglia RM.; Silva DM.; Queiroz NP.; Freitas ATVS.; Lira FS.; Peixoto MDRG. Intradialytic Resistance Training Improves Functional Capacity and Lean Mass Gain in Individuals on Hemodialysis: A Randomized Pilot Trial. Archives of physical medicine and rehabilitation 11 2019;100(11):2151-2158	Ineligible study design (pilot RCT)
371	Leppla L.; De Geest S.; Fierz K.; Deschler-Baier B.; Koller A. An oral care self-management support protocol (OrCaSS) to reduce oral mucositis in hospitalized patients with acute myeloid leukemia and allogeneic hematopoietic stem cell transplantation: a randomized controlled pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):773-782	Ineligible study design (pilot RCT)
372	Jacobs JV.; Lomond KV.; Hitt JR.; DeSarno MJ.; Bunn JY.; Henry SM. Effects of low back pain and of stabilization or movement-system-impairment treatments on induced postural responses: A planned secondary analysis of a randomised controlled trial. Manual therapy Feb 2016;21():210-9	Ineligible study design (Secondary data analysis)
373	O'Connor CM.; Clemson L.; Brodaty H.; Low LF.; Jeon YH.; Gitlin LN.; Piguet O.; Mioshi E. The tailored activity program (TAP) to address behavioral disturbances in frontotemporal	Ineligible study design (feasibility and pilot study)

	dementia: a feasibility and pilot study. Disability and rehabilitation 02 2019;41(3):299-310	
374	Wilson CS.; Forchheimer M.; Heinemann AW.; Warren AM.; McCullumsmith C. Assessment of the relationship of spiritual well-being to depression and quality of life for persons with spinal cord injury. Disability and rehabilitation 03 2017;39(5):491-496	Ineligible study design (sub-study from RCT)
375	Zhang H.; Li H.; Li R.; Xu G.; Li Z. Therapeutic effect of gradual attention training on language function in patients with post-stroke aphasia: a pilot study. Clinical rehabilitation Nov 2019;33(11):1767-1774	Ineligible study design (pilot RCT)
376	Judd DL.; Cheuy VA.; Forster JE.; Christiansen CL.; Stevens-Lapsley JE. Incorporating Specific Functional Strength Integration Techniques to Improve Functional Performance for Veterans After Total Hip Arthroplasty: Protocol for a Randomized Clinical Trial. Physical therapy 11 2019;99(11):1453-1460	Ineligible study design (RCT protocol)
377	Best KL.; Miller WC.; Huston G.; Routhier F.; Eng JJ. Pilot Study of a Peer-Led Wheelchair Training Program to Improve Self-Efficacy Using a Manual Wheelchair: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation Jan 2016;97(1):37-44	Ineligible study design (pilot RCT)
378	Fletcher-Smith JC.; Walker DM.; Allatt K.; Sprigg N.; James M.; Ratib S.; Boadu J.; Richardson C.; Pandyan AD. The ESCAPS study: a feasibility randomized controlled trial of early electrical stimulation to the wrist extensors and flexors to prevent post-stroke complications of pain and contractures in the paretic arm. Clinical rehabilitation Dec 2019;33(12):1919-1930	Ineligible study design (feasibility trial)
379	Gunnes M.; Indredavik B.; Langhammer B.; Lydersen S.; Ihle-Hansen H.; Dahl AE.; Askim T.; . Associations Between Adherence to the Physical Activity and Exercise Program Applied in the LAST Study and Functional Recovery After Stroke. Archives of physical medicine and rehabilitation 12 2019;100(12):2251-2259	Ineligible study design (Secondary data analysis)
380	Bryant AL.; Coffman E.; Phillips B.; Tan X.; Bullard E.; Hirschey R.; Bradley J.; Bennett AV.; Stover AM.; Song L.; Shea TC.; Wood WA. Pilot randomized trial of an electronic symptom monitoring and reporting intervention for hospitalized adults undergoing hematopoietic stem cell transplantation. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1223-1231	Ineligible study design (pilot RCT)
381	Jepson P.; Sands G.; Beswick AD.; Davis ET.; Blom AW.; Sackley CM. A feasibility randomised controlled trial of pre-operative occupational therapy to optimise	Ineligible study design (feasibility trial)

	recovery for patients undergoing primary total hip replacement for osteoarthritis (PROOF-THR). Clinical rehabilitation Feb 2016;30(2):156-66	
382	González-Fraile E; Martín-Carrasco M; Ballesteros J Efficacy of MLC601 on functional recovery after stroke: A systematic review and meta-analysis of randomized controlled trials. Brain Inj 2016;30(3):267-70	Ineligible study design (systematic review and meta-analysis)
383	Cameron JI.; Naglie G.; Green TL.; Gignac MA.; Bayley M.; Huijbregts M.; Silver FL.; Czerwonka A. A feasibility and pilot randomized controlled trial of the "Timing it Right Stroke Family Support Program". Clinical rehabilitation Nov 2015;29(11):1129-40	Ineligible study design (feasibility and pilot trial)
384	Hughes AJ.; Hartoonian N.; Parmenter B.; Haselkorn JK.; Lovera JF.; Bourdette D.; Turner AP. Cognitive Impairment and Community Integration Outcomes in Individuals Living With Multiple Sclerosis. Archives of physical medicine and rehabilitation Nov 2015;96(11):1973-9	Ineligible study design (Cross-sectional data)
385	Brown JD.; Paek A.; Syed M.; O'Malley MK.; Shewokis PA.; Contreras-Vidal JL.; Davis AJ.; Gillespie RB. An exploration of grip force regulation with a low-impedance myoelectric prosthesis featuring referred haptic feedback. Journal of neuroengineering and rehabilitation Nov 2015;12():104	Ineligible study design (laboratory study)
386	Bondarenko IM.; Bias P.; Buchner A. Incidence of bone pain in patients with breast cancer treated with lipegfilgrastim or pegfilgrastim: an integrated analysis from phase II and III studies. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2016;24(1):267-273	Ineligible study design (post hoc analysis)
387	Callaghan MJ.; Parkes MJ.; Felson DT. The Effect of Knee Braces on Quadriceps Strength and Inhibition in Subjects With Patellofemoral Osteoarthritis. The Journal of orthopaedic and sports physical therapy Jan 2016;46(1):19-25	Ineligible study design (sub-study from RCT)
388	Wyatt G.; Sikorskii A.; Tesnjak I.; Victorson D.; Srkalovic G. Chemotherapy interruptions in relation to symptom severity in advanced breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2015;23(11):3183-91	Ineligible study design (secondary data analysis)
389	Yorke J.; Lloyd-Williams M.; Smith J.; Blackhall F.; Harle A.; Warden J.; Ellis J.; Pilling M.; Haines J.; Luker K.; Molassiotis A. Management of the respiratory distress symptom cluster in lung cancer: a randomised	Ineligible study design (feasibility trial)

	controlled feasibility trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2015;23(11):3373-84	
390	Bertrand H.; Kyriazis M.; Reeves KD.; Lyftogt J.; Rabago D. Topical Mannitol Reduces Capsaicin-Induced Pain: Results of a Pilot-Level, Double-Blind, Randomized Controlled Trial. PM & R : the journal of injury, function, and rehabilitation Nov 2015;7(11):1111-1117	Ineligible study design (pilot RCT)
391	Collange Grecco LA.; de Almeida Carvalho Duarte N.; Mendonça ME.; Galli M.; Fregni F.; Oliveira CS. Effects of anodal transcranial direct current stimulation combined with virtual reality for improving gait in children with spastic diparetic cerebral palsy: a pilot, randomized, controlled, double-blind, clinical trial. Clinical rehabilitation Dec 2015;29(12):1212-23	Ineligible study design (pilot RCT)
392	Gladkov OA.; Buchner A.; Bias P.; Müller U.; Elsässer R. Chemotherapy-associated treatment burden in breast cancer patients receiving lipegfilgrastim or pegfilgrastim: secondary efficacy data from a phase III study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2016;24(1):395-400 2016 Jan	Ineligible study design (sub-study from RCT)
393	Lipardo DS; Aseron AMC; Kwan MM; Tsang WW Effect of Exercise and Cognitive Training on Falls and Fall-Related Factors in Older Adults With Mild Cognitive Impairment: A Systematic Review. Arch Phys Med Rehabil Oct 2017;98(10):2079-2096	Ineligible study design (Systematic review)
394	Crank H; Carter A; Humphreys L; Snowdon N; Daley A; Woodroofe N; Sharrack B; Petty J; Saxton JM Qualitative Investigation of Exercise Perceptions and Experiences in People With Multiple Sclerosis Before, During, and After Participation in a Personally Tailored Exercise Program. Arch Phys Med Rehabil Dec 2017;98(12):2520-2525	Ineligible study design (qualitative study/ focus groups)
395	Carvalho I; Pinto SM; Chagas DDV; Praxedes Dos Santos JL; de Sousa Oliveira T; Batista LA Robotic Gait Training for Individuals With Cerebral Palsy: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Nov 2017;98(11):2332-2344	Ineligible study design (Systematic review and meta-analysis)
396	Adamson BC; Ensari I; Motl RW Effect of exercise on depressive symptoms in adults with neurologic disorders: a systematic review and meta-analysis. Arch Phys Med Rehabil Jul 2015;96(7):1329-38	Ineligible study design (Systematic review and meta-analysis)
397	Gomes-Neto M; Saquetto MB; Silva CM; Carvalho VO; Ribeiro N; Conceição CS Effects of Respiratory Muscle Training on Respiratory Function, Respiratory Muscle Strength,	Ineligible study design (Systematic review and meta-

	and Exercise Tolerance in Patients Poststroke: A Systematic Review With Meta-Analysis. Arch Phys Med Rehabil Nov 2016;97(11):1994-2001	analysis)
398	Zou L; Sasaki JE; Zeng N; Wang C; Sun L A Systematic Review With Meta-Analysis of Mindful Exercises on Rehabilitative Outcomes Among Poststroke Patients. Arch Phys Med Rehabil Nov 2018;99(11):2355-2364	Ineligible study design (Systematic review and meta-analysis)
399	Mockler SR.; McEwen IR.; Jones MA. Retrospective Analysis of Predictors of Proficient Power Mobility in Young Children With Severe Motor Impairments. Archives of physical medicine and rehabilitation 10 2017;98(10):2034-2041	Ineligible study design (retrospective study)
400	Pachman DR.; Dockter T.; Zekan PJ.; Fruth B.; Ruddy KJ.; Ta LE.; Lafky JM.; Dentchev T.; Le-Lindqwister NA.; Sikov WM.; Staff N.; Beutler AS.; Loprinzi CL. A pilot study of minocycline for the prevention of paclitaxel-associated neuropathy: ACCRU study RU221408I. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 11 2017;25(11):3407-3416	Ineligible study design (pilot RCT)
401	Furness K.; Silvers MA.; Savva J.; Huggins CE.; Truby H.; Haines T. Long-term follow-up of the potential benefits of early nutritional intervention in adults with upper gastrointestinal cancer: a pilot randomised trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 11 2017;25(11):3587-3593	Ineligible study design (pilot RCT)
402	Galiano-Castillo N.; Arroyo-Morales M.; Lozano-Lozano M.; Fernández-Lao C.; Martín-Martín L.; Del-Moral-Ávila R.; Cantarero-Villanueva I. Effect of an Internet-based telehealth system on functional capacity and cognition in breast cancer survivors: a secondary analysis of a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 11 2017;25(11):3551-3559	Ineligible study design (secondary data analysis)
403	Weidner AC.; Barber MD.; Markland A.; Rahn DD.; Hsu Y.; Mueller ER.; Jakus-Waldman S.; Dyer KY.; Warren LK.; Gantz MG.; Meikle S. Perioperative Behavioral Therapy and Pelvic Muscle Strengthening Do Not Enhance Quality of Life After Pelvic Surgery: Secondary Report of a Randomized Controlled Trial. Physical therapy Nov 2017;97(11):1075-1083	Ineligible study design (secondary/report data analysis)
404	Rose DK.; Nadeau SE.; Wu SS.; Tilson JK.; Dobkin BH.; Pei Q.; Duncan PW. Locomotor Training and Strength and Balance Exercises for Walking Recovery After Stroke: Response to Number of Training Sessions. Physical therapy Nov 2017;97(11):1066-1074	Ineligible study design (secondary data analysis)
405	Rietdijk R.; Power E.; Brunner M.; Togher L. Reliability of Videoconferencing Administration of a Communication Questionnaire to People	Ineligible study design (measurement study)

	With Traumatic Brain Injury and Their Close Others. The Journal of head trauma rehabilitation ;32(6):E38-E44	
406	Yuan W.; Wade SL.; Quatman-Yates C.; Hugentobler JA.; Gubanich PJ.; Kurowski BG. Structural Connectivity Related to Persistent Symptoms After Mild TBI in Adolescents and Response to Aerobic Training: Preliminary Investigation. The Journal of head trauma rehabilitation ;32(6):378-384	Ineligible study design (cohort study)
407	Stuiver MM.; Kampshoff CS.; Persoon S.; Groen W.; van Mechelen W.; Chinapaw MJM.; Brug J.; Nollet F.; Kersten MJ.; Schep G.; Buffart LM. Validation and Refinement of Prediction Models to Estimate Exercise Capacity in Cancer Survivors Using the Steep Ramp Test. Archives of physical medicine and rehabilitation 11 2017;98(11):2167-2173	Ineligible study design (cross-sectional study)
408	Wu M.; Kim J.; Gaebler-Spira DJ.; Schmit BD.; Arora P. Robotic Resistance Treadmill Training Improves Locomotor Function in Children With Cerebral Palsy: A Randomized Controlled Pilot Study. Archives of physical medicine and rehabilitation 11 2017;98(11):2126-2133 2017 11	Ineligible study design (pilot RCT)
409	Rizzo JR.; Thai P.; Li EJ.; Tung T.; Hudson TE.; Herrera J.; Raghavan P. Structured Wii protocol for rehabilitation of shoulder impingement syndrome: A pilot study. Annals of physical and rehabilitation medicine Nov 2017;60(6):363-370	Ineligible study design (pilot RCT)
410	Cheng CS.; Chen LY.; Ning ZY.; Zhang CY.; Chen H.; Chen Z.; Zhu XY.; Xie J. Acupuncture for cancer-related fatigue in lung cancer patients: a randomized, double blind, placebo-controlled pilot trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 12 2017;25(12):3807-3814	Ineligible study design (pilot RCT)
411	Marciniak C.; McAllister P.; Walker H.; Brashear A.; Edgley S.; Deltombe T.; Khatkova S.; Banach M.; Gul F.; Vilain C.; Picaut P.; Grandoulier AS.; Gracies JM.; . Efficacy and Safety of Abobotulinumtoxin A (Dysport) for the Treatment of Hemiparesis in Adults With Upper Limb Spasticity Previously Treated With Botulinum Toxin: Subanalysis From a Phase 3 Randomized Controlled Trial. PM & R : the journal of injury, function, and rehabilitation 12 2017;9(12):1181-1190	Ineligible study design (Subanalysis from an RCT)
412	Mansell G.; Storheim K.; Løchting I.; Werner EL.; Grotle M. Identification of Indirect Effects in a Cognitive Patient Education (COPE) Intervention for Low Back Pain. Physical therapy Dec 2017;97(12):1138-1146	Ineligible study design (secondary data analysis)
413	Mohr B.; Stahl B.; Berthier ML.; Pulvermüller F. Intensive Communicative Therapy Reduces Symptoms of Depression in Chronic Nonfluent Aphasia. Neurorehabilitation and neural repair Dec 2017;31(12):1053-1062	Ineligible study design (sub-study of larger RCT)

414	Figueiredo S.; Morais JA.; Mayo N. Managing mobility outcomes in vulnerable seniors (MMOVeS): a randomized controlled pilot study. Clinical rehabilitation Dec 2017;31(12):1604-1615	Ineligible study design (pilot study)
415	Liu L.; Skinner MA.; McDonough SM.; Baxter GD. Acupuncture for chronic low back pain: a randomized controlled feasibility trial comparing treatment session numbers. Clinical rehabilitation Dec 2017;31(12):1592-1603	Ineligible study design (feasibility trial)
416	van der Kooi E.; Schiemanck SK.; Nollet F.; Kwakkel G.; Meijer JW.; van de Port I. Falls Are Associated With Lower Self-Reported Functional Status in Patients After Stroke. Archives of physical medicine and rehabilitation 12 2017;98(12):2393-2398	Ineligible study design (Secondary data analysis)
417	Bier JD.; Kamper SJ.; Verhagen AP.; Maher CG.; Williams CM. Patient Nonadherence to Guideline-Recommended Care in Acute Low Back Pain. Archives of physical medicine and rehabilitation 12 2017;98(12):2416-2421	Ineligible study design (Secondary data analysis)
418	O'Dell MW.; Brashear A.; Jech R.; Lejeune T.; Marque P.; Bensmail D.; Ayyoub Z.; Simpson DM.; Volteau M.; Vilain C.; Picaut P.; Gracies JM. Dose-Dependent Effects of AbobotulinumtoxinA (Dysport) on Spasticity and Active Movements in Adults With Upper Limb Spasticity: Secondary Analysis of a Phase 3 Study. PM & R : the journal of injury, function, and rehabilitation 01 2018;10(1):1-10	Ineligible study design (Secondary data analysis)
419	Bove AM.; Smith KJ.; Bise CG.; Fritz JM.; Childs JD.; Brennan GP.; Abbott JH.; Fitzgerald GK. Exercise, Manual Therapy, and Booster Sessions in Knee Osteoarthritis: Cost-Effectiveness Analysis From a Multicenter Randomized Controlled Trial. Physical therapy 01 2018;98(1):16-27	Ineligible study design (economic evaluation study)
420	Street AJ.; Magee WL.; Bateman A.; Parker M.; Odell-Miller H.; Fachner J. Home-based neurologic music therapy for arm hemiparesis following stroke: results from a pilot, feasibility randomized controlled trial. Clinical rehabilitation Jan 2018;32(1):18-28	Ineligible study design (pilot, feasibility trial)
421	Bao T.; Carender WJ.; Kinnaird C.; Barone VJ.; Peethambaran G.; Whitney SL.; Kabeto M.; Seidler RD.; Sienko KH. Effects of long-term balance training with vibrotactile sensory augmentation among community-dwelling healthy older adults: a randomized preliminary study. Journal of neuroengineering and rehabilitation 01 2018;15(1):5	Ineligible study design (pilot study)
422	Magnuson A.; Lemelman T.; Pandya C.; Goodman M.; Noel M.; Tejani M.; Doughtery D.; Dale W.; Hurria A.; Janelsins M.; Lin FV.; Heckler C.; Mohile S. Geriatric assessment with management intervention in older adults with cancer: a randomized pilot study.	Ineligible study design (pilot RCT)

	Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 02 2018;26(2):605-613	
423	Abbott JH.; Hobbs C.; Gwynne-Jones D.; . The ShortMAC: Minimum Important Change of a Reduced Version of the Western Ontario and McMaster Universities Osteoarthritis Index. The Journal of orthopaedic and sports physical therapy 02 2018;48(2):81-86	Ineligible study design (measurement study)
424	Yang YR.; Chen YH.; Chang HC.; Chan RC.; Wei SH.; Wang RY. Effects of interactive visual feedback training on post-stroke pusher syndrome: a pilot randomized controlled study. Clinical rehabilitation Oct 2015;29(10):987-93	Ineligible study design (pilot RCT)
425	Reyes A.; Cruickshank T.; Nosaka K.; Ziman M. Respiratory muscle training on pulmonary and swallowing function in patients with Huntington's disease: a pilot randomised controlled trial. Clinical rehabilitation Oct 2015;29(10):961-73	Ineligible study design (pilot RCT)
426	Lequerica A.; Jasey N.; Portelli Tremont JN.; Chiaravalloti ND. Pilot Study on the Effect of Ramelteon on Sleep Disturbance After Traumatic Brain Injury: Preliminary Evidence From a Clinical Trial. Archives of physical medicine and rehabilitation Oct 2015;96(10):1802-9	Ineligible study design (pilot RCT)
427	Highland KB.; Schoomaker A.; Rojas W.; Suen J.; Ahmed A.; Zhang Z.; Carlin SF.; Calilung CE.; Kent M.; McDonough C.; Buckenmaier CC. Benefits of the Restorative Exercise and Strength Training for Operational Resilience and Excellence Yoga Program for Chronic Low Back Pain in Service Members: A Pilot Randomized Controlled Trial. Archives of physical medicine and rehabilitation 01 2018;99(1):91-98	Ineligible study design (pilot RCT)
428	Baer GD.; Salisbury LG.; Smith MT.; Pitman J.; Dennis M. Treadmill training to improve mobility for people with sub-acute stroke: a phase II feasibility randomized controlled trial. Clinical rehabilitation Feb 2018;32(2):201-212	Ineligible study design (feasibility trial)
429	Sosnoff JJ.; Moon Y.; Wajda DA.; Finlayson ML.; McAuley E.; Peterson EW.; Morrison S.; Motl RW. Fall risk and incidence reduction in high risk individuals with multiple sclerosis: a pilot randomized control trial. Clinical rehabilitation Oct 2015;29(10):952-60	Ineligible study design (pilot RCT)
430	Hilliere C; Collado-Mateo D; Villafaina S; Duque-Fonseca P; Parraça JA Benefits of Hippotherapy and Horse Riding Simulation Exercise on Healthy Older Adults: A Systematic Review. PM R Oct 2018;10(10):1062-1072	Ineligible study design (Systematic review)

431	Clarke AL; Roscoe J; Appleton R; Parashar D; Muthuswamy R; Khan O; Dale J; Nanton V Promoting integrated care in prostate cancer through online prostate cancer-specific holistic needs assessment: a feasibility study in primary care. Support Care Cancer Apr 2020;28(4):1817-1827	Ineligible study design (feasibility study)
432	Cheng L; Tan B; Yin Y; Wang S; Jia L; Warner G; Jia G; Jiang W Short- and long-term effects of pulmonary rehabilitation for idiopathic pulmonary fibrosis: a systematic review and meta-analysis. Clin Rehabil Oct 2018;32(10):1299-1307	Ineligible study design (systematic review and meta-analysis)
433	Gao C; Fan R; Ayers GD; Giri A; Harris K; Atreya R; Teixeira PL; Jain NB Development and Validation of an Electronic Medical Record Algorithm to Identify Phenotypes of Rotator Cuff Tear. PM R Mar 2020;():	Ineligible study design (algorithm/mathematical study)
434	Liao CD; Tsauo JY; Liou TH; Chen HC; Huang SW Clinical efficacy of extracorporeal shockwave therapy for knee osteoarthritis: a systematic review and meta-regression of randomized controlled trials. Clin Rehabil Sep 2019;33(9):1419-1430	Ineligible study design (systematic review and meta-regression)
435	Iliescu AM; McIntyre A; Wiener J; Iruthayarajah J; Lee A; Caughlin S; Teasell R Evaluating the effectiveness of aquatic therapy on mobility, balance, and level of functional independence in stroke rehabilitation: a systematic review and meta-analysis. Clin Rehabil Jan 2020;34(1):56-68	Ineligible study design (systematic review and meta-analysis)
436	Zhang X; Zheng Y; Dang Y; Wang L; Cheng Y; Mao M; Lu X Can inspiratory muscle training benefit patients after stroke? A systematic review and meta-analysis of randomized controlled trials. Clin Rehabil Jun 2020;():269215520926227	Ineligible study design (systematic review and meta-analysis)
437	Ciccone CD Medical Marijuana: Just the Beginning of a Long, Strange Trip? Phys Ther Feb 2017;97(2):239-248	Ineligible study design (Perspective)
438	Brouwer R; Wondergem R; Otten C; Pisters MF Effect of aerobic training on vascular and metabolic risk factors for recurrent stroke: a meta-analysis. Disabil Rehabil Dec 2019;():1-8	Ineligible study design (meta-analysis)
439	Chalmers C; Leathem J; Bennett S; McNaughton H; Mahawish K The efficacy of problem solving therapy to reduce post stroke emotional distress in younger (18-65) stroke survivors. Disabil Rehabil Apr 2019;41(7):753-762	Ineligible study design (non-randomized study)
440	Björnsdóttir SV; Arnljótsdóttir M; Tómasson G; Triebel J; Valdimarsdóttir UA	Ineligible study design

	Health-related quality of life improvements among women with chronic pain: comparison of two multidisciplinary interventions. Disabil Rehabil 2016;38(9):828-36	(observational longitudinal cohort study)
441	Palmgren A; Ståhle A; Skavberg Roaldsen K; Dohrn IM; Halvarsson A "Stay balanced" - effectiveness of evidence-based balance training for older adults transferred into a physical therapy primary care setting - a pilot study. Disabil Rehabil Jan 2019;():1-6	Ineligible study design (pilot study)
442	Edbrooke L; Denehy L; Granger CL; Kapp S; Aranda S Home-based rehabilitation in inoperable non-small cell lung cancer-the patient experience. Support Care Cancer Jan 2020;28(1):99-112	Ineligible study design (sub-study from larger RCT)
443	Corsi C; Santos MM; Moreira RFC; Dos Santos AN; de Campos AC; Galli M; Rocha NACF Effect of physical therapy interventions on spatiotemporal gait parameters in children with cerebral palsy: a systematic review. Disabil Rehabil Oct 2019;():1-10	Ineligible study design (systematic review)
444	Menshawy A; Mattar O; Abdulkarim A; Kasem S; Nasreldin N; Menshawy E; Mohammed S; Abdel-Maboud M; Gadelkarim M; El Ashal GG; Elgebaly AS Denosumab versus bisphosphonates in patients with advanced cancers-related bone metastasis: systematic review and meta-analysis of randomized controlled trials. Support Care Cancer Apr 2018;26(4):1029-1038	Ineligible study design (systematic review and meta-analysis)
445	Beaudoin M; Best KL; Routhier F Influence of peer-based rehabilitation interventions for improving mobility and participation among adults with mobility disabilities: a systematic review. Disabil Rehabil Jan 2019;():1-12	Ineligible study design (systematic review)
446	Bombardier CH; Adams LM; Fann JR; Hoffman JM Depression Trajectories During the First Year After Spinal Cord Injury. Arch Phys Med Rehabil Feb 2016;97(2):196-203	Ineligible study design (Cohort study)
447	Bártolo A; Pacheco E; Rodrigues F; Pereira A; Monteiro S; Santos IM Effectiveness of psycho-educational interventions with telecommunication technologies on emotional distress and quality of life of adult cancer patients: a systematic review. Disabil Rehabil Apr 2019;41(8):870-878	Ineligible study design (systematic review)
448	Chishtie J; Chishtie F; Yoshida K; Balogh R Spinal cord injury rehabilitation and pressure ulcer prevention after the 2005 South Asian Earthquake: a CBR case study from Pakistan. Disabil Rehabil Jul 2019;41(14):1655-1663	Ineligible study design (case study)
449	Basen-Engquist KM; Raber M; Carmack CL; Arun B; Brewster AM; Fingeret M; Schembre SM; Harrison C; Perkins HY; Li Y; Song J; Chen M; Murray JL Feasibility and efficacy of a weight gain prevention intervention for breast cancer patients	Ineligible study design (pilot study)

	receiving neoadjuvant chemotherapy: a randomized controlled pilot study. Support Care Cancer Apr 2020;():	
450	Quigley A; O'Brien K; Parker R; MacKay-Lyons M Exercise and cognitive function in people living with HIV: a scoping review. Disabil Rehabil Jun 2019;41(12):1384-1395	Ineligible study design (scoping review)
451	Khattab S; Wiley E; Fang H; Richardson J; MacDermid J; Tang A The effects of exercise on cognition post-stroke: are there sex differences? A systematic review and meta-analysis. Disabil Rehabil Mar 2020;():1-18	Ineligible study design (systematic review and meta-analysis)
452	Sanz-Baños Y; Pastor-Mira MÁ; Lledó A; López-Roig S; Peñacoba C; Sánchez-Meca J Do women with fibromyalgia adhere to walking for exercise programs to improve their health? Systematic review and meta-analysis. Disabil Rehabil Oct 2018;40(21):2475-2487	Ineligible study design (systematic review and meta-analysis)
453	Zorko DJ; Reid JC; Unger J; McCaskell D; Saddik M; Choong K; Kho ME Measurement and reporting of physical rehabilitation interventions in pediatric critical care: a scoping review. Disabil Rehabil Mar 2020;():1-8	Ineligible study design (scoping review)
454	Adam R; Bond CM; Burton CD; de Bruin M; Murchie P Can-Pain-a digital intervention to optimise cancer pain control in the community: development and feasibility testing. Support Care Cancer May 2020;():	Ineligible study design (feasibility study)
455	Xiang H; Sun J; Tang X; Zeng K; Wu X The effect and optimal parameters of repetitive transcranial magnetic stimulation on motor recovery in stroke patients: a systematic review and meta-analysis of randomized controlled trials. Clin Rehabil May 2019;33(5):847-864	Ineligible study design (systematic review and meta-analysis)
456	Zhang C; Xie Y; Luo X; Ji Q; Lu C; He C; Wang P Effects of therapeutic ultrasound on pain, physical functions and safety outcomes in patients with knee osteoarthritis: a systematic review and meta-analysis. Clin Rehabil Oct 2016;30(10):960-971	Ineligible study design (systematic review and meta-analysis)
457	Casuso-Holgado MJ; Martín-Valero R; Carazo AF; Medrano-Sánchez EM; Cortés-Vega MD; Montero-Bancalero FJ Effectiveness of virtual reality training for balance and gait rehabilitation in people with multiple sclerosis: a systematic review and meta-analysis. Clin Rehabil Sep 2018;32(9):1220-1234	Ineligible study design (systematic review and meta-analysis)
458	Ribeiro IL; Moreira RFC; Ferrari AV; Alburquerque-Sendín F; Camargo PR; Salvini TF Effectiveness of early rehabilitation on range of motion, muscle strength and arm function after	Ineligible study design (systematic review)

	breast cancer surgery: a systematic review of randomized controlled trials. Clin Rehabil Dec 2019;33(12):1876-1886	
459	Cooley LF; Kielb S A Review of Botulinum Toxin A for the Treatment of Neurogenic Bladder. PM R Feb 2019;11(2):192-200	Ineligible study design (Review paper)
460	Lawford BJ; Walters J; Ferrar K Does walking improve disability status, function, or quality of life in adults with chronic low back pain? A systematic review. Clin Rehabil Jun 2016;30(6):523-36	Ineligible study design (systematic review)
461	Chen YW; Chang KH; Chen HC; Liang WM; Wang YH; Lin YN The effects of surface neuromuscular electrical stimulation on post-stroke dysphagia: a systemic review and meta-analysis. Clin Rehabil Jan 2016;30(1):24-35	Ineligible study design (systematic review and meta-analysis)
462	Coronado RA; Bird ML; Van Hoy EE; Huston LJ; Spindler KP; Archer KR Do psychosocial interventions improve rehabilitation outcomes after anterior cruciate ligament reconstruction? A systematic review. Clin Rehabil Mar 2018;32(3):287-298	Ineligible study design (systematic review
463	Wu Y; Zhu S; Lv Z; Kan S; Wu Q; Song W; Ning G; Feng S Effects of therapeutic ultrasound for knee osteoarthritis: a systematic review and meta-analysis. Clin Rehabil Dec 2019;33(12):1863-1875	Ineligible study design (systematic review and meta-analysis)
464	Gattie E; Cleland JA; Snodgrass S The Effectiveness of Trigger Point Dry Needling for Musculoskeletal Conditions by Physical Therapists: A Systematic Review and Meta-analysis. J Orthop Sports Phys Ther Mar 2017;47(3):133-149	Ineligible study design (systematic review and meta-analysis)
465	Turville ML; Cahill LS; Matyas TA; Blennerhassett JM; Carey LM The effectiveness of somatosensory retraining for improving sensory function in the arm following stroke: a systematic review. Clin Rehabil May 2019;33(5):834-846	Ineligible study design (systematic review)
466	Li Z; Han XG; Sheng J; Ma SJ Virtual reality for improving balance in patients after stroke: A systematic review and meta-analysis. Clin Rehabil May 2016;30(5):432-40	Ineligible study design (systematic review and meta-analysis)
467	Tung YC; Lai CH; Liao CD; Huang SW; Liou TH; Chen HC Repetitive transcranial magnetic stimulation of lower limb motor function in patients with stroke: a systematic review and meta-analysis of randomized controlled trials. Clin Rehabil Jul 2019;33(7):1102-1112	Ineligible study design (systematic review and meta-analysis)

468	Bai DY; Yuan ZG; Shao JJ; Zhu T; Zhang HJ Unstable shoes for the treatment of lower back pain: a meta-analysis of randomized controlled trials. Clin Rehabil Nov 2019;33(11):1713-1721	Ineligible study design (meta-analysis)
469	Rutz DG; Benninger DH Physical Therapy for Freezing of Gait and Gait Impairments in Parkinson Disease: A Systematic Review. PM R Jan 2020;():	Ineligible study design (systematic review)
470	Barbuto S; Martelli D; Omofuma IB; Lee N; Kuo SH; Agrawal S; Lee S; O'Dell M; Stein J Phase I randomized single-blinded controlled study investigating the potential benefit of aerobic exercise in degenerative cerebellar disease. Clin Rehabil May 2020;34(5):584-594	Ineligible study design (Phase 1 trial)
471	Heywood R; McCarthy AL; Skinner TL Safety and feasibility of exercise interventions in patients with advanced cancer: a systematic review. Support Care Cancer Oct 2017;25(10):3031-3050	Ineligible study design (systematic review)
472	Rodríguez MÁ; Crespo I; Del Valle M; Olmedillas H Should respiratory muscle training be part of the treatment of Parkinson's disease? A systematic review of randomized controlled trials. Clin Rehabil Apr 2020;34(4):429-437	Ineligible study design (systematic review)
473	Jo D; Del Bel MJ; McEwen D; O'Neil J; Mac Kiddie OS; Álvarez-Gallardo IC; Brosseau L A study of the description of exercise programs evaluated in randomized controlled trials involving people with fibromyalgia using different reporting tools, and validity of the tools related to pain relief. Clin Rehabil Mar 2019;33(3):557-563	Ineligible study design (review paper)
474	Wu X; Yang L; Wang Y; Wang C; Hu R; Wu Y Effects of combined aerobic and resistance exercise on renal function in adult patients with chronic kidney disease: a systematic review and meta-analysis. Clin Rehabil Jun 2020;():269215520924459	Ineligible study design (systematic review and meta-analysis)
475	Jansons PS; Haines TP; O'Brien L Interventions to achieve ongoing exercise adherence for adults with chronic health conditions who have completed a supervised exercise program: systematic review and meta-analysis. Clin Rehabil Apr 2017;31(4):465-477	Ineligible study design (systematic review and meta-analysis)
476	Tseng WC; Uy J; Chiu YH; Chen WS; Vora A The Comparative Effectiveness of Autologous Blood-derived Products Versus Steroid Injections in Plantar Fasciitis: A Systematic Review and Meta-analysis of Randomized Controlled Trials.	Ineligible study design (systematic review and meta-analysis)

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477	Robson EK; Hodder RK; Kamper SJ; O'Brien KM; Williams A; Lee H; Wolfenden L; Yoong S; Wiggers J; Barnett C; Williams CM Effectiveness of Weight-Loss Interventions for Reducing Pain and Disability in People With Common Musculoskeletal Disorders: A Systematic Review With Meta-Analysis. J Orthop Sports Phys Ther Jun 2020;50(6):319-333	Ineligible study design (systematic review and meta-analysis)
478	Tanaka R; Ozawa J; Kito N; Moriyama H Effects of exercise therapy on walking ability in individuals with knee osteoarthritis: a systematic review and meta-analysis of randomised controlled trials. Clin Rehabil Jan 2016;30(1):36-52	Ineligible study design (systematic review and meta-analysis)
479	Perriman A; Leahy E; Semciw AI The Effect of Open- Versus Closed-Kinetic-Chain Exercises on Anterior Tibial Laxity, Strength, and Function Following Anterior Cruciate Ligament Reconstruction: A Systematic Review and Meta-analysis. J Orthop Sports Phys Ther Jul 2018;48(7):552-566	Ineligible study design (systematic review and meta-analysis)
480	Zhu L; Wei X; Wang S Does cervical spine manipulation reduce pain in people with degenerative cervical radiculopathy? A systematic review of the evidence, and a meta-analysis. Clin Rehabil Feb 2016;30(2):145-55	Ineligible study design (systematic review and meta-analysis)
481	Baker JA; Pereira G The efficacy of Botulinum Toxin A on improving ease of care in the upper and lower limbs: a systematic review and meta-analysis using the Grades of Recommendation, Assessment, Development and Evaluation approach. Clin Rehabil Aug 2015;29(8):731-40	Ineligible study design (systematic review and meta-analysis)
482	Searle A; Spink M; Ho A; Chuter V Exercise interventions for the treatment of chronic low back pain: a systematic review and meta-analysis of randomised controlled trials. Clin Rehabil Dec 2015;29(12):1155-67	Ineligible study design (systematic review and meta-analysis)
483	Grimm T; Kreutz G Music interventions in disorders of consciousness (DOC) - a systematic review. Brain Inj 2018;32(6):704-714	Ineligible study design (systematic review)
484	Bayle N; Maisonobe P; Raymond R; Balcaitiene J; Gracies JM Composite active range of motion (CX(A)) and relationship with active function in upper and lower limb spastic paresis. Clin Rehabil Jun 2020;34(6):803-811	Ineligible study design (Post hoc analysis)
485	Cox J; Varatharajan S; Côté P; Optima Collaboration Effectiveness of Acupuncture Therapies to Manage Musculoskeletal Disorders of the	Ineligible study design (systematic review)

	Extremities: A Systematic Review. J Orthop Sports Phys Ther Jun 2016;46(6):409-29	
486	Catapano M; Zhang K; Mittal N; Sangha H; Onishi K; de Sa D Effectiveness of Dextrose Prolotherapy for Rotator Cuff Tendinopathy: A Systematic Review. PM R Mar 2020;12(3):288-300	Ineligible study design (systematic review)
487	Pinto C; Salazar AP; Marchese RR; Stein C; Pagnussat AS The Effects of Hydrotherapy on Balance, Functional Mobility, Motor Status, and Quality of Life in Patients with Parkinson Disease: A Systematic Review and Meta-analysis. PM R Mar 2019;11(3):278-291	Ineligible study design (systematic review and meta-analysis)
488	Baker JA; Pereira G The efficacy of Botulinum Toxin A for limb spasticity on improving activity restriction and quality of life: a systematic review and meta-analysis using the GRADE approach. Clin Rehabil Jun 2016;30(6):549-58	Ineligible study design (systematic review and meta-analysis)
489	Chien A; Yang CC; Chang SC; Jan YM; Yang CH; Hsieh YL Ultrasound Acupuncture for Oxaliplatin-induced Peripheral Neuropathy in Patients With Colorectal Cancer: A Pilot Study. PM R Mar 2020;():	Ineligible study design (pilot study)
490	Murillo-Garcia A; Villafaina S; Leon-Llamas JL; Sánchez-Gómez J; Domínguez-Muñoz FJ; Collado-Mateo D; Gusi N Mobility Assessment under Dual Task Conditions in Women With Fibromyalgia: A Test-Retest Reliability Study. PM R Apr 2020;():	Ineligible study design (measurement study)
491	Dashtipour K; Camba GC; Chen JJ; Walker HW; Lee MY Poster 203 Systematic Literature Review of AbobotulinumtoxinA in Randomized, Controlled Clinical Trials for Adult Lower Limb Spasticity. PM R Sep 2016;8(9S):S227-S228	Ineligible study design (systematic review/poster)
492	Iwanaga M; Kato N; Okazaki T; Hachisuka K Effects of low-dose milnacipran on event-related potentials and neuropsychological tests in persons with traumatic brain injury: A preliminary study. Brain Inj Sep 2015;29(10):1252-1257	Ineligible study design (preliminary study/results)
493	Subramanian SK; Prasanna SS Virtual Reality and Noninvasive Brain Stimulation in Stroke: How Effective Is Their Combination for Upper Limb Motor Improvement?-A Meta-Analysis. PM R Nov 2018;10(11):1261-1270	Ineligible study design (meta-analysis)
494	Chiang CF; Lin MT; Hsiao MY; Yeh YC; Liang YC; Wang TG Comparative Efficacy of Noninvasive Neurostimulation Therapies for Acute and Subacute Poststroke Dysphagia: A Systematic Review and Network Meta-analysis.	Ineligible study design (Systematic review and network meta-analysis)

	Arch Phys Med Rehabil Apr 2019;100(4):739-750.e4	
495	Lyman GH; Allcott K; Garcia J; Stryker S; Li Y; Reiner MT; Weycker D The effectiveness and safety of same-day versus next-day administration of long-acting granulocyte colony-stimulating factors for the prophylaxis of chemotherapy-induced neutropenia: a systematic review. Support Care Cancer Aug 2017;25(8):2619-2629	Ineligible study design (systematic review)
496	Jones SMW; Yi JC; Jim HSL; Loren AW; Majhail NS; Uberti J; Whalen V; Leisenring WM; Flowers MED; Lee SJ; Syrjala KL Age and gender differences in financial distress among hematopoietic cell transplant survivors. Support Care Cancer Jan 2020;():	Ineligible study design (sub-study from RCT)
497	Jong MC; Boers I; van Wietmarschen H; Busch M; Naafs MC; Kaspers GJL; Tissing WJE Development of an evidence-based decision aid on complementary and alternative medicine (CAM) and pain for parents of children with cancer. Support Care Cancer May 2020;28(5):2415-2429	Ineligible study design (mixed methodology)
498	Kassianos AP; Ioannou M; Koutsantoni M; Charalambous H The impact of specialized palliative care on cancer patients' health-related quality of life: a systematic review and meta-analysis. Support Care Cancer Jan 2018;26(1):61-79	Ineligible study design (systematic review and meta-analysis)
499	Preussler JM; Denzen EM; Majhail NS; Baker KS; McCann M; Burns LJ; Yi J; Syrjala KL Engaging hematopoietic cell transplantation patients and caregivers in the design of print and mobile application individualized survivorship care plan tools. Support Care Cancer Jun 2020;28(6):2805-2816	Ineligible study design (qualitative study)
500	Magnusson DM; Cal F; Boissonnault JS Influence of a Short-Term Disability Awareness Program on Knowledge and Attitudes of School-Aged Children in Southern Belize: Results of a Community-University Partnership. Phys Ther Apr 2017;97(4):408-416	Ineligible study design (single-group/quasi-experimental study)
501	Fei X; Lei F; Zhang H; Lu H; Zhu Y; Tang Y Predicting early post-chemotherapy adverse events in patients with hematological malignancies: a retrospective study. Support Care Cancer Jun 2016;24(6):2727-33	Ineligible study design (retrospective study)
502	Johnsen AT; Petersen MA; Snyder CF; Pedersen L; Groenvold M How does pain experience relate to the need for pain relief? A secondary exploratory analysis in a large sample of cancer patients. Support Care Cancer Oct 2016;24(10):4187-95	Ineligible study design (sub-study from previous study)
503	Khan L; Chiang A; Zhang L; Thibault I; Bedard G; Wong E; Loblaw A; Soliman H; Fehlings MG; Chow E; Sahgal A Prophylactic dexamethasone effectively reduces the incidence of pain flare following spine	Ineligible study design (prospective observational study)

	stereotactic body radiotherapy (SBRT): a prospective observational study. Support Care Cancer Oct 2015;23(10):2937-43	
504	Gewandter JS; Chaudari J; Ibegbu C; Kitt R; Serventi J; Burke J; Culakova E; Kolb N; Sluka KA; Tejani MA; Mohile NA Wireless transcutaneous electrical nerve stimulation device for chemotherapy-induced peripheral neuropathy: an open-label feasibility study. Support Care Cancer May 2019;27(5):1765-1774	Ineligible study design (feasibility study)
505	Rasschaert M; Vulsteke C; De Keersmaeker S; Vandenborne K; Dias S; Verschaeve V; Vuylsteke P; Brussel IV; Ravelingien J; Dam PV; Segelov E; Peeters M AMTRA: a multicentered experience of a web-based monitoring and tailored toxicity management system for cancer patients. Support Care Cancer Jun 2020;():	Ineligible study design (non-randomized study)
506	Sparano F; Cavo M; Niscola P; Caravita T; Efficace F Patient-reported outcomes in relapsed/refractory multiple myeloma: a systematic review. Support Care Cancer Jul 2018;26(7):2075-2090	Ineligible study design (systematic review)
507	de Rooij IJ; van de Port IG; Meijer JG Effect of Virtual Reality Training on Balance and Gait Ability in Patients With Stroke: Systematic Review and Meta-Analysis. Phys Ther Dec 2016;96(12):1905-1918	Ineligible study design (systematic review and meta-analysis)
508	Hatano Y; Matsuoka H; Lam L; Currow DC Side effects of corticosteroids in patients with advanced cancer: a systematic review. Support Care Cancer Dec 2018;26(12):3979-3983	Ineligible study design (systematic review)
509	Janssen J; Klassen TD; Connell LA; Eng JJ Factors Influencing the Delivery of Intensive Rehabilitation in Stroke: Patient Perceptions Versus Rehabilitation Therapist Perceptions. Phys Ther Feb 2020;100(2):307-316	Ineligible study design (cross-sectional qualitative study)
510	Thisted LB; Zoffmann V; Olesen ML Labeled as lucky: contradictions between what women and healthcare professionals experience regarding the need for help after the early stages of gynecological cancer. Support Care Cancer Feb 2020;28(2):907-916	Ineligible study design (sub-study from RCT)
511	Mahmood A; Veluswamy SK; Hombali A; Mullick A; N M; Solomon JM Effect of Transcutaneous Electrical Nerve Stimulation on Spasticity in Adults With Stroke: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Apr 2019;100(4):751-768	Ineligible study design (systematic review and meta-analysis)
512	Norton SA; Wittink MN; Duberstein PR; Prigerson HG; Stanek S; Epstein RM Family caregiver descriptions of stopping chemotherapy and end-of-life transitions. Support Care Cancer Feb 2019;27(2):669-675	Ineligible study design (Qualitative study)

513	Zhang Y; Lin L; Li H; Hu Y; Tian L Effects of acupuncture on cancer-related fatigue: a meta-analysis. Support Care Cancer Feb 2018;26(2):415-425	Ineligible study design (meta-analysis study)
514	Franke TP; Koes BW; Geelen SJ; Huisstede BM Do Patients With Carpal Tunnel Syndrome Benefit From Low-Level Laser Therapy? A Systematic Review of Randomized Controlled Trials. Arch Phys Med Rehabil Aug 2018;99(8):1650-1659.e15	Ineligible study design (systematic review)
515	Alsubaie SF; Whitney SL; Furman JM; Marchetti GF; Sienko KH; Klatt BN; Sparto PJ Reliability and Validity of Ratings of Perceived Difficulty During Performance of Static Standing Balance Exercises. Phys Ther Oct 2019;99(10):1381-1393	Ineligible study design (measurement study)
516	Negrini A; Vanossi M; Donzelli S; Zaina F; Romano M; Negrini S Spinal Coronal and Sagittal Balance in 584 Healthy Individuals During Growth: Normal Plumb Line Values and Their Correlation With Radiographic Measurements. Phys Ther Dec 2019;99(12):1712-1718	Ineligible study design (cross-sectional study)
517	Reblin M; Ketcher D; Forsyth P; Mendivil E; Kane L; Pok J; Meyer M; Wu YP; Agutter J Feasibility of implementing an electronic social support and resource visualization tool for caregivers in a neuro-oncology clinic. Support Care Cancer Dec 2018;26(12):4199-4206	Ineligible study design (Feasibility study)
518	Chattat R; Ottoboni G; Zeneli A; Berardi MA; Cossu V; Maltoni M The Italian version of the FAMCARE scale: a validation study. Support Care Cancer Sep 2016;24(9):3821-30	Ineligible study design (measurement study)
519	Nguyen NH; Hadgraft NT; Moore MM; Rosenberg DE; Lynch C; Reeves MM; Lynch BM A qualitative evaluation of breast cancer survivors' acceptance of and preferences for consumer wearable technology activity trackers. Support Care Cancer Nov 2017;25(11):3375-3384	Ineligible study design (qualitative study)
520	Majithia N; Smith TJ; Coyne PJ; Abdi S; Pachman DR; Lachance D; Shelerud R; Cheville A; Basford JR; Farley D; O'Neill C; Ruddy KJ; Sparadeo F; Beutler A; Loprinzi CL Scrambler Therapy for the management of chronic pain. Support Care Cancer Jun 2016;24(6):2807-14	Ineligible study design (review paper)
521	Chang KV; Hung CY; Wu WT; Han DS; Yang RS; Lin CP Comparison of the Effectiveness of Suprascapular Nerve Block With Physical Therapy, Placebo, and Intra-Articular Injection in Management of Chronic Shoulder Pain: A Meta-Analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Aug 2016;97(8):1366-80	Ineligible study design (meta-analysis)
522	Bakas T; Jessup NM; McLennon SM; Habermann B; Weaver MT; Morrison G	Ineligible study design (sub-

	Tracking patterns of needs during a telephone follow-up programme for family caregivers of persons with stroke. Disabil Rehabil Sep 2016;38(18):1780-90	study from RCT)
523	Brandenbarg D; Korsten JHWM; Berger MY; Berendsen AJ The effect of physical activity on fatigue among survivors of colorectal cancer: a systematic review and meta-analysis. Support Care Cancer Feb 2018;26(2):393-403	Ineligible study design (systematic review and meta-analysis)
524	Yip BHK; Li X; Leung CHY; Gao T; Chung VCH; Yu FWP; Lam TP; Cheng JCY; Wong SYS Trial Protocol: The use of mindfulness-based intervention for improving bracing compliance for adolescent idiopathic scoliosis patients: protocol for a randomised, controlled trial. J Physiother Jul 2018;64(3):193	Ineligible study design (RCT protocol)
525	Bernhardt J; Hayward KS; Dancause N; Lannin NA; Ward NS; Nudo RJ; Farrin A; Churilov L; Boyd LA; Jones TA; Carmichael ST; Corbett D; Cramer SC A Stroke Recovery Trial Development Framework: Consensus-Based Core Recommendations from the Second Stroke Recovery and Rehabilitation Roundtable. Neurorehabil Neural Repair Nov 2019;33(11):959-969	Ineligible study design (Consensus/framework paper)
526	Zorowitz RD; Alexander DN; Formella AE; Ledon F; Davis C; Siffert J Dextromethorphan/Quinidine for Pseudobulbar Affect Following Stroke: Safety and Effectiveness in the PRISM II Trial. PM R Jun 2018;():	Ineligible study design (sub-study from a larger trial)
527	Chen MH; Huang LL; Lee CF; Hsieh CL; Lin YC; Liu H; Chen MI; Lu WS A controlled pilot trial of two commercial video games for rehabilitation of arm function after stroke. Clin Rehabil Jul 2015;29(7):674-82	Ineligible study design (pilot RCT)
528	Legg L; Gladman J; Drummond A; Davidson A A systematic review of the evidence on home care reablement services. Clin Rehabil Aug 2016;30(8):741-9	Ineligible study design (systematic review)
529	Bilsky GS; Saulino M; O'Dell MW Does Every Patient Require an Intrathecal Baclofen Trial Before Pump Placement? PM R Aug 2016;8(8):802-7	Ineligible study design (case study)
530	Nadler M; Pauls M Shoulder orthoses for the prevention and reduction of hemiplegic shoulder pain and subluxation: systematic review. Clin Rehabil Apr 2017;31(4):444-453	Ineligible study design (systematic review)
531	Sert AT; Ozcan E; Esmaeilzadeh S Poster 383 Effects of Dextrose Prolotherapy in the Treatment of Patients with Knee	Ineligible study design (Poster RCT)

	Osteoarthritis: A Randomized Controlled Trial. PM R Sep 2016;8(9S):S286	
532	Kim KT; Guan C; Lee SW A Subject-Transfer Framework Based on Single-Trial EMG Analysis Using Convolutional Neural Networks. IEEE Trans Neural Syst Rehabil Eng Jan 2020;28(1):94-103	Ineligible study design (algorithm/mathematical study)
533	Chi B; Chau B; Yeo E; Ta P Virtual reality for spinal cord injury-associated neuropathic pain: Systematic review. Ann Phys Rehabil Med Jan 2019;62(1):49-57	Ineligible study design (systematic review)
534	Perrochon A; Borel B; Istrate D; Compagnat M; Daviet JC Exercise-based games interventions at home in individuals with a neurological disease: A systematic review and meta-analysis. Ann Phys Rehabil Med Sep 2019;62(5):366-378	Ineligible study design (systematic review and meta-analysis)
535	Hsu CY; Cheng YH; Lai CH; Lin YN Clinical non-superiority of technology-assisted gait training with body weight support in patients with subacute stroke: A meta-analysis. Ann Phys Rehabil Med Oct 2019;():	Ineligible study design (meta-analysis)
536	Bayly J; Fettes L; Douglas E; Teixiera MJ; Peat N; Tunnard I; Patel V; Gao W; Wilcock A; Higginson IJ; Maddocks M Short-term integrated rehabilitation for people with newly diagnosed thoracic cancer: a multi-centre randomized controlled feasibility trial. Clin Rehabil Feb 2020;34(2):205-219	Ineligible study design (feasibility trial)
537	Zadro J; Traeger A; Maher CG Major Concerns Regarding the Conduct of a Trial of Spinal Mobilization for Lumbar Radiculopathy. Arch Phys Med Rehabil Apr 2019;100(4):784-785	Ineligible study design (letters to the editor)
538	Jaqueline da Cunha M; Rech KD; Salazar AP; Pagnussat AS Functional electrical stimulation of the peroneal nerve improves post-stroke gait speed when combined with physiotherapy. A systematic review and meta-analysis. Ann Phys Rehabil Med May 2020;():	Ineligible study design (systematic review and meta-analysis)
539	Chan L; Heinemann AW Clinical Trial Registration: The Time Has Come…. PM R Dec 2015;7(12):1203-1204	Ineligible study design (editorial)
540	Aboutorabi A; Arazpour M; Ahmadi Bani M; Saeedi H; Head JS Efficacy of ankle foot orthoses types on walking in children with cerebral palsy: A systematic review. Ann Phys Rehabil Med Nov 2017;60(6):393-402	Ineligible study design (systematic review)

541	Vloothuis J; Depla M; Hertogh C; Kwakkel G; van Wegen E Experiences of patients with stroke and their caregivers with caregiver-mediated exercises during the CARE4STROKE trial. Disabil Rehabil Mar 2020;42(5):698-704	Ineligible study design (qualitative study/ semi-structured interviews)
542	Coudeyre E; Nguyen C; Chabaud A; Pereira B; Beaudreuil J; Coudreuse JM; Deat P; Sailhan F; Lorenzo A; Rannou F A decision-making tool to prescribe knee orthoses in daily practice for patients with osteoarthritis. Ann Phys Rehabil Med Mar 2018;61(2):92-98	Ineligible study design (decision-making tool methods)
543	van Erp RM; Huijnen IP; Verbunt JA; Smeets RJ A biopsychosocial primary care intervention (Back on Track) versus primary care as usual in a subgroup of people with chronic low back pain: protocol for a randomised, controlled trial. J Physiother Jul 2015;61(3):155	Ineligible study design (RCT protocol)
544	Rebbeck T; Leaver A; Bandong AN; Kenardy J; Refshauge K; Connelly L; Cameron I; Mitchell G; Willcock S; Ritchie C; Jagnoor J; Sterling M Implementation of a guideline-based clinical pathway of care to improve health outcomes following whiplash injury (Whiplash ImPaCT): protocol of a randomised, controlled trial. J Physiother Apr 2016;62(2):111	Ineligible study design (RCT protocol)
545	Rohrbach N; Gulde P; Armstrong AR; Hartig L; Abdelrazeq A; Schröder S; Neuse J; Grimmer T; Diehl-Schmid J; Hermsdörfer J An augmented reality approach for ADL support in Alzheimer's disease: a crossover trial. J Neuroeng Rehabil Jun 2019;16(1):66	Ineligible study design (feasibility study)
546	Aurich-Schuler T; Grob F; van Hedel HJA; Labruyère R Can Lokomat therapy with children and adolescents be improved? An adaptive clinical pilot trial comparing Guidance force, Path control, and FreeD. J Neuroeng Rehabil Jul 2017;14(1):76	Ineligible study design (pilot trial)
547	Belache FTC; Souza CP; Fernandez J; Castro J; Ferreira PDS; Rosa ERS; Araújo NCG; Reis FJJ; Almeida RS; Nogueira LAC; Correia LCL; Meziat-Filho N Trial Protocol: Cognitive functional therapy compared with combined manual therapy and motor control exercise for people with non-specific chronic low back pain: protocol for a randomised, controlled trial. J Physiother Jul 2018;64(3):192	Ineligible study design (RCT protocol)
548	Bean JF; Brown L; DeAngelis TR; Ellis T; Kumar VSS; Latham NK; Lawler D; Ni M; Perloff J The Rehabilitation Enhancing Aging Through Connected Health Prehabilitation Trial. Arch Phys Med Rehabil Nov 2019;100(11):1999-2005	Ineligible study design (quasi-experimental)
549	Negrini S; Donzelli S; Negrini A; Parzini S; Romano M; Zaina F	Ineligible study design

	Specific exercises reduce the need for bracing in adolescents with idiopathic scoliosis: A practical clinical trial. Ann Phys Rehabil Med Mar 2019;62(2):69-76	(longitudinal comparative observational study)
550	Anderson CB; Miller MJ; Murray AM; Fields TT; So NF; Christiansen CL Falls After Dysvascular Transtibial Amputation: A Secondary Analysis of Falling Characteristics and Reduced Physical Performance. PM R Apr 2020;():	Ineligible study design (Secondary data analysis)
551	Wang P; Yang X; Yang Y; Yang L; Zhou Y; Liu C; Reinhardt JD; He C Effects of whole body vibration on pain, stiffness and physical functions in patients with knee osteoarthritis: a systematic review and meta-analysis. Clin Rehabil Oct 2015;29(10):939-51	Ineligible study design (systematic review and meta-analysis)
552	D'Isabella NT; Shkredova DA; Richardson JA; Tang A Effects of exercise on cardiovascular risk factors following stroke or transient ischemic attack: a systematic review and meta-analysis. Clin Rehabil Dec 2017;31(12):1561-1572	Ineligible study design (systematic review and meta-analysis)
553	Peng L; Zhang C; Zhou L; Zuo HX; He XK; Niu YM Traditional manual acupuncture combined with rehabilitation therapy for shoulder hand syndrome after stroke within the Chinese healthcare system: a systematic review and meta-analysis. Clin Rehabil Apr 2018;32(4):429-439	Ineligible study design (systematic review and meta-analysis)
554	Cotoi A; Mirkowski M; Iruthayarajah J; Anderson R; Teasell R The effect of theta-burst stimulation on unilateral spatial neglect following stroke: a systematic review. Clin Rehabil Feb 2019;33(2):183-194	Ineligible study design (systematic review)
555	Qian X; Lin Q; Wei K; Hu B; Jing P; Wang J Efficacy and Safety of Autologous Blood Products Compared With Corticosteroid Injections in the Treatment of Lateral Epicondylitis: A Meta-Analysis of Randomized Controlled Trials. PM R Aug 2016;8(8):780-91	Ineligible study design (meta-analysis)
556	Salsich GB; Yemm B; Steger-May K; Lang CE; Van Dillen LR A feasibility study of a novel, task-specific movement training intervention for women with patellofemoral pain. Clin Rehabil Feb 2018;32(2):179-190	Ineligible study design (feasibility study)
557	Cabanas-Valdés R; Serra-Llobet P; Rodriguez-Rubio PR; López-de-Celis C; Llauró-Fores M; Calvo-Sanz J The effectiveness of extracorporeal shock wave therapy for improving upper limb spasticity and functionality in stroke patients: a systematic review and meta-analysis. Clin Rehabil Jun 2020;():269215520932196	Ineligible study design (systematic review and meta-analysis)

558	Fisher RJ; Cobley CS; Potgieter I; Moody A; Nouri F; Gaynor C; Byrne A; Walker MF Is Stroke Early Supported Discharge still effective in practice? A prospective comparative study. Clin Rehabil Mar 2016;30(3):268-76	Ineligible study design (cohort study with quasi experimental design)
559	Armstrong EL; Spencer S; Kentish MJ; Horan SA; Carty CP; Boyd RN Efficacy of cycling interventions to improve function in children and adolescents with cerebral palsy: a systematic review and meta-analysis. Clin Rehabil Jul 2019;33(7):1113-1129	Ineligible study design (systematic review and meta-analysis)
560	Liao X; Xing G; Guo Z; Jin Y; Tang Q; He B; McClure MA; Liu H; Chen H; Mu Q Repetitive transcranial magnetic stimulation as an alternative therapy for dysphagia after stroke: a systematic review and meta-analysis. Clin Rehabil Mar 2017;31(3):289-298	Ineligible study design (systematic review and meta-analysis)
561	Oates LL; Moghaddam N; Evangelou N; das Nair R Behavioural activation treatment for depression in individuals with neurological conditions: a systematic review. Clin Rehabil Mar 2020;34(3):310-319	Ineligible study design (systematic review)
562	L Snell D; Hipango J; Sinnott KA; Dunn JA; Rothwell A; Hsieh CJ; DeJong G; Hooper G Rehabilitation after total joint replacement: a scoping study. Disabil Rehabil Jul 2018;40(14):1718-1731	Ineligible study design (scoping study)
563	Kearney E; Shellikeri S; Martino R; Yunusova Y Augmented visual feedback-aided interventions for motor rehabilitation in Parkinson's disease: a systematic review. Disabil Rehabil May 2019;41(9):995-1011	Ineligible study design (systematic review)
564	Ackerman IN; Livingston JA; Osborne RH Personal Perspectives on Enablers and Barriers to Accessing Care for Hip and Knee Osteoarthritis. Phys Ther Jan 2016;96(1):26-36	Ineligible study design (qualitative study)
565	Quesada C; Pommier B; Fauchon C; Bradley C; Créac'h C; Vassal F; Peyron R Robot-Guided Neuronavigated Repetitive Transcranial Magnetic Stimulation (rTMS) in Central Neuropathic Pain. Arch Phys Med Rehabil Nov 2018;99(11):2203-2215.e1	Ineligible study design (Prospective observational study)
566	Chaovalit S; Taylor NF; Dodd KJ Sit-to-stand exercise programs improve sit-to-stand performance in people with physical impairments due to health conditions: a systematic review and meta-analysis. Disabil Rehabil May 2020;42(9):1202-1211	Ineligible study design (systematic review and meta-analysis)
567	Bornheim S; Thibaut A; Beaudart C; Maquet P; Croisier JL; Kaux JF	Ineligible study design

	Evaluating the effects of tDCS in stroke patients using functional outcomes: a systematic review. Disabil Rehabil May 2020;():1-11	(systematic review)
568	Sullivan KA; Kaye SA; Blaine H; Edmed SL; Meares S; Rossa K; Haden C Psychological approaches for the management of persistent postconcussion symptoms after mild traumatic brain injury: a systematic review. Disabil Rehabil Feb 2019;():1-9	Ineligible study design (systematic review)
569	Heathcote K; Wullschleger M; Sun J The effectiveness of multi-dimensional resilience rehabilitation programs after traumatic physical injuries: a systematic review and meta-analysis. Disabil Rehabil Dec 2019;41(24):2865-2880	Ineligible study design (systematic review and meta-analysis)
570	Intiso D; Santamato A; Di Rienzo F Effect of electrical stimulation as an adjunct to botulinum toxin type A in the treatment of adult spasticity: a systematic review. Disabil Rehabil Oct 2017;39(21):2123-2133	Ineligible study design (systematic review)
571	Mohamadi S; Dadgoo M; Ebrahimi I; Salavati M; Saeedi A; Valiollahi B Translation, cross-cultural adaptation, reliability, and validity of the Identification of Functional Ankle Instability questionnaire in Persian speaking participants with a history of ankle sprain. Disabil Rehabil Aug 2019;41(16):1931-1936	Ineligible study design (measurement study)
572	Daryabor A; Yamamoto S; Orendurff M; Kobayashi T Effect of types of ankle-foot orthoses on energy expenditure metrics during walking in individuals with stroke: a systematic review. Disabil Rehabil May 2020;():1-11	Ineligible study design (systematic review)
573	Wray F; Clarke D; Forster A Post-stroke self-management interventions: a systematic review of effectiveness and investigation of the inclusion of stroke survivors with aphasia. Disabil Rehabil Jun 2018;40(11):1237-1251	Ineligible study design (systematic review)
574	McCrary JM; Goldstein D; Sandler CX; Barry BK; Marthick M; Timmins HC; Li T; Horvath L; Grimison P; Park SB Exercise-based rehabilitation for cancer survivors with chemotherapy-induced peripheral neuropathy. Support Care Cancer Oct 2019;27(10):3849-3857	Ineligible study design (pilot study)
575	Navarrete-Opazo AA; Gonzalez W; Nahuelhual P Effectiveness of Oral Baclofen in the Treatment of Spasticity in Children and Adolescents With Cerebral Palsy. Arch Phys Med Rehabil Apr 2016;97(4):604-618	Ineligible study design (review paper)

576	Spanjer J; van de Mei S; Cornelius B; Brouwer S; van der Klink J Effects of a training in the Disability Assessment Structured Interview on the interviews of Dutch insurance physicians. Disabil Rehabil Aug 2016;38(16):1632-41	Ineligible study design (single-group/pre-postexperimental study)
577	Hall A; Richmond H; Copsey B; Hansen Z; Williamson E; Jones G; Fordham B; Cooper Z; Lamb S Physiotherapist-delivered cognitive-behavioural interventions are effective for low back pain, but can they be replicated in clinical practice? A systematic review. Disabil Rehabil Jan 2018;40(1):1-9	Ineligible study design (systematic review)
578	VanderKaay S; Letts L; Jung B; Moll SE On-line ethics education for occupational therapy clinician-educators: a single-group pre-/post-test study. Disabil Rehabil Nov 2019;41(23):2841-2853	Ineligible study design (single-group pre-/post-test study)
579	Kuo CC; Wang RH; Wang HH; Li CH Meta-analysis of randomized controlled trials of the efficacy of propolis mouthwash in cancer therapy-induced oral mucositis. Support Care Cancer Dec 2018;26(12):4001-4009	Ineligible study design (Meta-analysis)
580	Watter K; Copley A; Finch E Discourse level reading comprehension interventions following acquired brain injury: a systematic review. Disabil Rehabil Feb 2017;39(4):315-337	Ineligible study design (systematic review)
581	Chesterton L; Stephens M; Clark A; Ahmed A A systematic literature review of the patient hotel model. Disabil Rehabil Jun 2019;():1-7	Ineligible study design (systematic review)
582	Chen Y; Fanchiang HD; Howard A Effectiveness of Virtual Reality in Children With Cerebral Palsy: A Systematic Review and Meta-Analysis of Randomized Controlled Trials. Phys Ther Jan 2018;98(1):63-77	Ineligible study design (Systematic review and meta-analysis)
583	Mills PB; Finlayson H; Sudol M; O'Connor R Systematic review of adjunct therapies to improve outcomes following botulinum toxin injection for treatment of limb spasticity. Clin Rehabil Jun 2016;30(6):537-48	Ineligible study design (systematic review)
584	Guerra ML; Singh PJ; Taylor NF Early mobilization of patients who have had a hip or knee joint replacement reduces length of stay in hospital: a systematic review. Clin Rehabil Sep 2015;29(9):844-54	Ineligible study design (systematic review)

585	van der Weegen W; Kornuijt A; Das D Do lifestyle restrictions and precautions prevent dislocation after total hip arthroplasty? A systematic review and meta-analysis of the literature. Clin Rehabil Apr 2016;30(4):329-39	Ineligible study design (Systematic review and meta-analysis)
586	Smit EB; Bouwstra H; Hertogh CM; Wattel EM; van der Wouden JC Goal-setting in geriatric rehabilitation: a systematic review and meta-analysis. Clin Rehabil Mar 2019;33(3):395-407	Ineligible study design (Systematic review and meta-analysis)
587	Lee SP; Dinglasan V; Duong A; Totten R; Smith JA Individuals With Recurrent Low Back Pain Exhibit Significant Changes in Paraspinal Muscle Strength After Intramuscular Fine Wire Electrode Insertion. PM R Nov 2019;():	Ineligible study design (Case-control)
588	Li Y; Su Y; Chen S; Zhang Y; Zhang Z; Liu C; Lu M; Liu F; Li S; He Z; Wang Y; Sheng L; Wang W; Zhan Z; Wang X; Zheng N The effects of resistance exercise in patients with knee osteoarthritis: a systematic review and meta-analysis. Clin Rehabil Oct 2016;30(10):947-959	Ineligible study design (Systematic review and meta-analysis)
589	Wang XQ; Pi YL; Chen BL; Wang R; Li X; Chen PJ Cognitive motor intervention for gait and balance in Parkinson's disease: systematic review and meta-analysis. Clin Rehabil Feb 2016;30(2):134-44	Ineligible study design (Systematic review and meta-analysis)
590	Bird ML; Miller T; Connell LA; Eng JJ Moving stroke rehabilitation evidence into practice: a systematic review of randomized controlled trials. Clin Rehabil Oct 2019;33(10):1586-1595	Ineligible study design (Systematic review)
591	Rammant E; Decaestecker K; Bultijnck R; Sundahl N; Ost P; Pauwels NS; Deforche B; Pieters R; Fonteyne V A systematic review of exercise and psychosocial rehabilitation interventions to improve health-related outcomes in patients with bladder cancer undergoing radical cystectomy. Clin Rehabil May 2018;32(5):594-606	Ineligible study design (Systematic review)
592	Balasukumaran T; Olivier B; Ntsiea MV The effectiveness of backward walking as a treatment for people with gait impairments: a systematic review and meta-analysis. Clin Rehabil Feb 2019;33(2):171-182	Ineligible study design (Systematic review and meta-analysis)
593	Latzka EW; Henning PT; Pourcho AM Sonographic Changes After Ultrasound-Guided Release of the Transverse Carpal Ligament: A Case Report. PM R Oct 2018;10(10):1125-1129	Ineligible study design (Case report)

594	Tang S; Wang X; Wu P; Yang J; Du Z; Liu S; Wei F Platelet-Rich Plasma Vs Autologous Blood Vs Corticosteroid Injections in the Treatment of Lateral Epicondylitis: A Systematic Review, Pairwise and Network Meta-Analysis of Randomized Controlled Trials. PM R Apr 2020;12(4):397-409	Ineligible study design (Systematic review, pairwise and Network Meta-Analysis)
595	Dijksma I; Arslan IG; van Etten-Jamaludin FS; Elbers RG; Lucas C; Stuiver MM Exercise Programs to Reduce the Risk of Musculoskeletal Injuries in Military Personnel: A Systematic Review and Meta-Analysis. PM R Mar 2020;():	Ineligible study design (Systematic review and meta-analysis)
596	Yson SC; Sembrano JN; Polly DW Jr Sacroiliac Joint Fusion: Approaches and Recent Outcomes. PM R Aug 2019;11 Suppl1():S114-S117	Ineligible study design
597	Blasco JM; Acosta-Ballester Y; Igual-Camacho C; Hernández-Guillén D; Gómez MC; Roig-Casasús S; Puigcerver-Aranda P Preferred Outcome Measures Used in Randomized Clinical Trials of Total Knee Replacement Rehabilitation: A Systematic Review. PM R Dec 2019;():	Ineligible study design (Systematic review)
598	Jayaseelan DJ; Scalzitti DA; Palmer G; Immerman A; Courtney CA The effects of joint mobilization on individuals with patellofemoral pain: a systematic review. Clin Rehabil Jun 2018;32(6):722-733	Ineligible study design (Systematic review)
599	Cugusi L; Manca A; Dragone D; Deriu F; Solla P; Secci C; Monticone M; Mercuro G Nordic Walking for the Management of People With Parkinson Disease: A Systematic Review. PM R Nov 2017;9(11):1157-1166	Ineligible study design (Systematic review)
600	Xu JC; Shen J; Shao WZ; Tang LJ; Sun YZ; Zhai XF; Qi L; Li J; Zheng JY The safety and efficacy of levetiracetam versus phenytoin for seizure prophylaxis after traumatic brain injury: A systematic review and meta-analysis. Brain Inj 2016;30(9):1054-61	Ineligible study design (Systematic review and meta-analysis)
601	Lueders DR; Pourcho AM; Sellon JL; Dahm DL; Smith J Optimal Elbow Angle for Sonographic Visualization of the Ulnar Collateral Ligament. PM R Sep 2015;7(9):970-977	Ineligible study design (cross-sectional study)
602	Floríndez LI; Carlson ME; Pyatak E; Blanchard J; Cogan AM; Sleight AG; Hill V; Diaz J; Blanche E; Garber SL; Clark FA A qualitative analysis of pressure injury development among medically underserved adults with spinal cord injury. Disabil Rehabil Jan 2019;():1-7	Ineligible study design (qualitative analysis)
603	Wiener J; McIntyre A; Janzen S; Mirkowski M; MacKenzie HM; Teasell R	Ineligible study design

	Opioids and cerebral physiology in the acute management of traumatic brain injury: a systematic review. Brain Inj 2019;33(5):559-566	(Systematic review)
604	Bai Y; Hu Y; Zhao Y; Yu X; Xu J; Hua Z; Zhao Z Anamorelin for cancer anorexia-cachexia syndrome: a systematic review and meta-analysis. Support Care Cancer May 2017;25(5):1651-1659	Ineligible study design (Systematic review and meta-analysis)
605	Griffin A; Leaver A; Moloney N General Exercise Does Not Improve Long-Term Pain and Disability in Individuals With Whiplash-Associated Disorders: A Systematic Review. J Orthop Sports Phys Ther Jul 2017;47(7):472-480	Ineligible study design (Systematic review)
606	Hajihasani A; Rouhani M; Salavati M; Hedayati R; Kahlaee AH The Influence of Cognitive Behavioral Therapy on Pain, Quality of Life, and Depression in Patients Receiving Physical Therapy for Chronic Low Back Pain: A Systematic Review. PM R Feb 2019;11(2):167-176	Ineligible study design (Systematic review)
607	Martimbianco ALC; Ferreira RES; Latorraca COC; Bussadori SK; Pacheco RL; Riera R Photobiomodulation with low-level laser therapy for treating Achilles tendinopathy: a systematic review and meta-analysis. Clin Rehabil Jun 2020;34(6):713-722	Ineligible study design (Systematic review and meta-analysis)
608	Finnoff JT; Johnson AC; Hollman JH Can Ultrasound Accurately Assess Ischiofemoral Space Dimensions? A Validation Study. PM R Apr 2017;9(4):392-397	Ineligible study design (measurement/ validation study)
609	He H; Peng W; Luan H; Shi C; Tu W The effect of dexmedetomidine on haemodynamics during intracranial procedures: a meta-analysis. Brain Inj 2018;32(13-14):1843-1848	Ineligible study design (meta-analysis)
610	Santana JA; Klass S; Felix ER The Efficacy, Effectiveness and Safety of 5% Transdermal Lidocaine Patch for Chronic Low Back Pain: A Narrative Review. PM R Mar 2020;():	Ineligible study design (narrative review)
611	Iatridou G; Pelidou HS; Varvarousis D; Stergiou A; Beris A; Givissis P; Ploumis A The effectiveness of hydrokinesiotherapy on postural balance of hemiplegic patients after stroke: a systematic review and meta-analysis. Clin Rehabil May 2018;32(5):583-593	Ineligible study design (Systematic review and meta-analysis)
612	Sharma B; Allison D; Tucker P; Mabbott D; Timmons BW Cognitive and neural effects of exercise following traumatic brain injury: A systematic review of randomized and controlled clinical trials. Brain Inj 2020;34(2):149-159	Ineligible study design (Systematic review)

613	Khan S; Axelrod D; Paul R; Catapano M; Stephen D; Henry P; Wasserstein D Acute Fifth Metatarsal Tuberosity Fractures: A Systematic Review of Non-Operative Treatment. PM R May 2020;():	Ineligible study design (Systematic review)
614	Preston N; Magallón S; Hill LJ; Andrews E; Ahern SM; Mon-Williams M A systematic review of high quality randomized controlled trials investigating motor skill programmes for children with developmental coordination disorder. Clin Rehabil Jul 2017;31(7):857-870	Ineligible study design (Systematic review)
615	Kwong PW; Ng GY; Chung RC; Ng SS Transcutaneous electrical nerve stimulation improves walking capacity and reduces spasticity in stroke survivors: a systematic review and meta-analysis. Clin Rehabil Sep 2018;32(9):1203-1219	Ineligible study design (Systematic review and meta-analysis)
616	Monge-Pereira E; Ibañez-Pereda J; Alguacil-Diego IM; Serrano JI; Spottorno-Rubio MP; Molina-Rueda F Use of Electroencephalography Brain-Computer Interface Systems as a Rehabilitative Approach for Upper Limb Function After a Stroke: A Systematic Review. PM R Sep 2017;9(9):918-932	Ineligible study design (Systematic review)
617	Wang Y; Gu Y; Chen J; Luo W; He W; Han Z; Tian J Kinesio taping is superior to other taping methods in ankle functional performance improvement: a systematic review and meta-analysis. Clin Rehabil Nov 2018;32(11):1472-1481	Ineligible study design (Systematic review and meta-analysis)
618	Dincher A; Schwarz M; Wydra G Analysis of the Effects of Whole-Body Vibration in Parkinson Disease - Systematic Review and Meta-Analysis. PM R Jun 2019;11(6):640-653	Ineligible study design (Systematic review and meta-analysis)
619	Wacker K; Tanner L; Ovans J; Mason J; Gilchrist L Improving Functional Mobility in Children and Adolescents Undergoing Treatment for Non-Central Nervous System Cancers: A Systematic Review. PM R Sep 2017;9(9S2):S385-S397	Ineligible study design (Systematic review)
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621	Yang X; He H; Ye W; Perry TA; He C	Ineligible study design

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625	Bialosky JE; Bishop MD; Penza CW Placebo Mechanisms of Manual Therapy: A Sheep in Wolf's Clothing? J Orthop Sports Phys Ther May 2017;47(5):301-304	Ineligible study design (view point)
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	Hancock MJ; Van Tulder MW; Nunes Cabral CM Examination of a Subgroup of Patients With Chronic Low Back Pain Likely to Benefit More From Pilates-Based Exercises Compared to an Educational Booklet. J Orthop Sports Phys Ther Apr 2020;50(4):189-197	(secondary data analysis)
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633	Johnson BP; Shipper AG; Westlake KP Systematic Review Investigating the Effects of Nonpharmacological Interventions During Sleep to Enhance Physical Rehabilitation Outcomes in People With Neurological Diagnoses. Neurorehabil Neural Repair May 2019;33(5):345-354	Ineligible study design (Systematic review)
634	Kleffelgaard I; Langhammer B; Hellstrom T; Sandhaug M; Tamber AL; Soberg HL Dizziness-related disability following mild-moderate traumatic brain injury. Brain Inj 2017;31(11):1436-1444	Ineligible study design (sub-study from RCT)
635	Gross AR; Paquin JP; Dupont G; Blanchette S; Lalonde P; Cristie T; Graham N; Kay TM; Burnie SJ; Gelley G; Goldsmith CH; Forget M; Santaguida PL; Yee AJ; Radisic GG; Hoving JL; Bronfort G Exercises for mechanical neck disorders: A Cochrane review update. Man Ther Aug 2016;24():25-45	Ineligible study design (Systematic review)
636	Emilson C; Demmelmaier I; Bergman S; Lindberg P; Denison E; Åsenlöf P A 10-year follow-up of tailored behavioural treatment and exercise-based physiotherapy for persistent musculoskeletal pain. Clin Rehabil Feb 2017;31(2):186-196	Ineligible study design (longitudinal follow up of an RCT)
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638	Ataseven B; Frindte J; Harter P; Gebers G; Vogt C; Traut A; Breit E; Bluni V; Reinisch M; Heitz F; Kostara A; Kuemmel S; Prader S; Bommert M; Schneider S; du Bois A Perception of side effects associated with anticancer treatment in women with breast or ovarian cancer (KEM-GO-1): a prospective trial. Support Care Cancer Dec 2019;():	Ineligible study design (cohort / qualitative study)

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642	Abedi M; Manshadi FD; Khalkhali M; Mousavi SJ; Baghban AA; Montazeri A; Parnianpour M Translation and validation of the Persian version of the STarT Back Screening Tool in patients with nonspecific low back pain. Man Ther Dec 2015;20(6):850-4	Ineligible study design (measurement study)
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644	Patel J; Fluet G; Qiu Q; Yarossi M; Merians A; Tunik E; Adamovich S Intensive virtual reality and robotic based upper limb training compared to usual care, and associated cortical reorganization, in the acute and early sub-acute periods post-stroke: a feasibility study. J Neuroeng Rehabil Jul 2019;16(1):92	Ineligible study design (feasibility study)
645	Topley D; McConnell K; Kerr C A systematic review of vestibular stimulation in cerebral palsy. Disabil Rehabil Mar 2020;():1-7	Ineligible study design (Systematic review)
646	Léotard A; Lévy J; Hartley S; Pages A; Genet F; Lofaso F; Prigent H; Quera-Salva MA Sleep disorders in aging polio survivors: A systematic review. Ann Phys Rehabil Med Nov 2019;():	Ineligible study design (Systematic review)
647	Goh SL; Persson MSM; Stocks J; Hou Y; Lin J; Hall MC; Doherty M; Zhang W	Ineligible study design

	Efficacy and potential determinants of exercise therapy in knee and hip osteoarthritis: A systematic review and meta-analysis. Ann Phys Rehabil Med Sep 2019;62(5):356-365	(systematic review and meta-analysis)
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652	Dennett AM; Peiris CL; Shields N; Prendergast LA; Taylor NF Moderate-intensity exercise reduces fatigue and improves mobility in cancer survivors: a systematic review and meta-regression. J Physiother Apr 2016;62(2):68-82	Ineligible study design (systematic review and meta-regression)
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654	Garrett SB; Abramson CM; Rendle KA; Dohan D Approaches to decision-making among late-stage melanoma patients: a multifactorial investigation. Support Care Cancer Mar 2019;27(3):1059-1070	Ineligible study design (qualitative study)
655	Königs M; Beurskens EA; Snoep L; Scherder EJ; Oosterlaan J Effects of Timing and Intensity of Neurorehabilitation on Functional Outcome After Traumatic Brain Injury: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Jun 2018;99(6):1149-1159.e1	Ineligible study design (Systematic review and meta-analysis)
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662	Physical Agents for Soft Tissue Injury. J Orthop Sports Phys Ther Jul 2016;46(7):555	Ineligible study design (Perspective for practice)
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665	Beaudreuil J Orthoses for osteoarthritis: A narrative review. Ann Phys Rehabil Med Apr 2017;60(2):102-106	Ineligible study design (narrative review)
666	Thibaut A; Piarulli A; Martens G; Chatelle C; Laureys S Effect of multichannel transcranial direct current stimulation to reduce hypertonia in	Ineligible study design (pilot study)

	individuals with prolonged disorders of consciousness: A randomized controlled pilot study. Ann Phys Rehabil Med Nov 2019;62(6):418-425	
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672	Curatolo M Pharmacological and Interventional Management of Pain After Whiplash Injury. J Orthop Sports Phys Ther Oct 2016;46(10):845-850	Ineligible study design (Clinical commentary)
673	Marcolino MAZ; Hauck M; Stein C; Schardong J; Pagnussat AS; Plentz RDM Effects of transcutaneous electrical nerve stimulation alone or as additional therapy on chronic post-stroke spasticity: systematic review and meta-analysis of randomized controlled trials. Disabil Rehabil Mar 2020;42(5):623-635	Ineligible study design (systematic review and meta-analysis)
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677	Whitehead PJ; Worthington EJ; Parry RH; Walker MF; Drummond AE Interventions to reduce dependency in personal activities of daily living in community dwelling adults who use homecare services: a systematic review. Clin Rehabil Nov 2015;29(11):1064-76	Ineligible study design (systematic review)
678	Marinho-Buzelli AR; Bonnyman AM; Verrier MC The effects of aquatic therapy on mobility of individuals with neurological diseases: a systematic review. Clin Rehabil Aug 2015;29(8):741-51	Ineligible study design (systematic review)
679	Barnett M; Reid L The effectiveness of methylphenidate in improving cognition after brain injury in adults: a systematic review. Brain Inj 2020;34(1):1-10	Ineligible study design (systematic review)
680	He Y; Yang L; Zhou J; Yao L; Pang MYC Dual-task training effects on motor and cognitive functional abilities in individuals with stroke: a systematic review. Clin Rehabil Jul 2018;32(7):865-877	Ineligible study design (systematic review)
681	Leo A; Naro A; Molonia F; Tomasello P; Saccà I; Bramanti A; Russo M; Bramanti P; Quartarone A; Calabrò RS Spasticity Management: The Current State of Transcranial Neuromodulation. PM R Oct 2017;9(10):1020-1029	Ineligible study design (narrative review)
682	Kettlewell J; das Nair R; Radford K A systematic review of personal smart technologies used to improve outcomes in adults with acquired brain injuries. Clin Rehabil Nov 2019;33(11):1705-1712	Ineligible study design (systematic review)
683	Helminen EE; Arokoski JP; Selander TA; Sinikallio SH Multiple psychological factors predict pain and disability among community-dwelling knee osteoarthritis patients: a five-year prospective study. Clin Rehabil Mar 2020;34(3):404-415	Ineligible study design (longitudinal cohort study)
684	Gellhorn AC; Suri P; Rundell SD; Olafsen N; Carlson MJ; Johnson S; Fry A; Annaswamy TM; Gilligan C; Comstock B; Heagerty P; Friedly J; Jarvik JG Lumbar Muscle Cross-Sectional Areas Do Not Predict Clinical Outcomes in Adults With Spinal Stenosis: A Longitudinal Study. PM R Jun 2017;9(6):545-555	Ineligible study design (Longitudinal study)

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686	Reichmann JP; Stevens PM; Rheinstein J; Kreulen CD Removable Rigid Dressings for Postoperative Management of Transtibial Amputations: A Review of Published Evidence. PM R May 2018;10(5):516-523	Ineligible study design (review paper)
687	Dantas LO; Moreira RFC; Norde FM; Mendes Silva Serrao PR; Alburquerque-Sendín F; Salvini TF The effects of cryotherapy on pain and function in individuals with knee osteoarthritis: a systematic review of randomized controlled trials. Clin Rehabil Aug 2019;33(8):1310-1319	Ineligible study design (systematic review)
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689	Cao A; Feng F; Zhang L; Zhou X Baduanjin exercise for chronic obstructive pulmonary disease: an updated systematic review and meta-analysis. Clin Rehabil Jun 2020;():269215520926635	Ineligible study design (systematic review and meta-analysis)
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691	Smith AH; Capin JJ; Zarzycki R; Snyder-Mackler L Athletes With Bone-Patellar Tendon-Bone Autograft for Anterior Cruciate Ligament Reconstruction Were Slower to Meet Rehabilitation Milestones and Return-to-Sport Criteria Than Athletes With Hamstring Tendon Autograft or Soft Tissue Allograft : Secondary Analysis From the ACL-SPORTS Trial J Orthop Sports Phys Ther May 2020;50(5):259-266	Ineligible study design (Secondary data analysis)
692	Heij W; Teerenstra S; Sweerts L; Staal JB; Nijhuis-van der Sanden MWG; Hoogeboom TJ Implementation of a Cost-Effective Physical Therapy Approach (Coach2Move) to Improve Physical Activity in Community-Dwelling Older Adults With Mobility Problems: Protocol for a Cluster-Randomized, Stepped Wedge Trial. Phys Ther Apr 2020;100(4):653-661	Ineligible study design (RCT protocol)
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	Ann Phys Rehabil Med Jul 2019;62(4):234-240	review)
694	Botteman M; Nickel K; Corman S; Turini M; Binder G Cost-effectiveness of a fixed combination of netupitant and palonosetron (NEPA) relative to aprepitant plus granisetron (APR + GRAN) for prophylaxis of chemotherapy-induced nausea and vomiting (CINV): a trial-based analysis. Support Care Cancer Feb 2020;28(2):857-866	Ineligible study design (Cost-effectiveness study)
695	Winter L; Moriarty HJ; Short TH Self-Reported Driving Difficulty in Veterans With Traumatic Brain Injury: Its Central Role in Psychological Well-Being. PM R Sep 2017;9(9):901-909	Ineligible study design (Cross-sectional)
696	Hiensch AE; Bolam KA; Mijwel S; May AM; Wengström Y Sense of coherence and its relationship to participation, cancer-related fatigue, symptom burden, and quality of life in women with breast cancer participating in the OptiTrain exercise trial. Support Care Cancer Mar 2020;():	Ineligible study design (sub-study from a larger trial)
697	Macrinici G; Drescher M; Ascan J; Babicz K; Clark J; Lagomarcino P Poster 391 Prospective, Double-blind, Randomized Clinical Trial to Compare Single Shot Adductor Canal Nerve Block Versus Femoral Nerve Block Combined with Local Infiltration Analgesia: Postoperative Functional Outcomes After Total Knee Arthroplasty. PM R Sep 2016;8(9S):S288-S289	Ineligible study design (Poster RCT)
698	Kaur N; Figueiredo S; Bouchard V; Moriello C; Mayo N Where have all the pilot studies gone? A follow-up on 30 years of pilot studies in Clinical Rehabilitation. Clin Rehabil Sep 2017;31(9):1238-1248	Ineligible study design (pilot studies/review)
699	Tester NJ; Lorenz DJ; Suter SP; Buehner JJ; Falanga D; Watson E; Velozo CA; Behrman AL; Michele Basso D Responsiveness of the Neuromuscular Recovery Scale During Outpatient Activity-Dependent Rehabilitation for Spinal Cord Injury. Neurorehabil Neural Repair Jul 2016;30(6):528-38	Ineligible study design (measurement study)
700	Peiris C; Shields N; Kingsley M; Yeung J; Hau R; Taylor N Maximum Tolerated Dose of Walking for Community-Dwelling People Recovering From Hip Fracture: A Dose-Response Trial. Arch Phys Med Rehabil Dec 2017;98(12):2533-2539	Ineligible study design (Phase I trial)
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702	Lampit A; Heine J; Finke C; Barnett MH; Valenzuela M; Wolf A; Leung IHK; Hill NTM Computerized Cognitive Training in Multiple Sclerosis: A Systematic Review and Meta-analysis. Neurorehabil Neural Repair Sep 2019;33(9):695-706	Ineligible study design (Systematic review and meta-analysis)
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704	Susko T; Swaminathan K; Krebs HI MIT-Skywalker: A Novel Gait Neurorehabilitation Robot for Stroke and Cerebral Palsy. IEEE Trans Neural Syst Rehabil Eng Oct 2016;24(10):1089-1099	Ineligible study design (feasibility study)
705	Morio K; Watanabe J; Tsujimoto Y Letter referencing "Randomized open-label phase II trial of 5-day aprepitant plus ondansetron compared to ondansetron alone in the prevention of chemotherapy-induced nausea-vomiting in glioma patients receiving adjuvant temozolomide". Support Care Cancer May 2020;():	Ineligible study design (letter to editor)
706	Abe M; Hirashima Y; Kasamatsu Y; Kado N; Komeda S; Kuji S; Tanaka A; Takahashi N; Takekuma M; Hihara H; Ichikawa Y; Itonaga Y; Hirakawa T; Nasu K; Miyagi K; Murakami J; Ito K Efficacy and safety of olanzapine combined with aprepitant, palonosetron, and dexamethasone for preventing nausea and vomiting induced by cisplatin-based chemotherapy in gynecological cancer: KCOG-G1301 phase II trial. Support Care Cancer Feb 2016;24(2):675-682	Ineligible study design (non-randomized trial)
707	Drew CJG; Quinn L; Hamana K; Williams-Thomas R; Marsh L; Dimitropoulou P; Playle R; Griffin BA; Kelson M; Schubert R; Muratori L; Reilmann R; Rosser A; Busse M Physical Activity and Exercise Outcomes in Huntington Disease (PACE-HD): Protocol for a 12-Month Trial Within Cohort Evaluation of a Physical Activity Intervention in People With Huntington Disease. Phys Ther Sep 2019;99(9):1201-1210	Ineligible study design (RCT protocol)
708	Carter J; Baser RE; Goldfrank DJ; Seidel B; Milli L; Stabile C; Canty J; Saban S; Goldfarb S; Dickler MN; Gardner GJ; Jewell EL; Sonoda Y; Kollmeier MA; Alektiar KM A single-arm, prospective trial investigating the effectiveness of a non-hormonal vaginal moisturizer containing hyaluronic acid in postmenopausal cancer survivors. Support Care Cancer May 2020;():	Ineligible study design (non-randomized trial)
709	Zadro JR; Shirley D; Nilsen TI; Mork PJ; Ferreira PH Family history influences the effectiveness of home-exercise in older people with chronic low back pain: a secondary analysis of a randomised controlled trial. Arch Phys Med Rehabil May 2020;():	Ineligible study design (secondary data analysis)

710	Peppone LJ; Ling M; Huston AJ; Reid ME; Janelsins MC; Puzas JE; Kamen C; Del Giglio A; Asare M; Peoples AR; Mustian KM The effects of high-dose calcitriol and individualized exercise on bone metabolism in breast cancer survivors on hormonal therapy: a phase II feasibility trial. Support Care Cancer Aug 2018;26(8):2675-2683	Ineligible study design (feasibility trial)
711	Censabella S; Claes S; Robijns J; Bulens P; Mebis J Photobiomodulation for the management of radiation dermatitis: the DERMIS trial, a pilot study of MLS(®) laser therapy in breast cancer patients. Support Care Cancer Sep 2016;24(9):3925-33	Ineligible study design (pilot study)
712	Leung B; Chau T Single-Trial Analysis of Inter-Beat Interval Perturbations Accompanying Single-Switch Scanning: Case Series of Three Children With Severe Spastic Quadriplegic Cerebral Palsy. IEEE Trans Neural Syst Rehabil Eng Feb 2016;24(2):261-71	Ineligible study design (non-randomized trial)
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719	Kamonseki DH; Gonçalves GA; Yi LC; Júnior IL Response to Letter to the Editor: Effect of stretching with and without muscle strengthening exercises for the foot and hip in patients with plantar fasciitis: A randomized controlled single-blind clinical trial. Man Ther Jun 2016;23():e13-4	Ineligible study design (Letter to the editor)
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	Inspiratory muscle training improves respiratory muscle strength, functional capacity and quality of life in patients with chronic kidney disease: a systematic review. J Physiother Apr 2017;63(2):76-83	(systematic review)
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730	Pozuelo-Carrascosa DP; Torres-Costoso A; Alvarez-Bueno C; Cavero-Redondo I; López Muñoz P; Martínez-Vizcaíno V Multimodality respiratory physiotherapy reduces mortality but may not prevent ventilator-associated pneumonia or reduce length of stay in the intensive care unit: a systematic review. J Physiother Oct 2018;64(4):222-228	Ineligible study design (systematic review)
731	Sharififar S; Shuster JJ; Bishop MD Adding electrical stimulation during standard rehabilitation after stroke to improve motor function. A systematic review and meta-analysis. Ann Phys Rehabil Med Sep 2018;61(5):339-344	Ineligible study design (systematic review and meta-analysis)
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733	Powell JM; Wise EK; Brockway JA; Fraser R; Temkin N; Bell KR Characteristics and Concerns of Caregivers of Adults With Traumatic Brain Injury. J Head Trauma Rehabil Jan/Feb 2017;32(1):E33-E41	Ineligible study design (Secondary data analysis)
734	Moucheboeuf G; Griffier R; Gasq D; Glize B; Bouyer L; Dehail P; Cassoudesalle H Effects of robotic gait training after stroke: a meta-analysis. Ann Phys Rehabil Med Mar 2020;():	Ineligible study design (meta-analysis)
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738	Lewis M; Peiris CL; Shields N Long-term home and community-based exercise programs improve function in community-dwelling older people with cognitive impairment: a systematic review. J Physiother Jan 2017;63(1):23-29	Ineligible study design (systematic review)
739	Moore AJ; Holden MA; Foster NE; Jinks C Therapeutic alliance facilitates adherence to physiotherapy-led exercise and physical activity for older adults with knee pain: a longitudinal qualitative study. J Physiother Jan 2020;66(1):45-53	Ineligible study design (longitudinal qualitative study)
740	Stanton R; Ada L; Dean CM; Preston E Biofeedback improves performance in lower limb activities more than usual therapy in people following stroke: a systematic review. J Physiother Jan 2017;63(1):11-16	Ineligible study design (systematic review)
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746	Gonzalez-Navarro P; Marghi YM; Azari B; Akcakaya M; Erdogmus D An Event-Driven AR-Process Model for EEG-Based BCIs With Rapid Trial Sequences. IEEE Trans Neural Syst Rehabil Eng May 2019;27(5):798-804	Ineligible study design (algorithm/mathematical study)
747	Neumann D; Malec JF; Hammond FM Reductions in Alexithymia and Emotion Dysregulation After Training Emotional Self-Awareness Following Traumatic Brain Injury: A Phase I Trial. J Head Trauma Rehabil Sep/Oct 2017;32(5):286-295	Ineligible study design (Phase 1 trial)
748	Carpinella I; Nardone A; Bonora G; Bowman T; Cattaneo D; Rabuffetti M; Ferrarin M Counteracting Postural Perturbations Through Body Weight Shift: a Pilot Study Using a Robotic Platform in Subjects with Parkinson's Disease. IEEE Trans Neural Syst Rehabil Eng Aug 2018;():	Ineligible study design (pilot study)
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752	Yao L; Mrachacz-Kersting N; Sheng X; Zhu X; Farina D; Jiang N A Multi-Class BCI Based on Somatosensory Imagery. IEEE Trans Neural Syst Rehabil Eng Aug 2018;26(8):1508-1515	Ineligible study design (not an RCT)
753	Lee BC; Kim CS; Seo KH The Body's Compensatory Responses to Unpredictable Trip and Slip Perturbations Induced by a Programmable Split-Belt Treadmill. IEEE Trans Neural Syst Rehabil Eng Jul 2019;27(7):1389-1396	Ineligible study design (not an RCT)
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	Men and Women Demonstrate Differences in Early Functional Recovery After Total Knee Arthroplasty. Arch Phys Med Rehabil Jul 2016;97(7):1154-62	Retrospective analysis)
755	Trammell M; Kapoor P; Swank C; Driver S Improving practice with integration of patient directed activity during inpatient rehabilitation. Clin Rehabil Jan 2017;31(1):3-10	Ineligible study design (RCT protocol/ description)
756	Hua X; Chen LM; Zhu Q; Hu W; Lin C; Long ZQ; Wen W; Sun XQ; Lu ZJ; Chen QY; Luo DH; Sun R; Mo HY; Tang LQ; Zhang WW; He ZY; Mai HQ; Lin HX; Guo L Efficacy of controlled-release oxycodone for reducing pain due to oral mucositis in nasopharyngeal carcinoma patients treated with concurrent chemoradiotherapy: a prospective clinical trial. Support Care Cancer Oct 2019;27(10):3759-3767	Ineligible study design (non-randomized trial)
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760	Manchola-González JD; Bagur-Calafat C; Girabent-Farrés M; Serra-Grima JR; Pérez RÁ; Garnacho-Castaño MV; Badell I; Ramírez-Vélez R Effects of a home-exercise programme in childhood survivors of acute lymphoblastic leukaemia on physical fitness and physical functioning: results of a randomised clinical trial. Support Care Cancer Jul 2020;28(7):3171-3178	Ineligible study design (pilot RCT)
761	Hiyama Y; Kamitani T; Wada O; Mizuno K; Yamada M Effects of Group-Based Exercise on Range of Motion, Muscle Strength, Functional Ability, and Pain During the Acute Phase After Total Knee Arthroplasty: A Controlled Clinical Trial. J Orthop Sports Phys Ther Sep 2016;46(9):742-8	Ineligible study design (prospective observational study)
762	Satpute KH; Bisen R; Lokhande P; Hall T Response to Letter to the Editor regarding "The Effect of Spinal Mobilization With Leg Movement in Patients With Lumbar Radiculopathy-A Double-Blind Randomized Controlled Trial". Arch Phys Med Rehabil Apr 2019;100(4):783-784	Ineligible study design (Letter to the Editor)

763	Russell NS; van Werkhoven E; Schagen SB Quantification of patient-reported outcome measures of radiation-induced skin reactions for use in clinical trial design. Support Care Cancer Jan 2017;25(1):67-74	Ineligible study design (measurement study)
764	Siemens W; Boehlke C; Bennett MI; Offner K; Becker G; Gaertner J Transcutaneous electrical nerve stimulation for advanced cancer pain inpatients in specialist palliative care-a blinded, randomized, sham-controlled pilot cross-over trial. Support Care Cancer Mar 2020;():	Ineligible study design (pilot trial)
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766	Ghosh P; Lazar AA; Ryan WR; Yom SS A feasibility and efficacy trial of a hand-held humidification device in patients undergoing radiotherapy for head and neck cancer. Support Care Cancer Aug 2017;25(8):2611-2618	Ineligible study design (feasibility study)
767	Dornelas BR; Lima FA Effects of daily inspiratory muscle training on respiratory muscle strength and chest wall regional volumes in hemodialysis patients: a randomized clinical trial. Disabil Rehabil Jan 2020;():1	Ineligible study design (Letter to the Editor)
768	Ogawa A; Okumura Y; Fujisawa D; Takei H; Sasaki C; Hirai K; Kanno Y; Higa K; Ichida Y; Sekimoto A; Asanuma C Quality of care in hospitalized cancer patients before and after implementation of a systematic prevention program for delirium: the DELTA exploratory trial. Support Care Cancer Feb 2019;27(2):557-565	Ineligible study design (retrospective study)
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770	Walsh R; Kinsella S The effects of caudal mobilisation with movement (MWM) and caudal self-mobilisation with movement (SMWM) in relation to restricted internal rotation in the hip: A randomised control pilot study. Man Ther Apr 2016;22():9-15	Ineligible study design (pilot study)
771	Mata Diz JB; de Souza JR; Leopoldino AA; Oliveira VC Exercise, especially combined stretching and strengthening exercise, reduces myofascial pain: a systematic review.	Ineligible study design (systematic review)

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774	Jesus TS Systematic Reviews and Clinical Trials in Rehabilitation: Comprehensive Analyses of Publication Trends. Arch Phys Med Rehabil Nov 2016;97(11):1853-1862.e2	Ineligible study design (review paper)
775	George SZ Critically appraised paper: Intensive patient education is no more effective than placebo education for reducing pain intensity in patients with acute low back pain [commentary]. J Physiother Jan 2020;66(1):55	Ineligible study design (commentary)
776	Øiestad BE Critically appraised paper: Intensive patient education is no more effective than placebo education for reducing pain intensity in patients with acute low back pain [synopsis]. J Physiother Jan 2020;66(1):55	Ineligible study design (synopsis)
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779	Finch E; Copley A; Cornwell P; Kelly C Systematic Review of Behavioral Interventions Targeting Social Communication Difficulties After Traumatic Brain Injury. Arch Phys Med Rehabil Aug 2016;97(8):1352-65	Ineligible study design (systematic review)
780	Harrison AL; Shields N; Taylor NF; Frawley HC Exercise improves glycaemic control in women diagnosed with gestational diabetes mellitus: a systematic review.	Ineligible study design (systematic review)

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781	Aguirre LG; Urrunaga-Pastor D; Lazo-Porras M; Taype-Rondan A Post-stroke rehabilitation devices offered via the Internet: Based on randomized controlled evidence? Ann Phys Rehabil Med Jan 2018;61(1):54-55	Ineligible study design (Letter to the editor)
782	Dorsch S; Ada L; Alloggia D Progressive resistance training increases strength after stroke but this may not carry over to activity: a systematic review. J Physiother Apr 2018;64(2):84-90	Ineligible study design (systematic review)
783	Leach HJ; Mama SK; Harden SM Group-based exercise interventions for increasing physical activity in cancer survivors: a systematic review of face-to-face randomized and non-randomized trials. Support Care Cancer May 2019;27(5):1601-1612	Ineligible study design (systematic review)
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785	Ferreira ML Placebo pills provided without deception may help to reduce pain and disability in people with chronic low back pain [commentary]. J Physiother Jul 2017;63(3):183	Ineligible study design (commentary)
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787	Scapini KB; Bohlke M; Moraes OA; Rodrigues CG; Inácio JF; Sbruzzi G; Leguisamo CP; Sanches IC; Tourinho Filho H; Irigoyen MC Combined training is the most effective training modality to improve aerobic capacity and blood pressure control in people requiring haemodialysis for end-stage renal disease: systematic review and network meta-analysis. J Physiother Jan 2019;65(1):4-15	Ineligible study design (systematic review and network meta-analysis)
788	Jette AM; Costa LOP Protecting Against "Publication Spin" in Clinical Trials. Phys Ther Sep 2019;99(9):1119-1121	Ineligible study design (Editorial)
789	Haines TP; Hemming K Stepped-wedge cluster-randomised trials: level of evidence, feasibility and reporting. J Physiother Jan 2018;64(1):63-66	Ineligible study design (Research Note)

790	Azouvi P; Jacquin-Courtois S; Luauté J Rehabilitation of unilateral neglect: Evidence-based medicine. Ann Phys Rehabil Med Jun 2017;60(3):191-197	Ineligible study design (review paper)
791	Elkins MR Assessing baseline comparability in randomised trials. J Physiother Oct 2015;61(4):228-30	Ineligible study design (Research Note)
792	Ariie T Correspondence: Transparency to fully understand randomised controlled trials. J Physiother Apr 2019;65(2):117	Ineligible study design (Correspondence)
793	Economos G; Lovell N; Johnston A; Higginson IJ What is the evidence for mirtazapine in treating cancer-related symptomatology? A systematic review. Support Care Cancer Apr 2020;28(4):1597-1606	Ineligible study design (systematic review)
794	Slade SC; Dionne CE; Underwood M; Buchbinder R; Beck B; Bennell K; Brosseau L; Costa L; Cramp F; Cup E; Feehan L; Ferreira M; Forbes S; Glasziou P; Habets B; Harris S; Hay-Smith J; Hillier S; Hinman R; Holland A; Hondras M; Kelly G; Kent P; Lauret GJ; Long A; Maher C; Morso L; Osteras N; Peterson T; Quinlivan R; Rees K; Regnaux JP; Rietberg M; Saunders D; Skoetz N; Sogaard K; Takken T; van Tulder M; Voet N; Ward L; White C Consensus on Exercise Reporting Template (CERT): Modified Delphi Study. Phys Ther Oct 2016;96(10):1514-1524	Ineligible study design (Delphi study)
795	O'Connell NE; Moseley GL; McAuley JH; Wand BM; Herbert RD Interpreting Effectiveness Evidence in Pain: Short Tour of Contemporary Issues. Phys Ther Aug 2015;95(8):1087-94	Ineligible study design (not an RCT)
796	de Campos TF; Maher CG; Steffens D; Fuller JT; Hancock MJ Exercise programs may be effective in preventing a new episode of neck pain: a systematic review and meta-analysis. J Physiother Jul 2018;64(3):159-165	Ineligible study design (systematic review and meta-analysis)
797	Erbil D; Eren CY; Demirel C; Küçüker MU; Solaroğlu I; Eser HY GLP-1's role in neuroprotection: a systematic review. Brain Inj 2019;33(6):734-819	Ineligible study design (systematic review)
798	Ling G The need for VA leadership in advancing traumatic brain injury care. Brain Inj 2017;31(9):1252-1255	Ineligible study design (review paper)
799	Radossi AL; Taromina K; Marjerrison S; Diorio CJ; Similio R; Njuguna F; Afungchwi GM; Ladas EJ A systematic review of integrative clinical trials for supportive care in pediatric oncology: a	Ineligible study design (systematic review)

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800	Lawler K; Taylor NF; Shields N Family-assisted therapy empowered families of older people transitioning from hospital to the community: a qualitative study. J Physiother Jul 2019;65(3):166-171	Ineligible study design (qualitative study)
801	Jette AM The Next Generation of Clinical Trials. Phys Ther Nov 2019;99(11):1429-1430	Ineligible study design (Editorial)
802	Taito S; Kataoka Y Assessment of publication trends of systematic reviews and randomized controlled trials of rehabilitation. Ann Phys Rehabil Med Apr 2020;():	Ineligible study design (letter to editor)
803	Villemur B; Thoreau V; Guinot M; Gailledrat E; Evra V; Vermorel C; Foote A; Carpentier P; Bosson JL; Pérennou D Short interval or continuous training programs to improve walking distance for intermittent claudication: Pilot study. Ann Phys Rehabil Med Apr 2020;():	Ineligible study design (pilot study)
804	Treacy D; Howard K; Hayes A; Hassett L; Schurr K; Sherrington C Two weeks of additional standing balance circuit classes during inpatient rehabilitation are cost saving and effective: an economic evaluation. J Physiother Jan 2018;64(1):41-47	Ineligible study design (economic evaluation)
805	Hancock MJ; Hill JC Are Small Effects for Back Pain Interventions Really Surprising? J Orthop Sports Phys Ther May 2016;46(5):317-9	Ineligible study design (Viewpoint)
806	Bernhardt J; Borschmann K; Boyd L; Carmichael ST; Corbett D; Cramer SC; Hoffmann T; Kwakkel G; Savitz S; Saposnik G; Walker M; Ward N Moving Rehabilitation Research Forward: Developing Consensus Statements for Rehabilitation and Recovery Research. Neurorehabil Neural Repair Aug 2017;31(8):694-698	Ineligible study design (Consensus statements)
807	Zhong Z; Liu B; Liu G; Chen J; Li Y; Liu X; Hu Y Response to Letter Regarding "A Randomized Controlled Trial on the Effects of Low-Dose Extracorporeal Shockwave Therapy in Patients With Knee Osteoarthritis". Arch Phys Med Rehabil May 2020;():	Ineligible study design (letter)
808	Tan BK; Chua SS; Chen LC; Chang KM; Balashanker S; Bee PC Correction to: Efficacy of a medication management service in improving adherence to tyrosine kinase inhibitors and clinical outcomes of patients with chronic myeloid leukaemia: a	Ineligible study design (Correction for an already included RCT)

	randomised controlled trial. Support Care Cancer Jul 2020;28(7):3249	
809	Chimenti RL; Hall MM; Dilger CP; Merriwether EN; Wilken JM; Sluka KA Local Anesthetic Injection Resolves Movement Pain, Motor Dysfunction, and Pain Catastrophizing in Individuals With Chronic Achilles Tendinopathy: A Nonrandomized Clinical Trial. J Orthop Sports Phys Ther Jun 2020;50(6):334-343	Ineligible study design (Non-randomized clinical trial)
810	Lavender V; Gibson F; Brownsdon A; Fern L; Whelan J; Pearce S Health professional perceptions of communicating with adolescents and young adults about bone cancer clinical trial participation. Support Care Cancer Feb 2019;27(2):467-475	Ineligible study design (narrative inquiry)
811	Skoffer B; Maribo T; Mechlenburg I; Korsgaard CG; Søballe K; Dalgas U Efficacy of preoperative progressive resistance training in patients undergoing total knee arthroplasty: 12-month follow-up data from a randomized controlled trial. Clin Rehabil Jan 2020;34(1):82-90	Ineligible study design (follow-up of previous RCT)
812	Hegland KW; Davenport PW; Brandimore AE; Singletary FF; Troche MS Rehabilitation of Swallowing and Cough Functions Following Stroke: An Expiratory Muscle Strength Training Trial. Arch Phys Med Rehabil Aug 2016;97(8):1345-51	Ineligible study design (non-randomized trial)
813	Roscher M; Munin MC Poster 291 Improved Upper Extremity Spasticity During Continuous Intrathecal Baclofen Trial with High Cervical Catheter Placement: A Case Report. PM R Sep 2016;8(9S):S255	Ineligible study design (Case report)
814	Danielsson L; Waern M; Hensing G; Holmgren K Work-directed rehabilitation or physical activity to support work ability and mental health in common mental disorders: a pilot randomized controlled trial. Clin Rehabil Feb 2020;34(2):170-181	Ineligible study design (pilot RCT)
815	Maeda H; Sato M; Kobayashi M; Takiguchi N; Yoshikawa T; Yoshino S; Yoshida K; Tsuburaya A; Sakamoto J; Morita S Validity of the Japanese version of functional assessment of cancer therapy-gastric (FACT-Ga) and its sensitivity to ascites volume change: a retrospective analysis of Japanese clinical trial participants. Support Care Cancer Nov 2016;24(11):4515-21	Ineligible study design (retrospective analysis)
816	Aguiar LT; Martins JC; Quintino LF; de Brito SAF; Teixeira-Salmela LF; de Morais Faria CDC A Single Trial May Be Used for Measuring Muscle Strength With Dynamometers in Individuals With Stroke: A Cross-Sectional Study. PM R Apr 2019;11(4):372-378	Ineligible study design (cross-sectional study)

817	Lund L; Ross L; Petersen MA; Sengelov L; Groenvold M Response to Letter to the Editor: Improving information to caregivers of cancer patients: the Herlev Hospital Empowerment of Relatives through More and Earlier information Supply (HERMES) randomized controlled trial. Support Care Cancer Feb 2020;28(2):417	Ineligible study design (Letter to the Editor)
818	Chen W; Chang C; Hu Y Single-Trial Extraction of Pure Somatosensory Evoked Potential Based on Expectation Maximization Approach. IEEE Trans Neural Syst Rehabil Eng Jan 2016;24(1):10-9	Ineligible study design (algorithm/mathematical study)
819	Bruder AM; Shields N; Dodd KJ; Hau R; Taylor NF A progressive exercise and structured advice program does not improve activity more than structured advice alone following a distal radial fracture: a multi-centre, randomised trial. J Physiother Jul 2016;62(3):145-52	Ineligible study design (Phase 1 trial)
820	Edwardson MA; Wang X; Liu B; Ding L; Lane CJ; Park C; Nelsen MA; Jones TA; Wolf SL; Winstein CJ; Dromerick AW Stroke Lesions in a Large Upper Limb Rehabilitation Trial Cohort Rarely Match Lesions in Common Preclinical Models. Neurorehabil Neural Repair Jun 2017;31(6):509-520	Ineligible study design (retrospectively data analysis)
821	Ickmans K; Moens M; Putman K; Buyl R; Goudman L; Huysmans E; Diener I; Logghe T; Louw A; Nijs J Back school or brain school for patients undergoing surgery for lumbar radiculopathy? Protocol for a randomised, controlled trial. J Physiother Jul 2016;62(3):165	Ineligible study design (RCT protocol)
822	Au D; Matthew AG; Alibhai SMH; Jones JM; Fleshner NE; Finelli A; Elterman D; Singal RK; Jamnicky L; Faghani N; Hilton WJ; Auger LE; Ritvo P; Trachtenberg J; Santa Mina D Pfilates and Hypopressives for the Treatment of Urinary Incontinence After Radical Prostatectomy: Results of a Feasibility Randomized Controlled Trial. PM R Jan 2020;12(1):55-63	Ineligible study design (feasibility trial)
823	Tomfohr-Madsen L; Madsen JW; Bonneville D; Virani S; Plourde V; Barlow KM; Yeates KO; Brooks BL A Pilot Randomized Controlled Trial of Cognitive-Behavioral Therapy for Insomnia in Adolescents With Persistent Postconcussion Symptoms. J Head Trauma Rehabil Mar/Apr 2020;35(2):E103-E112	Ineligible study design (pilot RCT)
824	Ozgun N; Bennewitz R; Strauss DJ Friction in Passive Tactile Perception Induces Phase Coherency in Late Somatosensory Single Trial Sequences. IEEE Trans Neural Syst Rehabil Eng Feb 2019;27(2):129-138	Ineligible study design (not an RCT)

825	Molla MKI; Morikawa N; Islam MR; Tanaka T Data-Adaptive Spatiotemporal ERP Cleaning for Single-Trial BCI Implementation. IEEE Trans Neural Syst Rehabil Eng Jul 2018;26(7):1334-1344	Ineligible study design (not an RCT)
826	Sainani KL Dealing With Missing Data. PM R Sep 2015;7(9):990-994	Ineligible study design (not an RCT)
827	Junior PNA; Barreto CMN; de Iracema Gomes Cubero D; Del Giglio A The efficacy of placebo for the treatment of cancer-related fatigue: a systematic review and meta-analysis. Support Care Cancer Apr 2020;28(4):1755-1764	Ineligible study design (systematic review and meta-analysis)
828	Howell D Letter to the Editor: 'Effect of stretching with and without muscle strengthening exercises for the foot and hip in patients with plantar fasciitis: A randomized controlled single-blind clinical trial'. Man Ther Jun 2016;23():e12	Ineligible study design (Letter to the editor)
829	Slade SC; Finkelstein DI; McGinley JL; Morris ME Exercise and physical activity for people with Progressive Supranuclear Palsy: a systematic review. Clin Rehabil Jan 2020;34(1):23-33	Ineligible study design (systematic review)
830	Vallat-Azouvi C; Azouvi P; Le-Bornec G; Brunet-Gouet E Treatment of social cognition impairments in patients with traumatic brain injury: a critical review. Brain Inj 2019;33(1):87-93	Ineligible study design (critical review)
831	Huntingdon B; Schofield P; Wolfowicz Z; Bergin R; Kabel D; Edmunds J; Penberthy S; Juraskova I Toward structured peer support interventions in oncology: a qualitative insight into the experiences of gynaecological cancer survivors providing peer support. Support Care Cancer Feb 2016;24(2):849-856	Ineligible study design (qualitative study)
832	Angsupaisal M; Visser B; Alkema A; Meinsma-van der Tuin M; Maathuis CG; Reinders-Messelink H; Hadders-Algra M Therapist-Designed Adaptive Riding in Children With Cerebral Palsy: Results of a Feasibility Study. Phys Ther Aug 2015;95(8):1151-62	Ineligible study design (feasibility study)
833	Yang X; Zhou Y; Wang P; He C; He H Effects of whole body vibration on pulmonary function, functional exercise capacity and quality of life in people with chronic obstructive pulmonary disease: a systematic review. Clin Rehabil May 2016;30(5):419-31	Ineligible study design (systematic review)

834	Guo JB; Chen BL; Lu YM; Zhang WY; Zhu ZJ; Yang YJ; Zhu Y Tai Chi for improving cardiopulmonary function and quality of life in patients with chronic obstructive pulmonary disease: a systematic review and meta-analysis. Clin Rehabil Aug 2016;30(8):750-64	Ineligible study design (systematic review and meta-analysis)
835	Huang J; Han Y; Wei J; Liu X; Du Y; Yang L; Li Y; Yao W; Wang R The effectiveness of the Internet-based self-management program for cancer-related fatigue patients: a systematic review and meta-analysis. Clin Rehabil Mar 2020;34(3):287-298	Ineligible study design (systematic review and meta-analysis)
836	Lee DH; Kwack KS; Rah UW; Yoon SH Prolotherapy for Refractory Rotator Cuff Disease: Retrospective Case-Control Study of 1-Year Follow-Up. Arch Phys Med Rehabil Nov 2015;96(11):2027-32	Ineligible study design (Retrospective case-control study)
837	Swartz MC; Lewis ZH; Lyons EJ; Jennings K; Middleton A; Deer RR; Arnold D; Dresser K; Ottenbacher KJ; Goodwin JS Effect of Home- and Community-Based Physical Activity Interventions on Physical Function Among Cancer Survivors: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Aug 2017;98(8):1652-1665	Ineligible study design (systematic review and meta-analysis)
838	Andringa A; van de Port I; van Wegen E; Ket J; Meskers C; Kwakkel G Effectiveness of Botulinum Toxin Treatment for Upper Limb Spasticity Poststroke Over Different ICF Domains: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Sep 2019;100(9):1703-1725	Ineligible study design (systematic review and meta-analysis)
839	Dranitsaris G.; Mazzarello S.; Smith S.; Vandermeer L.; Bouganim N.; Clemons M. Measuring the impact of guideline-based antiemetic therapy on nausea and vomiting control in breast cancer patients with multiple risk factors. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1563-9	Ineligible study design (exploratory analysis)
840	Carbone LD; Gonzalez B; Miskevics S; Ray C; Etingen B; Guihan M; Craven BC; George V; Weaver FM Association of Bisphosphonate Therapy With Incident of Lower Extremity Fractures in Persons With Spinal Cord Injuries or Disorders. Arch Phys Med Rehabil Apr 2020;101(4):633-641	Ineligible study design (Propensity-matched case-control analyses)
841	Flowers HL; Skoretz SA; Silver FL; Rochon E; Fang J; Flamand-Roze C; Martino R Poststroke Aphasia Frequency, Recovery, and Outcomes: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Dec 2016;97(12):2188-2201.e8	Ineligible study design (systematic review and meta-analysis)
842	Zou L; Han J; Li C; Yeung AS; Hui SS; Tsang WWN; Ren Z; Wang L Effects of Tai Chi on Lower Limb Proprioception in Adults Aged Over 55: A Systematic	Ineligible study design (systematic review and meta-

	Review and Meta-Analysis. Arch Phys Med Rehabil Jun 2019;100(6):1102-1113	analysis)
843	Zou L; Loprinzi PD; Yeung AS; Zeng N; Huang T The Beneficial Effects of Mind-Body Exercises for People With Mild Cognitive Impairment: a Systematic Review With Meta-analysis. Arch Phys Med Rehabil Aug 2019;100(8):1556-1573	Ineligible study design (systematic review and meta-analysis)
844	Heywood S; McClelland J; Mentiplay B; Geigle P; Rahmann A; Clark R Effectiveness of Aquatic Exercise in Improving Lower Limb Strength in Musculoskeletal Conditions: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Jan 2017;98(1):173-186	Ineligible study design (systematic review and meta-analysis)
845	Woolf C.; Caute A.; Haigh Z.; Galliers J.; Wilson S.; Kessie A.; Hirani S.; Hegarty B.; Marshall J. A comparison of remote therapy, face to face therapy and an attention control intervention for people with aphasia: a quasi-randomised controlled feasibility study. Clinical rehabilitation Apr 2016;30(4):359-73	Ineligible study design (feasibility study)
846	Cavallo S; Brosseau L; Toupin-April K; Wells GA; Smith CA; Pugh AG; Stinson J; Thomas R; Ahmed S; Duffy CM; Rahman P; Àlvarez-Gallardo IC; Loew L; De Angelis G; Feldman DE; Majnemer A; Gagnon IJ; Maltais D; Mathieu MÈ; Kenny GP; Tupper S; Whitney-Mahoney K; Bigford S Ottawa Panel Evidence-Based Clinical Practice Guidelines for Structured Physical Activity in the Management of Juvenile Idiopathic Arthritis. Arch Phys Med Rehabil May 2017;98(5):1018-1041	Ineligible study design (review paper)
847	Braun T.; Marks D.; Thiel C.; Zietz D.; Zutter D.; Grüneberg C. Effects of additional, dynamic supported standing practice on functional recovery in patients with sub-acute stroke: a randomized pilot and feasibility trial. Clinical rehabilitation Apr 2016;30(4):374-82	Ineligible study design (pilot and feasibility trial)
848	Palmer K; Bowles KA; Paton M; Jepson M; Lane R Chronic Heart Failure and Exercise Rehabilitation: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Dec 2018;99(12):2570-2582	Ineligible study design (systematic review and meta-analysis)
849	Hornsby E; Johnston LM Effect of Pilates Intervention on Physical Function of Children and Youth: A Systematic Review. Arch Phys Med Rehabil Feb 2020;101(2):317-328	Ineligible study design (systematic review)
850	Xie YJ; Gao Q; He CQ; Bian R Effect of Repetitive Transcranial Magnetic Stimulation on Gait and Freezing of Gait in Parkinson Disease: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Jan 2020;101(1):130-140	Ineligible study design (systematic review and meta-analysis)

851	Abraham DS; Barr E; Ostir GV; Hebel JR; Golden J; Gruber-Baldini AL; Guralnik JM; Hochberg MC; Orwig DL; Resnick B; Magaziner JS Residual Disability, Mortality, and Nursing Home Placement After Hip Fracture Over 2 Decades. Arch Phys Med Rehabil May 2019;100(5):874-882	Ineligible study design (Secondary data analysis)
852	Suri P.; Pearson AM.; Scherer EA.; Zhao W.; Lurie JD.; Morgan TS.; Weinstein JN. Recurrence of Pain After Usual Nonoperative Care for Symptomatic Lumbar Disk Herniation: Analysis of Data From the Spine Patient Outcomes Research Trial. PM & R : the journal of injury, function, and rehabilitation 05 2016;8(5):405-14	Ineligible study design (Secondary data analysis)
853	Garcia AN.; Costa Lda C.; Hancock M.; Costa LO. Identifying Patients With Chronic Low Back Pain Who Respond Best to Mechanical Diagnosis and Therapy: Secondary Analysis of a Randomized Controlled Trial. Physical therapy May 2016;96(5):623-30	Ineligible study design (Secondary data analysis)
854	Singh B; Spence RR; Steele ML; Sandler CX; Peake JM; Hayes SC A Systematic Review and Meta-Analysis of the Safety, Feasibility, and Effect of Exercise in Women With Stage II+ Breast Cancer. Arch Phys Med Rehabil Dec 2018;99(12):2621-2636	Ineligible study design (Systematic review and meta-analysis)
855	Alsubheen SA; Nazari G; Bobos P; MacDermid JC; Overend TJ; Faber K Effectiveness of Nonsurgical Interventions for Managing Adhesive Capsulitis in Patients With Diabetes: A Systematic Review. Arch Phys Med Rehabil Feb 2019;100(2):350-365	Ineligible study design (Systematic review)
856	Wu F; Liu Y; Ye G; Zhang Y Respiratory muscle training improves strength and decreases the risk of respiratory complications in stroke survivors: a systematic review and meta-analysis. Arch Phys Med Rehabil May 2020;():	Ineligible study design (Systematic review and meta-analysis)
857	Dyer JR.; Williams R.; Bombardier CH.; Vannoy S.; Fann JR. Evaluating the Psychometric Properties of 3 Depression Measures in a Sample of Persons With Traumatic Brain Injury and Major Depressive Disorder. The Journal of head trauma rehabilitation ;31(3):225-32	Ineligible study design (Secondary data analysis)
858	Karamians R; Proffitt R; Kline D; Gauthier LV Effectiveness of Virtual Reality- and Gaming-Based Interventions for Upper Extremity Rehabilitation Poststroke: A Meta-analysis. Arch Phys Med Rehabil May 2020;101(5):885-896	Ineligible study design (meta-analysis)
859	Lee AL; Hill CJ; McDonald CF; Holland AE Pulmonary Rehabilitation in Individuals With Non-Cystic Fibrosis Bronchiectasis: A Systematic Review. Arch Phys Med Rehabil Apr 2017;98(4):774-782.e1	Ineligible study design (Systematic review)

860	Wattchow KA; McDonnell MN; Hillier SL Rehabilitation Interventions for Upper Limb Function in the First Four Weeks Following Stroke: A Systematic Review and Meta-Analysis of the Evidence. Arch Phys Med Rehabil Feb 2018;99(2):367-382	Ineligible study design (Systematic review and meta-analysis)
861	van Kessel K.; Wouldes T.; Moss-Morris R. A New Zealand pilot randomized controlled trial of a web-based interactive self-management programme (MSInvigor8) with and without email support for the treatment of multiple sclerosis fatigue. Clinical rehabilitation May 2016;30(5):454-62	Ineligible study design (pilot RCT)
862	Schlick C.; Ernst A.; Bötzel K.; Plate A.; Pelykh O.; Ilmberger J. Visual cues combined with treadmill training to improve gait performance in Parkinson's disease: a pilot randomized controlled trial. Clinical rehabilitation May 2016;30(5):463-71	Ineligible study design (pilot RCT)
863	Cudejko T; van der Esch M; van der Leeden M; Roorda LD; Pallari J; Bennell KL; Lund H; Dekker J Effect of Soft Braces on Pain and Physical Function in Patients With Knee Osteoarthritis: Systematic Review With Meta-Analyses. Arch Phys Med Rehabil Jan 2018;99(1):153-163	Ineligible study design (Systematic review and meta-analysis)
864	Kuijlaars IAR; Sweerts L; Nijhuis-van der Sanden MWG; van Balen R; Staal JB; van Meeteren NLU; Hoogeboom TJ Effectiveness of Supervised Home-Based Exercise Therapy Compared to a Control Intervention on Functions, Activities, and Participation in Older Patients After Hip Fracture: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Jan 2019;100(1):101-114.e6	Ineligible study design (Systematic review and meta-analysis)
865	Chuatrakoon B; Ngai SPC; Sungkarat S; Uthaikhup S Balance Impairment and Effectiveness of Exercise Intervention in Chronic Obstructive Pulmonary Disease-A Systematic Review. Arch Phys Med Rehabil Feb 2020;():	Ineligible study design (Systematic review)
866	Cai Y; Zhang CS; Liu S; Wen Z; Zhang AL; Guo X; Lu C; Xue CC Electroacupuncture for Poststroke Spasticity: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Dec 2017;98(12):2578-2589.e4	Ineligible study design (Systematic review and meta-analysis)
867	Cheung EYY; Ng TKW; Yu KKK; Kwan RLC; Cheing GLY Robot-Assisted Training for People With Spinal Cord Injury: A Meta-Analysis. Arch Phys Med Rehabil Nov 2017;98(11):2320-2331.e12	Ineligible study design (meta-analysis)
868	Kottschade L.; Novotny P.; Lyss A.; Mazurczak M.; Loprinzi C.; Barton D. Chemotherapy-induced nausea and vomiting: incidence and characteristics of persistent symptoms and future directions NCCTG N08C3 (Alliance).	Ineligible study design (Secondary data analysis)

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869	Gilmore N; Dwyer M; Kiran S Benchmarks of Significant Change After Aphasia Rehabilitation. Arch Phys Med Rehabil Jun 2019;100(6):1131-1139.e87	Ineligible study design (review paper)
870	Svege I.; Fernandes L.; Nordsletten L.; Holm I.; Risberg MA. Long-Term Effect of Exercise Therapy and Patient Education on Impairments and Activity Limitations in People With Hip Osteoarthritis: Secondary Outcome Analysis of a Randomized Clinical Trial. Physical therapy Jun 2016;96(6):818-27	Ineligible study design (Secondary data analysis)
871	Mehta S; McIntyre A; Janzen S; Loh E; Teasell R Systematic Review of Pharmacologic Treatments of Pain After Spinal Cord Injury: An Update. Arch Phys Med Rehabil Aug 2016;97(8):1381-1391.e1	Ineligible study design (Systematic review)
872	Saeys W.; Vereeck L.; Lafosse C.; Truijen S.; Wuyts FL.; Van De Heyning P. Transcranial direct current stimulation in the recovery of postural control after stroke: a pilot study. Disability and rehabilitation 2015;37(20):1857-63	Ineligible study design (pilot study)
873	Marzolini S.; Brooks D.; Oh P.; Jagroop D.; MacIntosh BJ.; Anderson ND.; Alter D.; Corbett D. Aerobic With Resistance Training or Aerobic Training Alone Poststroke: A Secondary Analysis From a Randomized Clinical Trial. Neurorehabilitation and neural repair 03 2018;32(3):209-222	Ineligible study design (Secondary data analysis)
874	Paravlic AH; Tod D; Milanovic Z Mental simulation practice has beneficial effects on patients' physical function following lower limb arthroplasty: a systematic review and meta-analysis. Arch Phys Med Rehabil May 2020;():	Ineligible study design (systematic review and meta-analysis)
875	Meadows KL.; Rushing C.; Honeycutt W.; Latta K.; Howard L.; Arrowood CA.; Niedzwiecki D.; Hurwitz HI. Treatment of palmar-plantar erythrodysesthesia (PPE) with topical sildenafil: a pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2015;23(5):1311-9	Ineligible study design (pilot study)
876	Hade EM; Bogner J; Corrigan JD; Horn SD; Peng J Comparative Effectiveness of Inpatient Rehabilitation Interventions for Traumatic Brain Injury: Introduction. Arch Phys Med Rehabil Oct 2019;100(10):1986-1989	Ineligible study design (Special communication)
877	Gesslbauer C.; Vavti N.; Keilani M.; Mickel M.; Crevenna R. Effectiveness of osteopathic manipulative treatment versus osteopathy in the cranial field in	Ineligible study design (pilot study)

	temporomandibular disorders - a pilot study. Disability and rehabilitation Mar 2018;40(6):631-636	
878	Gu P; Ran JJ Retraction notice to "Electrical Stimulation for Hemiplegic Shoulder Function: A Systematic Review and Meta-Analysis of 15 Randomized Controlled Trials" [Arch Phys Med Rehabil. 97 (2016) 1588-94]. Arch Phys Med Rehabil Sep 2017;98(9):1906	Ineligible study design (study retracted)
879	Trachootham D.; Songkaew W.; Hongsachum B.; Wattana C.; Changkluengdee N.; Karapoch J.; Thirdsuttironnapumi S.; Meennuch E.; Klaitong C.; Sinthusek T.; Lam-ubol A. Nutri-jelly may improve quality of life and decrease tube feeding demand in head and neck cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2015;23(5):1421-30	Ineligible study design (quasi-randomized trial)
880	Babaei-Ghazani A; Roomizadeh P; Forogh B; Moeini-Taba SM; Abedini A; Kadkhodaie M; Jahanjoo F; Eftekharsadat B Ultrasound-Guided Versus Landmark-Guided Local Corticosteroid Injection for Carpal Tunnel Syndrome: A Systematic Review and Meta-Analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Apr 2018;99(4):766-775	Ineligible study design (systematic review and meta-analysis)
881	Romkema S.; Bongers RM.; van der Sluis CK. Intermanual transfer effect in young children after training in a complex skill: mechanistic, pseudorandomized, pretest-posttest study. Physical therapy May 2015;95(5):730-9	Ineligible study design (pseudorandomized)
882	Jang KU.; Choi JS.; Mun JH.; Jeon JH.; Seo CH.; Kim JH. Multi-axis shoulder abduction splint in acute burn rehabilitation: a randomized controlled pilot trial. Clinical rehabilitation May 2015;29(5):439-46	Ineligible study design (pilot trial)
883	Harris-Hayes M.; Steger-May K.; van Dillen LR.; Schootman M.; Salsich GB.; Czuppon S.; Clohisy JC.; Commean PK.; Hillen TJ.; Sahrmann SA.; Mueller MJ. Reduced Hip Adduction Is Associated With Improved Function After Movement-Pattern Training in Young People With Chronic Hip Joint Pain. The Journal of orthopaedic and sports physical therapy Apr 2018;48(4):316-324	Ineligible study design (sub-study of larger RCT)
884	Heerey J.; Risberg MA.; Magnus J.; Moksnes H.; Ødegaard T.; Crossley K.; Kemp JL. Impairment-Based Rehabilitation Following Hip Arthroscopy: Postoperative Protocol for the HIP ARThroscopy International Randomized Controlled Trial. The Journal of orthopaedic and sports physical therapy Apr 2018;48(4):336-342	Ineligible study design (RCT protocol)
885	Kemp JL.; Coburn SL.; Jones DM.; Crossley KM. The Physiotherapy for Femoroacetabular Impingement Rehabilitation STudy (physioFIRST): A Pilot Randomized Controlled Trial.	Ineligible study design (RCT protocol)

	The Journal of orthopaedic and sports physical therapy Apr 2018;48(4):307-315	
886	Thompson DP.; Woby SR. The processes underpinning reductions in disability among people with chronic neck pain. A preliminary comparison between two distinct types of physiotherapy intervention. Disability and rehabilitation Apr 2018;40(7):779-783	Ineligible study design (sub-study of larger RCT)
887	Koenig C; Schneider C; Morgan JE; Ammann RA; Sung L; Phillips B Interventions aiming to reduce time to antibiotics (TTA) in patients with fever and neutropenia during chemotherapy for cancer (FN), a systematic review. Support Care Cancer May 2020;28(5):2369-2380	Ineligible study design (systematic review)
888	Zadro JR; O'Keeffe M; Allison JL; Lembke KA; Forbes JL; Maher CG Effectiveness of Implementation Strategies to Improve Adherence of Physical Therapist Treatment Choices to Clinical Practice Guidelines for Musculoskeletal Conditions: Systematic Review. Phys Ther Jun 2020;():	Ineligible study design (systematic review)
889	Banerjee S.; Manley K.; Shaw B.; Lewis L.; Cucato G.; Mills R.; Rochester M.; Clark A.; Saxton JM. Vigorous intensity aerobic interval exercise in bladder cancer patients prior to radical cystectomy: a feasibility randomised controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2018;26(5):1515-1523	Ineligible study design (feasibility RCT)
890	Hu Y; Liu T; Li F Association between dyadic interventions and outcomes in cancer patients: a meta-analysis. Support Care Cancer Mar 2019;27(3):745-761	Ineligible study design (meta-analysis)
891	Orgiano L; Pani F; Astara G; Madeddu C; Marini S; Manca A; Mantovani G The role of "closed abdomen" hyperthermic intraperitoneal chemotherapy (HIPEC) in the palliative treatment of neoplastic ascites from peritoneal carcinomatosis: report of a single-center experience. Support Care Cancer Oct 2016;24(10):4293-9	Ineligible study design (non-randomized study)
892	Huang HP.; Wen FH.; Tsai JC.; Lin YC.; Shun SC.; Chang HK.; Wang JS.; Jane SW.; Chen MC.; Chen ML. Adherence to prescribed exercise time and intensity declines as the exercise program proceeds: findings from women under treatment for breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2015;23(7):2061-71	Ineligible study design (sub-study of larger RCT)
893	Washington KT.; Pike KC.; Demiris G.; Oliver DP. Unique characteristics of informal hospice cancer caregiving. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2015;23(7):2121-8	Ineligible study design (Secondary data analysis)

894	Liao LR.; Ng GY.; Jones AY.; Pang MY. Cardiovascular Stress Induced by Whole-Body Vibration Exercise in Individuals With Chronic Stroke. Physical therapy Jul 2015;95(7):966-77	Ineligible study design (not a parallel group RCT)
895	Balemans AC.; van Wely L.; Becher JG.; Dallmeijer AJ. Longitudinal Relationship Among Physical Fitness, Walking-Related Physical Activity, and Fatigue in Children With Cerebral Palsy. Physical therapy Jul 2015;95(7):996-1005	Ineligible study design (Secondary data analysis)
896	Carter SJ.; Hunter GR.; Norian LA.; Turan B.; Rogers LQ. Ease of walking associates with greater free-living physical activity and reduced depressive symptomology in breast cancer survivors: pilot randomized trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2018;26(5):1675-1683	Ineligible study design (pilot trial)
897	Huebner ARS.; Cassedy A.; Brown TM.; Taylor HG.; Stancin T.; Kirkwood MW.; Wade SL. Use of Mental Health Services by Adolescents After Traumatic Brain Injury: A Secondary Analysis of a Randomized Controlled Trial. PM & R : the journal of injury, function, and rehabilitation 05 2018;10(5):462-471	Ineligible study design (Secondary data analysis)
898	Rodríguez-Mansilla J.; González López-Arza MV.; Varela-Donoso E.; Montanero-Fernández J.; González Sánchez B.; Garrido-Ardila EM. The effects of ear acupressure, massage therapy and no therapy on symptoms of dementia: a randomized controlled trial. Clinical rehabilitation Jul 2015;29(7):683-93	Ineligible study design (pilot RCT)
899	Theadom A.; Barker-Collo S.; Jones K.; Dudley M.; Vincent N.; Feigin V. A pilot randomized controlled trial of on-line interventions to improve sleep quality in adults after mild or moderate traumatic brain injury. Clinical rehabilitation May 2018;32(5):619-629	Ineligible study design (pilot RCT)
900	van der Meulen IC.; May AM.; de Leeuw JR.; Koole R.; Oosterom M.; Hordijk GJ.; Ros WJ. Moderators of the response to a nurse-led psychosocial intervention to reduce depressive symptoms in head and neck cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2015;23(8):2417-26	Ineligible study design (Secondary data analysis)
901	Ferraz DD.; Trippo KV.; Duarte GP.; Neto MG.; Bernardes Santos KO.; Filho JO. The Effects of Functional Training, Bicycle Exercise, and Exergaming on Walking Capacity of Elderly Patients With Parkinson Disease: A Pilot Randomized Controlled Single-blinded Trial. Archives of physical medicine and rehabilitation 05 2018;99(5):826-833	Ineligible study design (pilot RCT)
902	Vanoglio F.; Bernocchi P.; Mulè C.; Garofali F.; Mora C.; Taveggia G.; Scalvini S.; Luisa A. Feasibility and efficacy of a robotic device for hand rehabilitation in hemiplegic stroke patients:	Ineligible study design (pilot RCT)

	a randomized pilot controlled study. Clinical rehabilitation Mar 2017;31(3):351-360	
903	Villafañe JH.; Isgrò M.; Borsatti M.; Berjano P.; Pirali C.; Negrini S. Effects of action observation treatment in recovery after total knee replacement: a prospective clinical trial. Clinical rehabilitation Mar 2017;31(3):361-368	Ineligible study design (pilot RCT)
904	Duan B; Xie J; Rui Q; Zhang W; Xi Z Effects of Shengmai injection add-on therapy to chemotherapy in patients with non-small cell lung cancer: a meta-analysis. Support Care Cancer Jul 2018;26(7):2103-2111	Ineligible study design (meta-analysis)
905	Wu Y; Wang Q; Zhang J; Cao J; Wang B; Hu X Incidence of peripheral neuropathy associated with eribulin mesylate versus vinorelbine in patients with metastatic breast cancer: sub-group analysis of a randomized phase III study. Support Care Cancer Dec 2019;():	Ineligible study design (sub-group data analysis)
906	Baumann FT.; Bieck O.; Oberste M.; Kuhn R.; Schmitt J.; Wentrock S.; Zopf E.; Bloch W.; Schüle K.; Reuss-Borst M. Sustainable impact of an individualized exercise program on physical activity level and fatigue syndrome on breast cancer patients in two German rehabilitation centers. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 04 2017;25(4):1047-1054	Ineligible study design (quasi-randomized study)
907	Hansen PB.; Penkowa M. Bismuth adjuvant ameliorates adverse effects of high-dose chemotherapy in patients with multiple myeloma and malignant lymphoma undergoing autologous stem cell transplantation: a randomised, double-blind, prospective pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 04 2017;25(4):1279-1289	Ineligible study design (pilot study)
908	Carlson LE.; Rouleau CR.; Speca M.; Robinson J.; Bultz BD. Brief supportive-expressive group therapy for partners of men with early stage prostate cancer: lessons learned from a negative randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 04 2017;25(4):1035-1041	Ineligible study design (pilot study)
909	Martín-Pintado-Zugasti A.; López-López A.; González Gutiérrez JL.; Pecos-Martín D.; Rodríguez-Fernández ÁL.; Alguacil-Diego IM.; Gallego-Izquierdo T.; Fernández-Camero J. The Role of Psychological Factors in the Perception of Postneedling Soreness and the Influence of Postneedling Intervention. PM & R : the journal of injury, function, and rehabilitation Apr 2017;9(4):348-355	Ineligible study design (observational study)
910	Zhang Q; Zhao H; Zheng Y Effectiveness of mindfulness-based stress reduction (MBSR) on symptom variables and health-	Ineligible study design (systematic review and meta-

	related quality of life in breast cancer patients-a systematic review and meta-analysis. Support Care Cancer Mar 2019;27(3):771-781	analysis)
911	Stubbs B; Brefka S; Denkinger MD What Works to Prevent Falls in Community-Dwelling Older Adults? Umbrella Review of Meta-analyses of Randomized Controlled Trials. Phys Ther Aug 2015;95(8):1095-110	Ineligible study design (Umbrella review of meta-analyses)
912	Skidmore ER.; Butters M.; Whyte E.; Grattan E.; Shen J.; Terhorst L. Guided Training Relative to Direct Skill Training for Individuals With Cognitive Impairments After Stroke: A Pilot Randomized Trial. Archives of physical medicine and rehabilitation 04 2017;98(4):673-680	Ineligible study design (pilot trial)
913	Chen IH.; Yang YR.; Lu CF.; Wang RY. Novel gait training alters functional brain connectivity during walking in chronic stroke patients: a randomized controlled pilot trial. Journal of neuroengineering and rehabilitation 02 2019;16(1):33	Ineligible study design (pilot trial)
914	Jeng B; Sasaki JE; Cederberg KL; Motl RW Sociodemographic and clinical correlates of device-measured sedentary behaviour in multiple sclerosis. Disabil Rehabil May 2019;():1-7	Ineligible study design (not an RCT)
915	Bezzoli E; Andreotti D; Pianta L; Mascheroni M; Piccinno L; Puricelli L; Cimolin V; Salvadori A; Codecasa F; Capodaglio P Motor control exercises of the lumbar-pelvic region improve respiratory function in obese men. A pilot study. Disabil Rehabil Jan 2018;40(2):152-158	Ineligible study design (pilot study)
916	Romeo A; Vanti C; Boldrini V; Ruggeri M; Guccione AA; Pillastrini P; Bertozzi L Cervical Radiculopathy: Effectiveness of Adding Traction to Physical Therapy-A Systematic Review and Meta-Analysis of Randomized Controlled Trials. Phys Ther Apr 2018;98(4):231-242	Ineligible study design (Systematic review and meta-analysis)
917	Fernandes HA; Richard NM; Edelstein K Cognitive rehabilitation for cancer-related cognitive dysfunction: a systematic review. Support Care Cancer Sep 2019;27(9):3253-3279	Ineligible study design (Systematic review)
918	Hinman RS.; Lawford BJ.; Campbell PK.; Briggs AM.; Gale J.; Bills C.; French SD.; Kasza J.; Forbes A.; Harris A.; Bunker SJ.; Delany CM.; Bennell KL. Telephone-Delivered Exercise Advice and Behavior Change Support by Physical Therapists for People with Knee Osteoarthritis: Protocol for the Telecare Randomized Controlled Trial. Physical therapy May 2017;97(5):524-536	Ineligible study design (RCT protocol)
919	Hawke LJ; Shields N; Dowsey MM; Choong PFM; Taylor NF Effectiveness of behavioural interventions on physical activity levels after hip or knee joint	Ineligible study design (Systematic review)

	replacement: a systematic review. Disabil Rehabil May 2019;():1-8	
920	Harvey M.; Weston KL.; Gray WK.; O'Callaghan A.; Oates LL.; Davidson R.; Walker RW. High-intensity interval training in people with Parkinson's disease: a randomized, controlled feasibility trial. Clinical rehabilitation Mar 2019;33(3):428-438	Ineligible study design (feasibility trial)
921	Pagulayan KF.; O'Neil M.; Williams RM.; Turner AP.; Golshan S.; Roost MS.; Laman-Maharg B.; Huckans M.; Storzbach D.; Twamley EW. Mental Health Does Not Moderate Compensatory Cognitive Training Efficacy for Veterans With a History of Mild Traumatic Brain Injury. Archives of physical medicine and rehabilitation 09 2017;98(9):1893-1896.e2	Ineligible study design (Secondary data analysis)
922	Stark A.; Färber C.; Tetzlaff B.; Scherer M.; Barzel A. Stroke patients' and non-professional coaches' experiences with home-based constraint-induced movement therapy: a qualitative study. Clinical rehabilitation Sep 2019;33(9):1527-1539	Ineligible study design (qualitative study)
923	Bueno-Antequera J.; Oviedo-Caro MÁ.; Munguía-Izquierdo D. Feasibility and effects of an exercise-based intervention in prison inmates with psychiatric disorders: the PsychiActive project randomized controlled trial. Clinical rehabilitation Oct 2019;33(10):1661-1671	Ineligible study design (FeasibilityRCT)
924	Lawler K.; Shields N.; Taylor NF. Training family to assist with physiotherapy for older people transitioning from hospital to the community: a pilot randomized controlled trial. Clinical rehabilitation Oct 2019;33(10):1625-1635	Ineligible study design (pilot RCT)
925	Gerlach S; Mermier C; Kravitz L; Degnan J; Dalleck L; Zuhl M Comparison of Treadmill and Cycle Ergometer Exercise During Cardiac Rehabilitation: A Meta-analysis. Arch Phys Med Rehabil Apr 2020;101(4):690-699	Ineligible study design (Meta-analysis)
926	Rand D.; Weingarden H.; Weiss R.; Yacoby A.; Reif S.; Malka R.; Shiller DA.; Zeilig G. Self-training to improve UE function at the chronic stage post-stroke: a pilot randomized controlled trial. Disability and rehabilitation 07 2017;39(15):1541-1548	Ineligible study design (pilot RCT)
927	Huang HC; Huang YC; Lin MF; Hou WH; Shyu ML; Chiu HY; Chang HJ Effects of Home-Based Supportive Care on Improvements in Physical Function and Depressive Symptoms in Patients With Stroke: A Meta-Analysis. Arch Phys Med Rehabil Aug 2017;98(8):1666-1677.e1	Ineligible study design (Meta-analysis)
928	King MT; Agar M; Currow DC; Hardy J; Fazekas B; McCaffrey N Assessing quality of life in palliative care settings: head-to-head comparison of four patient-	Ineligible study design (Secondary data analysis)

	reported outcome measures (EORTC QLQ-C15-PAL, FACT-Pal, FACT-Pal-14, FACT-G7). Support Care Cancer Jan 2020;28(1):141-153	
929	Stephen J; Rojubally A; Linden W; Zhong L; Mackenzie G; Mahmoud S; Giese-Davis J Online support groups for young women with breast cancer: a proof-of-concept study. Support Care Cancer Jul 2017;25(7):2285-2296	Ineligible study design (proof-of-concept study)
930	Simon AM; Fey NP; Ingraham KA; Finucane SB; Halsne EG; Hargrove LJ Improved Weight-Bearing Symmetry for Transfemoral Amputees During Standing Up and Sitting Down With a Powered Knee-Ankle Prosthesis. Arch Phys Med Rehabil Jul 2016;97(7):1100-6	Ineligible study design (not an RCT)
931	Khan F; Amatya B; Gosney J; Rathore FA; Burkle FM Jr Medical Rehabilitation in Natural Disasters: A Review. Arch Phys Med Rehabil Sep 2015;96(9):1709-27	Ineligible study design (review paper)
932	Campbell E; Coulter EH; Mattison PG; Miller L; McFadyen A; Paul L Physiotherapy Rehabilitation for People With Progressive Multiple Sclerosis: A Systematic Review. Arch Phys Med Rehabil Jan 2016;97(1):141-51.e3	Ineligible study design (Systematic review)
933	Ferreira GD; Bohlke M; Correa CM; Dias EC; Orcy RB Does Intradialytic Exercise Improve Removal of Solutes by Hemodialysis? A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Dec 2019;100(12):2371-2380	Ineligible study design (Systematic review and meta-analysis)
934	Chi NF; Huang YC; Chiu HY; Chang HJ; Huang HC Systematic Review and Meta-Analysis of Home-Based Rehabilitation on Improving Physical Function Among Home-Dwelling Patients With a Stroke. Arch Phys Med Rehabil Feb 2020;101(2):359-373	Ineligible study design (Systematic review and meta-analysis)
935	Sherer M; Poritz JMP; Tulsky D; Kisala P; Leon-Novelo L; Ngan E Conceptual Structure of Health-Related Quality of Life for Persons With Traumatic Brain Injury: Confirmatory Factor Analysis of the TBI-QOL. Arch Phys Med Rehabil Jan 2020;101(1):62-71	Ineligible study design (measurement study)
936	Williams G; Hassett L; Clark R; Bryant A; Olver J; Morris ME; Ada L Improving Walking Ability in People With Neurologic Conditions: A Theoretical Framework for Biomechanics-Driven Exercise Prescription. Arch Phys Med Rehabil Jun 2019;100(6):1184-1190	Ineligible study design (Special communication)
937	Newman M; Minns Lowe C; Barker K Spinal Orthoses for Vertebral Osteoporosis and Osteoporotic Vertebral Fracture: A Systematic Review. Arch Phys Med Rehabil Jun 2016;97(6):1013-25	Ineligible study design (Systematic review)

938	Bourseul JS; Molina A; Lintanf M; Houx L; Chaléat-Valayer E; Pons C; Brochard S Early Botulinum Toxin Injections in Infants With Musculoskeletal Disorders: A Systematic Review of Safety and Effectiveness. Arch Phys Med Rehabil Jun 2018;99(6):1160-1176.e5	Ineligible study design (Systematic review)
939	Heller M; Retzl I; Kiselka A; Greisberger A Perception of Muscular Effort During Dynamic Elbow Extension in Multiple Sclerosis. Arch Phys Med Rehabil Feb 2016;97(2):252-8	Ineligible study design (Case-control study)
940	Peiris CL; Shields N; Brusco NK; Watts JJ; Taylor NF Additional Physical Therapy Services Reduce Length of Stay and Improve Health Outcomes in People With Acute and Subacute Conditions: An Updated Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Nov 2018;99(11):2299-2312	Ineligible study design (Systematic review and meta-analysis)
941	He P; Guo C; Luo Y; Wen X; Salas JMI; Chen G; Zheng X Trends in Rehabilitation Services Use in Chinese Children and Adolescents With Intellectual Disabilities: 2007-2013. Arch Phys Med Rehabil Dec 2017;98(12):2408-2415	Ineligible study design (population-based study)
942	Hong Z; Sui M; Zhuang Z; Liu H; Zheng X; Cai C; Jin D Effectiveness of Neuromuscular Electrical Stimulation on Lower Limbs of Patients With Hemiplegia After Chronic Stroke: A Systematic Review. Arch Phys Med Rehabil May 2018;99(5):1011-1022.e1	Ineligible study design (Systematic review)
943	Kreitzer N; Kurowski BG; Bakas T Systematic Review of Caregiver and Dyad Interventions After Adult Traumatic Brain Injury. Arch Phys Med Rehabil Nov 2018;99(11):2342-2354	Ineligible study design (Systematic review)
944	Levasseur M; Roy M; Michallet B; St-Hilaire F; Maltais D; Généreux M Associations Between Resilience, Community Belonging, and Social Participation Among Community-Dwelling Older Adults: Results From the Eastern Townships Population Health Survey. Arch Phys Med Rehabil Dec 2017;98(12):2422-2432	Ineligible study design (Cross-sectional; secondary data analyses)
945	Zhang Q; Fu C; Huang L; Xiong F; Peng L; Liang Z; Chen L; He C; Wei Q Efficacy of Extracorporeal Shockwave Therapy on Pain and Function in Myofascial Pain Syndrome of the Trapezius: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Mar 2020;():	Ineligible study design (Systematic review and meta-analysis)
946	Gunning E; Uszynski MK Effectiveness of the Proprioceptive Neuromuscular Facilitation Method on Gait Parameters in Patients With Stroke: A Systematic Review. Arch Phys Med Rehabil May 2019;100(5):980-986	Ineligible study design (Systematic review)

947	Thanikachalam V; Phadke CP; Ismail F; Boulias C Effect of Botulinum Toxin on Clonus: A Systematic Review. Arch Phys Med Rehabil Feb 2017;98(2):381-390	Ineligible study design (Systematic review)
948	Dong Y; Wang W; Zheng J; Chen S; Qiao J; Wang X Whole Body Vibration Exercise for Chronic Musculoskeletal Pain: A Systematic Review and Meta-analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Nov 2019;100(11):2167-2178	Ineligible study design (Systematic review and meta-analysis)
949	Gu P; Ran JJ RETRACTED: Electrical Stimulation for Hemiplegic Shoulder Function: A Systematic Review and Meta-Analysis of 15 Randomized Controlled Trials. Arch Phys Med Rehabil Sep 2016;97(9):1588-1594	Ineligible study design (Systematic review and meta-analysis)
950	Rintala A; Päivärinne V; Hakala S; Paltamaa J; Heinonen A; Karvanen J; Sjögren T Effectiveness of Technology-Based Distance Physical Rehabilitation Interventions for Improving Physical Functioning in Stroke: A Systematic Review and Meta-analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Jul 2019;100(7):1339-1358	Ineligible study design (Systematic review and meta-analysis)
951	Kuntze G; Nesbitt C; Whittaker JL; Nettel-Aguirre A; Toomey C; Esau S; Doyle-Baker PK; Shank J; Brooks J; Benseler S; Emery CA Exercise Therapy in Juvenile Idiopathic Arthritis: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Jan 2018;99(1):178-193.e1	Ineligible study design (Systematic review and meta-analysis)
952	Malec JF; Whiteneck GG; Bogner JA Another Look at the PART-O Using the Traumatic Brain Injury Model Systems National Database: Scoring to Optimize Psychometrics. Arch Phys Med Rehabil Feb 2016;97(2):211-7	Ineligible study design (retrospective study)
953	Singh B; Disipio T; Peake J; Hayes SC Systematic Review and Meta-Analysis of the Effects of Exercise for Those With Cancer-Related Lymphedema. Arch Phys Med Rehabil Feb 2016;97(2):302-315.e13	Ineligible study design (Systematic review and meta-analysis)
954	Moon Y; Sosnoff JJ Safe Landing Strategies During a Fall: Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Apr 2017;98(4):783-794	Ineligible study design (Systematic review and meta-analysis)
955	Keogh JW; Senior H; Beller EM; Henwood T Prevalence and Risk Factors for Low Habitual Walking Speed in Nursing Home Residents: An Observational Study. Arch Phys Med Rehabil Nov 2015;96(11):1993-9	Ineligible study design (Observational study)
956	Nightingale TE; Metcalfe RS; Vollaard NB; Bilzon JL	Ineligible study design (not an

	Exercise Guidelines to Promote Cardiometabolic Health in Spinal Cord Injured Humans: Time to Raise the Intensity? Arch Phys Med Rehabil Aug 2017;98(8):1693-1704	RCT)
957	de Almeida MO; Saragiotto BT; Maher C; Costa LOP Allocation Concealment and Intention-To-Treat Analysis Do Not Influence the Treatment Effects of Physical Therapy Interventions in Low Back Pain Trials: a Meta-epidemiologic Study. Arch Phys Med Rehabil Jul 2019;100(7):1359-1366	Ineligible study design (Meta-epidemiologic study)
958	Catapano M; Catapano J; Borschel G; Alavinia SM; Robinson LR; Mittal N Effectiveness of Platelet-Rich Plasma Injections for Nonsurgical Management of Carpal Tunnel Syndrome: A Systematic Review and Meta-analysis of Randomized Controlled Trials. Arch Phys Med Rehabil May 2020;101(5):897-906	Ineligible study design (Systematic review and meta-analysis)
959	Elbanna ST; Elshennawy S; Ayad MN Noninvasive Brain Stimulation for Rehabilitation of Pediatric Motor Disorders Following Brain Injury: Systematic Review of Randomized Controlled Trials. Arch Phys Med Rehabil Oct 2019;100(10):1945-1963	Ineligible study design (Systematic review)
960	Azevedo DC.; Van Dillen LR.; Santos Hde O.; Oliveira DR.; Ferreira PH.; Costa LO. Movement System Impairment-Based Classification Versus General Exercise for Chronic Low Back Pain: Protocol of a Randomized Controlled Trial. Physical therapy Sep 2015;95(9):1287-94	Ineligible study design (RCT protocol)
961	Morgan P.; Murphy A.; Opheim A.; Pogrebnoy D.; Kravtsov S.; McGinley J. The safety and feasibility of an intervention to improve balance dysfunction in ambulant adults with cerebral palsy: a pilot randomized controlled trial. Clinical rehabilitation Sep 2015;29(9):907-19	Ineligible study design (pilot RCT)
962	Li KY.; Lin KC.; Chen CK.; Liing RJ.; Wu CY.; Chang WY. Concurrent and Predictive Validity of Arm Kinematics With and Without a Trunk Restraint During a Reaching Task in Individuals With Stroke. Archives of physical medicine and rehabilitation Sep 2015;96(9):1666-75	Ineligible study design (Secondary data analysis)
963	Kibar S.; Yıldız HE.; Ay S.; Evcik D.; Ergin ES. New Approach in Fibromyalgia Exercise Program: A Preliminary Study Regarding the Effectiveness of Balance Training. Archives of physical medicine and rehabilitation Sep 2015;96(9):1576-82	Ineligible study design (Preliminary study)
964	Tsianakas V.; Robert G.; Richardson A.; Verity R.; Oakley C.; Murrells T.; Flynn M.; Ream E. Enhancing the experience of carers in the chemotherapy outpatient setting: an exploratory randomised controlled trial to test impact, acceptability and feasibility of a complex intervention co-designed by carers and staff. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2015;23(10):3069-80	Ineligible study design (acceptability/feasibility trial)

965	Brage K.; Ris I.; Falla D.; Søgaard K.; Juul-Kristensen B. Pain education combined with neck- and aerobic training is more effective at relieving chronic neck pain than pain education alone--A preliminary randomized controlled trial. Manual therapy Oct 2015;20(5):686-93	Ineligible study design (Preliminary study)
966	Forrester LW.; Roy A.; Hafer-Macko C.; Krebs HI.; Macko RF. Task-specific ankle robotics gait training after stroke: a randomized pilot study. Journal of neuroengineering and rehabilitation Jun 2016;13(1):51	Ineligible study design (pilot study)
967	Rasmussen MU.; Amris K.; Rydahl-Hansen S.; Danneskiold-Samsoe B.; Mortensen EL.; Christensen R.; H Sjölund B. Are the changes in observed functioning after multi-disciplinary rehabilitation of patients with fibromyalgia associated with changes in pain self-efficacy? Disability and rehabilitation 08 2017;39(17):1744-1752	Ineligible study design (Secondary data analysis)
968	Jensen BT.; Laustsen S.; Jensen JB.; Borre M.; Petersen AK. Exercise-based pre-habilitation is feasible and effective in radical cystectomy pathways-secondary results from a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2016;24(8):3325-31	Ineligible study design (secondary RCT results)
969	Ardern CL.; Peterson G.; Ludvigsson ML.; Peolsson A. Satisfaction With the Outcome of Physical Therapist-Prescribed Exercise in Chronic Whiplash-Associated Disorders: Secondary Analysis of a Randomized Clinical Trial. The Journal of orthopaedic and sports physical therapy Aug 2016;46(8):640-9	Ineligible study design (Secondary data analysis)
970	Çelik D.; Kaya Mutlu E. Does adding mobilization to stretching improve outcomes for people with frozen shoulder? A randomized controlled clinical trial. Clinical rehabilitation Aug 2016;30(8):786-94	Ineligible study design (pilot RCT)
971	Raina KD.; Morse JQ.; Chisholm D.; Leibold ML.; Shen J.; Whyte E. Feasibility of a Cognitive Behavioral Intervention to Manage Fatigue in Individuals With Traumatic Brain Injury: A Pilot Study. The Journal of head trauma rehabilitation ;31(5):E41-9	Ineligible study design (pilot study)
972	Helminen EE.; Sinikallio SH.; Valjakka AL.; Väisänen-Rouvali RH.; Arokoski JP. Determinants of pain and functioning in knee osteoarthritis: a one-year prospective study. Clinical rehabilitation Sep 2016;30(9):890-900	Ineligible study design (sub-study from a larger trial)
973	Hung JW.; Yu MY.; Chang KC.; Lee HC.; Hsieh YW.; Chen PC. Feasibility of Using Tetrax Biofeedback Video Games for Balance Training in Patients With Chronic Hemiplegic Stroke. PM & R : the journal of injury, function, and rehabilitation 10 2016;8(10):962-970	Ineligible study design (feasibility study)

974	Boyne P.; Dunning K.; Carl D.; Gerson M.; Khoury J.; Rockwell B.; Keeton G.; Westover J.; Williams A.; McCarthy M.; Kissela B. High-Intensity Interval Training and Moderate-Intensity Continuous Training in Ambulatory Chronic Stroke: Feasibility Study. Physical therapy Oct 2016;96(10):1533-1544	Ineligible study design (feasibility study)
975	Kootker JA.; van Heugten CM.; Kral B.; Rasquin SM.; Geurts AC.; Fasotti L. Caregivers' effects of augmented cognitive-behavioural therapy for post-stroke depressive symptoms in patients: secondary analyses to a randomized controlled trial. Clinical rehabilitation Jun 2019;33(6):1056-1065	Ineligible study design (secondary data analyses)
976	Streckmann F.; Lehmann HC.; Balke M.; Schenk A.; Oberste M.; Heller A.; Schürhörster A.; Elter T.; Bloch W.; Baumann FT. Sensorimotor training and whole-body vibration training have the potential to reduce motor and sensory symptoms of chemotherapy-induced peripheral neuropathy-a randomized controlled pilot trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2019;27(7):2471-2478	Ineligible study design (pilot RCT)
977	Russell L.; Ugalde A.; Orellana L.; Milne D.; Krishnasamy M.; Chambers R.; Austin DW.; Livingston PM. A pilot randomised controlled trial of an online mindfulness-based program for people diagnosed with melanoma. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2019;27(7):2735-2746	Ineligible study design (pilot RCT)
978	Baricich A.; Picelli A.; Carda S.; Smania N.; Cisari C.; Santamato A.; de Sire A.; Invernizzi M. Electrical stimulation of antagonist muscles after botulinum toxin type A for post-stroke spastic equinus foot. A randomized single-blind pilot study. Annals of physical and rehabilitation medicine Jul 2019;62(4):214-219	Ineligible study design (pilot study)
979	Beneciuk JM.; George SZ. Pragmatic Implementation of a Stratified Primary Care Model for Low Back Pain Management in Outpatient Physical Therapy Settings: Two-Phase, Sequential Preliminary Study. Physical therapy Aug 2015;95(8):1120-34	Ineligible study design (Preliminary study)
980	Schaefer SY.; Dibble LE.; Duff K. Efficacy and Feasibility of Functional Upper Extremity Task-Specific Training for Older Adults With and Without Cognitive Impairment. Neurorehabilitation and neural repair Aug 2015;29(7):636-44	Ineligible study design (cross-sectional/ feasibility study)
981	Skidmore ER.; Dawson DR.; Butters MA.; Grattan ES.; Juengst SB.; Whyte EM.; Begley A.; Holm MB.; Becker JT. Strategy Training Shows Promise for Addressing Disability in the First 6 Months After Stroke. Neurorehabilitation and neural repair Aug 2015;29(7):668-76	Ineligible study design (Pilot trial)

982	Moore SA.; Hallsworth K.; Jakovljevic DG.; Blamire AM.; He J.; Ford GA.; Rochester L.; Trenell MI. Effects of Community Exercise Therapy on Metabolic, Brain, Physical, and Cognitive Function Following Stroke: A Randomized Controlled Pilot Trial. Neurorehabilitation and neural repair Aug 2015;29(7):623-35	Ineligible study design (Pilot trial)
983	Gomes-Osman J.; Field-Fote EC. Cortical vs. afferent stimulation as an adjunct to functional task practice training: a randomized, comparative pilot study in people with cervical spinal cord injury. Clinical rehabilitation Aug 2015;29(8):771-82	Ineligible study design (pilot study)
984	Choi W.; Lee G.; Lee S. Effect of the cognitive-motor dual-task using auditory cue on balance of surviviors with chronic stroke: a pilot study. Clinical rehabilitation Aug 2015;29(8):763-70	Ineligible study design (pilot study)
985	Waterfield J.; Bartlam B.; Bishop A.; Holden MA.; Barlas P.; Foster NE. Physical Therapists' Views and Experiences of Pregnancy-Related Low Back Pain and the Role of Acupuncture: Qualitative Exploration. Physical therapy Sep 2015;95(9):1234-43	Ineligible study design (qualitative study)
986	Giray E.; Karadag-Saygi E.; Mansiz-Kaplan B.; Tokgoz D.; Bayindir O.; Kayhan O. A randomized, single-blinded pilot study evaluating the effects of kinesiology taping and the tape application techniques in addition to therapeutic exercises in the treatment of congenital muscular torticollis. Clinical rehabilitation Aug 2017;31(8):1098-1106	Ineligible study design (pilot study)
987	Sedjo RL.; Flatt SW.; Byers T.; Colditz GA.; Demark-Wahnefried W.; Ganz PA.; Wolin KY.; Elias A.; Krontiras H.; Liu J.; Naughton M.; Pakiz B.; Parker BA.; Wyatt H.; Rock CL. Impact of a behavioral weight loss intervention on comorbidities in overweight and obese breast cancer survivors. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2016;24(8):3285-93	Ineligible study design (Secondary data analysis)
988	Carda S.; Biasiucci A.; Maesani A.; Ionta S.; Moncharmont J.; Clarke S.; Murray MM.; Millán JDR. Electrically Assisted Movement Therapy in Chronic Stroke Patients With Severe Upper Limb Paresis: A Pilot, Single-Blind, Randomized Crossover Study. Archives of physical medicine and rehabilitation 08 2017;98(8):1628-1635.e2	Ineligible study design (pilot study)
989	Danielsson L.; Kihlbom B.; Rosberg S. "Crawling Out of the Cocoon": Patients' Experiences of a Physical Therapy Exercise Intervention in the Treatment of Major Depression. Physical therapy Aug 2016;96(8):1241-50	Ineligible study design (qualitative study)

990	Stevens-Lapsley JE.; Loyd BJ.; Falvey JR.; Figiel GJ.; Kittelson AJ.; Cumbler EU.; Mangione KK. Progressive multi-component home-based physical therapy for deconditioned older adults following acute hospitalization: a pilot randomized controlled trial. Clinical rehabilitation Aug 2016;30(8):776-85	Ineligible study design (pilot trial)
991	Schnitzer TJ.; Kim K.; Marks J.; Yeasted R.; Simonian N.; Chen D. Zoledronic Acid Treatment After Acute Spinal Cord Injury: Results of a Randomized, Placebo-Controlled Pilot Trial. PM & R : the journal of injury, function, and rehabilitation 09 2016;8(9):833-43	Ineligible study design (pilot trial)
992	Bustamante Valles K.; Montes S.; Madrigal Mde J.; Burciaga A.; Martínez ME.; Johnson MJ. Technology-assisted stroke rehabilitation in Mexico: a pilot randomized trial comparing traditional therapy to circuit training in a Robot/technology-assisted therapy gym. Journal of neuroengineering and rehabilitation 09 2016;13(1):83	Ineligible study design (pilot RCT)
993	Bartholdy C.; Klokker L.; Bandak E.; Bliddal H.; Henriksen M. A Standardized "Rescue" Exercise Program for Symptomatic Flare-up of Knee Osteoarthritis: Description and Safety Considerations. The Journal of orthopaedic and sports physical therapy Nov 2016;46(11):942-946	Ineligible study design (sub-study from larger RCTs)
994	Preston N.; Weightman A.; Gallagher J.; Levesley M.; Mon-Williams M.; Clarke M.; O'Connor RJ. A pilot single-blind multicentre randomized controlled trial to evaluate the potential benefits of computer-assisted arm rehabilitation gaming technology on the arm function of children with spastic cerebral palsy. Clinical rehabilitation Oct 2016;30(10):1004-1015	Ineligible study design (pilot trial)
995	Steib S.; Klamroth S.; Gaßner H.; Pasluosta C.; Eskofier B.; Winkler J.; Klucken J.; Pfeifer K. Perturbation During Treadmill Training Improves Dynamic Balance and Gait in Parkinson's Disease: A Single-Blind Randomized Controlled Pilot Trial. Neurorehabilitation and neural repair Aug 2017;31(8):758-768	Ineligible study design (pilot trial)
996	Cunningham P.; Turton AJ.; Van Wijck F.; Van Vliet P. Task-specific reach-to-grasp training after stroke: development and description of a home-based intervention. Clinical rehabilitation Aug 2016;30(8):731-40	Ineligible study design (description of an intervention)
997	Chen K.; Wu YN.; Ren Y.; Liu L.; Gaebler-Spira D.; Tankard K.; Lee J.; Song W.; Wang M.; Zhang LQ. Home-Based Versus Laboratory-Based Robotic Ankle Training for Children With Cerebral Palsy: A Pilot Randomized Comparative Trial. Archives of physical medicine and rehabilitation 08 2016;97(8):1237-43	Ineligible study design (pilot trial)
998	Stan DL.; Croghan KA.; Croghan IT.; Jenkins SM.; Sutherland SJ.; Cheville AL.; Pruthi S.	Ineligible study design (pilot

	Randomized pilot trial of yoga versus strengthening exercises in breast cancer survivors with cancer-related fatigue. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2016;24(9):4005-15	trial)
999	Johnston TE.; Marino RJ.; Oleson CV.; Schmidt-Read M.; Leiby BE.; Sendecki J.; Singh H.; Modlesky CM. Musculoskeletal Effects of 2 Functional Electrical Stimulation Cycling Paradigms Conducted at Different Cadences for People With Spinal Cord Injury: A Pilot Study. Archives of physical medicine and rehabilitation 09 2016;97(9):1413-1422	Ineligible study design (pilot study)
1000	Dos Reis PE.; Ciol MA.; de Melo NS.; Figueiredo PT.; Leite AF.; Manzi Nde M. Chamomile infusion cryotherapy to prevent oral mucositis induced by chemotherapy: a pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 10 2016;24(10):4393-8	Ineligible study design (pilot study)
1001	Kumar D.; McDermott K.; Feng H.; Goldman V.; Luke A.; Souza RB.; Hecht FM. Effects of Form-Focused Training on Running Biomechanics: A Pilot Randomized Trial in Untrained Individuals. PM & R : the journal of injury, function, and rehabilitation Aug 2015;7(8):814-822	Ineligible study design (pilot trial)
1002	Foucaut AM.; Morelle M.; Kempf-Lépine AS.; Baudinet C.; Meyrand R.; Guillemaut S.; Metzger S.; Bourne-Branchu V.; Grinand E.; Chabaud S.; Pérol D.; Carretier J.; Berthouze SE.; Reynes E.; Perrier L.; Rebattu P.; Heudel PE.; Bachelot T.; Bachmann P.; Fervers B.; Trédan O.; Touillaud M. Feasibility of an exercise and nutritional intervention for weight management during adjuvant treatment for localized breast cancer: the PASAPAS randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2019;27(9):3449-3461	Ineligible study design (feasibility study)
1003	Wren AA.; Shelby RA.; Soo MS.; Huysmans Z.; Jarosz JA.; Keefe FJ. Preliminary efficacy of a lovingkindness meditation intervention for patients undergoing biopsy and breast cancer surgery: A randomized controlled pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2019;27(9):3583-3592	Ineligible study design (pilot study)
1004	Zhang K.; Gao C.; Tang Q. Acupuncture for reduction of symptom burden in multiple myeloma patients undergoing autologous hematopoietic stem cell transplantation: a randomized sham-controlled trial. Respond to author. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2019;27(9):3171-3172	Ineligible study design (Letter to the editor)
1005	Thavorn K.; Coyle D.; Hoch JS.; Vandermeer L.; Mazzarello S.; Wang Z.; Dranitsaris G.; Fergusson D.; Clemons M.	Ineligible study design (cost-utility analysis)

	A cost-utility analysis of risk model-guided versus physician's choice antiemetic prophylaxis in patients receiving chemotherapy for early-stage breast cancer: a net benefit regression approach. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2017;25(8):2505-2513	
1006	Bower KJ.; Louie J.; Landesrocha Y.; Seedy P.; Gorelik A.; Bernhardt J. Clinical feasibility of interactive motion-controlled games for stroke rehabilitation. Journal of neuroengineering and rehabilitation Aug 2015;12():63	Ineligible study design (feasibility study)
1007	Verwoerd AJ.; Luijsterburg PA.; Koes BW.; el Barzouhi A.; Verhagen AP. Does Kinesiophobia Modify the Effects of Physical Therapy on Outcomes in Patients With Sciatica in Primary Care? Subgroup Analysis From a Randomized Controlled Trial. Physical therapy Sep 2015;95(9):1217-23	Ineligible study design (Subgroup data analysis)
1008	Christiansen DH.; Frost P.; Falla D.; Haahr JP.; Frich LH.; Svendsen SW. Responsiveness and Minimal Clinically Important Change: A Comparison Between 2 Shoulder Outcome Measures. The Journal of orthopaedic and sports physical therapy Aug 2015;45(8):620-5	Ineligible study design (measurement study)
1009	Tomori K.; Nagayama H.; Ohno K.; Nagatani R.; Saito Y.; Takahashi K.; Sawada T.; Higashi T. Comparison of occupation-based and impairment-based occupational therapy for subacute stroke: a randomized controlled feasibility study. Clinical rehabilitation Aug 2015;29(8):752-62	Ineligible study design (feasibility study)
1010	Artz N.; Dixon S.; Wylde V.; Marques E.; Beswick AD.; Lenguerrand E.; Blom AW.; Gooberman-Hill R. Comparison of group-based outpatient physiotherapy with usual care after total knee replacement: a feasibility study for a randomized controlled trial. Clinical rehabilitation Apr 2017;31(4):487-499	Ineligible study design (feasibility study)
1011	Mosher CE.; Secinti E.; Li R.; Hirsh AT.; Bricker J.; Miller KD.; Schneider B.; Storniolo AM.; Mina L.; Newton EV.; Champion VL.; Johns SA. Acceptance and commitment therapy for symptom interference in metastatic breast cancer patients: a pilot randomized trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2018;26(6):1993-2004	Ineligible study design (Pilot trial)
1012	Harbourne RT.; Dusing SC.; Lobo MA.; Westcott-McCoy S.; Bovaird J.; Sheridan S.; Galloway JC.; Chang HJ.; Hsu LY.; Koziol N.; Marcinowski EC.; Babik I. Sitting Together And Reaching To Play (START-Play): Protocol for a Multisite Randomized Controlled Efficacy Trial on Intervention for Infants With Neuromotor Disorders. Physical therapy 06 2018;98(6):494-502	Ineligible study design (RCT protocol)
1013	Martins JC.; Aguiar LT.; Nadeau S.; Scianni AA.; Teixeira-Salmela LF.; Faria CDCM.	Ineligible study design (RCT

	Efficacy of Task-Specific Training on Physical Activity Levels of People With Stroke: Protocol for a Randomized Controlled Trial. Physical therapy Jun 2017;97(6):640-648	protocol)
1014	Hossain MS.; Harvey LA.; Rahman MA.; Bowden JL.; Islam MS.; Taylor V.; Muldoon S.; Herbert RD. A pilot randomised trial of community-based care following discharge from hospital with a recent spinal cord injury in Bangladesh. Clinical rehabilitation Jun 2017;31(6):781-789	Ineligible study design (pilot RCT)
1015	Wehrle A.; Kneis S.; Dickhuth HH.; Gollhofer A.; Bertz H. Endurance and resistance training in patients with acute leukemia undergoing induction chemotherapy-a randomized pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2019;27(3):1071-1079	Ineligible study design (pilot study)
1016	Kos D.; Raeymaekers J.; Van Remoortel A.; D'hooghe MB.; Nagels G.; D'Haeseleer M.; Peeters E.; Dams T.; Peeters T. Electronic visual analogue scales for pain, fatigue, anxiety and quality of life in people with multiple sclerosis using smartphone and tablet: a reliability and feasibility study. Clinical rehabilitation Sep 2017;31(9):1215-1225	Ineligible study design (reliability and feasibility study)
1017	Shanahan J.; Morris ME.; Bhriain ON.; Volpe D.; Lynch T.; Clifford AM. Dancing for Parkinson Disease: A Randomized Trial of Irish Set Dancing Compared With Usual Care. Archives of physical medicine and rehabilitation 09 2017;98(9):1744-1751	Ineligible study design (pilot RCT)
1018	Almeida GJ.; Khoja SS.; Piva SR. Dose-Response Relationship Between Neuromuscular Electrical Stimulation and Muscle Function in People With Rheumatoid Arthritis. Physical therapy 09 2019;99(9):1167-1176	Ineligible study design (secondary data analysis)
1019	Leininger B.; Schulz C.; Gao Z.; Bronfort G.; Evans R.; Pope Z.; Zeng N.; Haas M. Accelerometer-Determined Physical Activity and Clinical Low Back Pain Measures in Adolescents With Chronic or Subacute Recurrent Low Back Pain. The Journal of orthopaedic and sports physical therapy Oct 2017;47(10):769-774	Ineligible study design (Cross-sectional study)
1020	Raschhofer R.; Poulios N.; Schimetta W.; Kisling R.; Mittermaier C. Early active rehabilitation after arthroscopic rotator cuff repair: a prospective randomized pilot study. Clinical rehabilitation Oct 2017;31(10):1332-1339	Ineligible study design (pilot study)
1021	Sosnoff JJ.; Wajda DA.; Sandroff BM.; Roeing KL.; Sung J.; Motl RW. Dual task training in persons with Multiple Sclerosis: a feasability randomized controlled trial. Clinical rehabilitation Oct 2017;31(10):1322-1331	Ineligible study design (feasability trial)

1022	Kunkel D.; Fitton C.; Roberts L.; Pickering RM.; Roberts HC.; Wiles R.; Hulbert S.; Robison J.; Ashburn A. A randomized controlled feasibility trial exploring partnered ballroom dancing for people with Parkinson's disease. Clinical rehabilitation Oct 2017;31(10):1340-1350	Ineligible study design (feasibility trial)
1023	Benfield JK; Everton LF; Bath PM; England TJ Does Therapy With Biofeedback Improve Swallowing in Adults With Dysphagia? A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Mar 2019;100(3):551-561	Ineligible study design (Systematic review and meta-analysis)
1024	Liu C; Wang M; Liang X; Xue J; Zhang G Efficacy and Safety of High-Frequency Repetitive Transcranial Magnetic Stimulation for Poststroke Depression: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Oct 2019;100(10):1964-1975	Ineligible study design (Systematic review and meta-analysis)
1025	Pogrebnoy D; Dennett A Exercise Programs Delivered According to Guidelines Improve Mobility in People With Stroke: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Jan 2020;101(1):154-165	Ineligible study design (Systematic review and meta-analysis)
1026	Arnold E; La Barrie J; DaSilva L; Patti M; Goode A; Clewley D The Effect of Timing of Physical Therapy for Acute Low Back Pain on Health Services Utilization: A Systematic Review. Arch Phys Med Rehabil Jul 2019;100(7):1324-1338	Ineligible study design (Systematic review)
1027	Wu T; Zhao WH; Dong Y; Song HX; Li JH Effectiveness of Ultrasound-Guided Versus Fluoroscopy or Computed Tomography Scanning Guidance in Lumbar Facet Joint Injections in Adults With Facet Joint Syndrome: A Meta-Analysis of Controlled Trials. Arch Phys Med Rehabil Sep 2016;97(9):1558-1563	Ineligible study design (meta-analysis)
1028	Zafar H; Alghadir A; Anwer S; Al-Eisa E Therapeutic effects of whole-body vibration training in knee osteoarthritis: a systematic review and meta-analysis. Arch Phys Med Rehabil Aug 2015;96(8):1525-32	Ineligible study design (Systematic review and meta-analysis)
1029	Nascimento DP; Costa LOP; Gonzalez GZ; Maher CG; Moseley AM Abstracts of low back pain trials are poorly reported, contain spin of information and are inconsistent with the full text: An overview study. Arch Phys Med Rehabil Jun 2019;():1976-1985.e18	Ineligible study design (overview study)
1030	Jansen MC; van der Oest MJ; Slijper HP; Porsius JT; Selles RW Item Reduction of the Boston Carpal Tunnel Questionnaire Using Decision Tree Modeling. Arch Phys Med Rehabil Dec 2019;100(12):2308-2313	Ineligible study design (measurement study)

1031	Barker AL.; Talevski J.; Bohensky MA.; Brand CA.; Cameron PA.; Morello RT. Feasibility of Pilates exercise to decrease falls risk: a pilot randomized controlled trial in community-dwelling older people. Clinical rehabilitation Oct 2016;30(10):984-996	Ineligible study design (pilot RCT)
1032	Walker GM.; Armstrong S.; Gordon AL.; Gladman J.; Robertson K.; Ward M.; Conroy S.; Arnold G.; Darby J.; Frowd N.; Williams W.; Knowles S.; Logan PA. The Falls In Care Home study: a feasibility randomized controlled trial of the use of a risk assessment and decision support tool to prevent falls in care homes. Clinical rehabilitation Oct 2016;30(10):972-983	Ineligible study design (feasibility trial)
1033	Kluding PM.; Singleton JR.; Pasnoor M.; Dimachkie MM.; Barohn RJ.; Smith AG.; Marcus RL. Activity for Diabetic Polyneuropathy (ADAPT): Study Design and Protocol for a 2-Site Randomized Controlled Trial. Physical therapy 01 2017;97(1):20-31	Ineligible study design (RCT protocol)
1034	Fernández-de-Las-Peñas C.; Cleland JA.; Salom-Moreno J.; Palacios-Ceña M.; Martínez-Perez A.; Pareja JA.; Ortega-Santiago R. Prediction of Outcome in Women With Carpal Tunnel Syndrome Who Receive Manual Physical Therapy Interventions: A Validation Study. The Journal of orthopaedic and sports physical therapy Jun 2016;46(6):443-51	Ineligible study design (Prospective cohort study)
1035	Harris-Hayes M.; Czuppon S.; Van Dillen LR.; Steger-May K.; Sahrmann S.; Schootman M.; Salsich GB.; Clohisy JC.; Mueller MJ. Movement-Pattern Training to Improve Function in People With Chronic Hip Joint Pain: A Feasibility Randomized Clinical Trial. The Journal of orthopaedic and sports physical therapy Jun 2016;46(6):452-61	Ineligible study design (feasibility RCT)
1036	Sandry J.; Chiou KS.; DeLuca J.; Chiaravalloti ND. Individual Differences in Working Memory Capacity Predicts Responsiveness to Memory Rehabilitation After Traumatic Brain Injury. Archives of physical medicine and rehabilitation 06 2016;97(6):1026-1029.e1	Ineligible study design (Post-hoc analysis)
1037	Williams RT.; Heinemann AW.; Neumann HD.; Fann JR.; Forchheimer M.; Richardson EJ.; Bombardier CH.; . Evaluating the Psychometric Properties and Responsiveness to Change of 3 Depression Measures in a Sample of Persons With Traumatic Spinal Cord Injury and Major Depressive Disorder. Archives of physical medicine and rehabilitation 06 2016;97(6):929-37	Ineligible study design (measurement study)
1038	Barghi A.; Allendorfer JB.; Taub E.; Womble B.; Hicks JM.; Uswatte G.; Szaflarski JP.; Mark VW. Phase II Randomized Controlled Trial of Constraint-Induced Movement Therapy in Multiple Sclerosis. Part 2: Effect on White Matter Integrity.	Ineligible study design (pilot RCT)

	Neurorehabilitation and neural repair 03 2018;32(3):233-241	
1039	Richardson JS.; Fann JR.; Bell KR.; Temkin N. Impact of Telephone-Based Problem-Solving Treatment on the Use of Medical and Psychological Services in the Military. The Journal of head trauma rehabilitation ;33(2):E1-E6	Ineligible study design (Secondary data analysis)
1040	Gehring K.; Kloek CJ.; Aaronson NK.; Janssen KW.; Jones LW.; Sitskoorn MM.; Stuiver MM. Feasibility of a home-based exercise intervention with remote guidance for patients with stable grade II and III gliomas: a pilot randomized controlled trial. Clinical rehabilitation Mar 2018;32(3):352-366	Ineligible study design (pilot RCT)
1041	Causarano N.; Platt J.; Baxter NN.; Bagher S.; Jones JM.; Metcalfe KA.; Hofer SO.; O'Neill AC.; Cheng T.; Starenkyj E.; Zhong T. Pre-consultation educational group intervention to improve shared decision-making for postmastectomy breast reconstruction: a pilot randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2015;23(5):1365-75	Ineligible study design (pilot RCT)
1042	Molassiotis A.; Charalambous A.; Taylor P.; Stamataki Z.; Summers Y. The effect of resistance inspiratory muscle training in the management of breathlessness in patients with thoracic malignancies: a feasibility randomised trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2015;23(6):1637-45	Ineligible study design (feasibility trial)
1043	Goode AP.; Taylor SS.; Hastings SN.; Stanwyck C.; Coffman CJ.; Allen KD. Effects of a Home-Based Telephone-Supported Physical Activity Program for Older Adult Veterans With Chronic Low Back Pain. Physical therapy 05 2018;98(5):369-380	Ineligible study design (pilot RCT)
1044	López-Díaz JV.; Arias-Buría JL.; Lopez-Gordo E.; Lopez Gordo S.; Oyarzún AP. "Effectiveness of continuous vertebral resonant oscillation using the POLD method in the treatment of lumbar disc hernia". A randomized controlled pilot study. Manual therapy Jun 2015;20(3):481-6	Ineligible study design (pilot study)
1045	Riley SP.; Bialosky J.; Cote MP.; Swanson BT.; Tafuto V.; Sizer PS.; Brismée JM. Thoracic spinal manipulation for musculoskeletal shoulder pain: Can an instructional set change patient expectation and outcome? Manual therapy Jun 2015;20(3):469-74	Ineligible study design (Secondary data analysis)
1046	Areces F.; Salinero JJ.; Abian-Vicen J.; González-Millán C.; Ruiz-Vicente D.; Lara B.; Lledó M.; Del Coso J. The use of compression stockings during a marathon competition to reduce exercise-induced muscle damage: are they really useful? The Journal of orthopaedic and sports physical therapy Jun 2015;45(6):462-70	Ineligible study design (Case-control study)

1047	Zimmerman C.; Atherton PJ.; Pachman D.; Seisler D.; Wagner-Johnston N.; Dakhil S.; Lafky JM.; Qin R.; Grothey A.; Loprinzi CL. MC11C4: a pilot randomized, placebo-controlled, double-blind study of venlafaxine to prevent oxaliplatin-induced neuropathy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1071-8	Ineligible study design (pilot trial)
1048	Katzman WB.; Vittinghoff E.; Kado DM.; Schafer AL.; Wong SS.; Gladin A.; Lane NE. Study of Hyperkyphosis, Exercise and Function (SHEAF) Protocol of a Randomized Controlled Trial of Multimodal Spine-Strengthening Exercise in Older Adults With Hyperkyphosis. Physical therapy Mar 2016;96(3):371-81	Ineligible study design (RCT protocol)
1049	Kalron A.; Fonkatz I.; Frid L.; Baransi H.; Achiron A. The effect of balance training on postural control in people with multiple sclerosis using the CAREN virtual reality system: a pilot randomized controlled trial. Journal of neuroengineering and rehabilitation Mar 2016;13():13	Ineligible study design (pilot RCT)
1050	Liphart J.; Gallichio J.; Tilson JK.; Pei Q.; Wu SS.; Duncan PW. Concordance and discordance between measured and perceived balance and the effect on gait speed and falls following stroke. Clinical rehabilitation Mar 2016;30(3):294-302	Ineligible study design (secondary data analysis)
1051	Wrobel JS.; Fleischer AE.; Matzkin-Bridger J.; Fascione J.; Crews RT.; Bruning N.; Jarrett B. Physical Examination Variables Predict Response to Conservative Treatment of Nonchronic Plantar Fasciitis: Secondary Analysis of a Randomized, Placebo-Controlled Footwear Study. PM & R : the journal of injury, function, and rehabilitation 05 2016;8(5):436-44	Ineligible study design (Secondary data analysis)
1052	Howell D; Harth T; Brown J; Bennett C; Boyko S Self-management education interventions for patients with cancer: a systematic review. Support Care Cancer Apr 2017;25(4):1323-1355	Ineligible study design (systematic review)
1053	da Costa ACC; Ribeiro JM; Vasques CI; De Luca Canto G; Porporatti AL; Dos Reis PED Interventions to obstructive long-term central venous catheter in cancer patients: a meta-analysis. Support Care Cancer Feb 2019;27(2):407-421	Ineligible study design (meta-analysis)
1054	Hall A; Copsey B; Richmond H; Thompson J; Ferreira M; Latimer J; Maher CG Effectiveness of Tai Chi for Chronic Musculoskeletal Pain Conditions: Updated Systematic Review and Meta-Analysis. Phys Ther Feb 2017;97(2):227-238	Ineligible study design (Systematic review and meta-analysis)
1055	Maïano C; Hue O; Lepage G; Morin AJS; Tracey D; Moullec G Do Exercise Interventions Improve Balance for Children and Adolescents With Down Syndrome? A Systematic Review.	Ineligible study design (systematic review)

	Phys Ther May 2019;99(5):507-518	
1056	Notaro P; Dell'Agnola CA; Dell'Agnola AJ; Amatu A; Bencardino KB; Siena S Pilot evaluation of scrambler therapy for pain induced by bone and visceral metastases and refractory to standard therapies. Support Care Cancer Apr 2016;24(4):1649-54	Ineligible study design (pilot study)
1057	Rossignol J; Cozzi B; Liebaert F; Hatton S; Viallard ML; Hermine O; Greco C High concentration of topical amitriptyline for treating chemotherapy-induced neuropathies. Support Care Cancer Aug 2019;27(8):3053-3059	Ineligible study design (pilot study)
1058	Keilani M; Hasenoehrl T; Neubauer M; Crevenna R Resistance exercise and secondary lymphedema in breast cancer survivors-a systematic review. Support Care Cancer Apr 2016;24(4):1907-16	Ineligible study design (systematic review)
1059	Xunlin NG; Lau Y; Klainin-Yobas P The effectiveness of mindfulness-based interventions among cancer patients and survivors: a systematic review and meta-analysis. Support Care Cancer Apr 2020;28(4):1563-1578	Ineligible study design (systematic review and meta-analysis)
1060	Fang YY; Lee YH; Chan JC; Chiou PY; Chou XY; Chiu WT; Hung CT Effects of exercise interventions on social and cognitive functioning of men with prostate cancer: a meta-analysis. Support Care Cancer May 2020;28(5):2043-2057	Ineligible study design (meta-analysis)
1061	Agarwal R; Shuk E; Romano D; Genoff M; Li Y; O'Reilly EM; Breitbart W; Volandes AE; Epstein AS A mixed methods analysis of patients' advance care planning values in outpatient oncology: Person-Centered Oncologic Care and Choices (P-COCC). Support Care Cancer Mar 2020;28(3):1109-1119	Ineligible study design (qualitative study)
1062	Dolan LB; Campbell K; Gelmon K; Neil-Sztramko S; Holmes D; McKenzie DC Interval versus continuous aerobic exercise training in breast cancer survivors--a pilot RCT. Support Care Cancer Jan 2016;24(1):119-127	Ineligible study design (pilot RCT)
1063	Sousa Correia J; Silva M; Castro C; Miranda L; Agrelo A The efficacy of the ganglion impar block in perineal and pelvic cancer pain. Support Care Cancer Nov 2019;27(11):4327-4330	Ineligible study design (retrospective study)
1064	van Nuenen FM; Donofrio SM; Tuinman MA; van de Wiel HBM; Hoekstra-Weebers JEHM Effects on patient-reported outcomes of "Screening of Distress and Referral Need" implemented in Dutch oncology practice. Support Care Cancer Jul 2020;28(7):3391-3398	Ineligible study design (non-randomized study)
1065	Heckel L; Heynsbergh NL; Livingston PM Are cancer helplines effective in supporting caregivers? A systematic review.	Ineligible study design (systematic review)

	Support Care Cancer Sep 2019;27(9):3219-3231	
1066	Brennen R; Lin KY; Denehy L; Frawley HC The Effect of Pelvic Floor Muscle Interventions on Pelvic Floor Dysfunction After Gynecological Cancer Treatment: A Systematic Review. Phys Ther May 2020;():	Ineligible study design (systematic review)
1067	Xiangyong Y; Zhongsheng Y; Wenchao L; Hui D; Shuzhou Q; Gang C; XiaoHui W; Lian Z External application of traditional Chinese medicine in the treatment of bone cancer pain: a meta-analysis. Support Care Cancer Jan 2016;24(1):11-17	Ineligible study design (meta-analysis)
1068	Anand A; Anandi P; Jain NA; Lu K; Dunavin N; Hourigan CS; Le RQ; Chokshi PD; Ito S; Stroncek DF; Sabatino M; Barrett AJ; Battiwalla M CD34+ selection and the severity of oropharyngeal mucositis in total body irradiation-based allogeneic stem cell transplantation. Support Care Cancer Feb 2016;24(2):815-822	Ineligible study design (retrospective study)
1069	Bouma G; de Hosson LD; van Woerkom CE; van Essen H; de Bock GH; Admiraal JM; Reyners AKL; Walenkamp AME Web-based information and support for patients with a newly diagnosed neuroendocrine tumor: a feasibility study. Support Care Cancer Jul 2017;25(7):2075-2083	Ineligible study design (feasibility study)
1070	Schmidt ME; Wiskemann J; Johnson T; Habermann N; Schneeweiss A; Steindorf K L-Thyroxine intake as a potential risk factor for the development of fatigue in breast cancer patients undergoing chemotherapy. Support Care Cancer Aug 2018;26(8):2561-2569	Ineligible study design (Secondary data analysis)
1071	Chow R; Bruera E; Arends J; Walsh D; Strasser F; Isenring E; Del Fabbro EG; Molassiotis A; Krishnan M; Chiu L; Chiu N; Chan S; Tang TY; Lam H; Lock M; DeAngelis C Enteral and parenteral nutrition in cancer patients, a comparison of complication rates: an updated systematic review and (cumulative) meta-analysis. Support Care Cancer Mar 2020;28(3):979-1010	Ineligible study design (systematic review and meta-analysis)
1072	Tian X; Tang RY; Xu LL; Xie W; Chen H; Pi YP; Chen WQ Progressive muscle relaxation is effective in preventing and alleviating of chemotherapy-induced nausea and vomiting among cancer patients: a systematic review of six randomized controlled trials. Support Care Cancer Apr 2020;():	Ineligible study design (systematic review)
1073	Logan RM; Al-Azri AR; Bossi P; Stringer AM; Joy JK; Soga Y; Ranna V; Vaddi A; Raber-Durlacher JE; Lalla RV; Cheng KKF; Elad S Systematic review of growth factors and cytokines for the management of oral mucositis in cancer patients and clinical practice guidelines. Support Care Cancer May 2020;28(5):2485-2498	Ineligible study design (Systematic review)

1074	Moreau NG; Bodkin AW; Bjornson K; Hobbs A; Soileau M; Lahasky K Effectiveness of Rehabilitation Interventions to Improve Gait Speed in Children With Cerebral Palsy: Systematic Review and Meta-analysis. Phys Ther Dec 2016;96(12):1938-1954	Ineligible study design (systematic review and meta-analysis)
1075	Fernandes R; Mazzarello S; Hutton B; Shorr R; Majeed H; Ibrahim MF; Jacobs C; Ong M; Clemons M Taxane acute pain syndrome (TAPS) in patients receiving taxane-based chemotherapy for breast cancer-a systematic review. Support Care Cancer Aug 2016;24(8):3633-50	Ineligible study design (systematic review)
1076	Fraguell-Hernando C; Limonero JT; Gil F Psychological intervention in patients with advanced cancer at home through Individual Meaning-Centered Psychotherapy-Palliative Care: a pilot study. Support Care Cancer Jan 2020;():	Ineligible study design (pilot study)
1077	Nogueira MCP; Ribeiro SNS; Silva ÉP; Guimarães CL; Wandalsen GF; Solé D; Lanza FC Is Prolonged Slow Expiration a Reproducible Airway Clearance Technique? Phys Ther Sep 2019;99(9):1224-1230	Ineligible study design (cross-sectional study)
1078	Morishita S; Wakasugi T; Tanaka T; Harada T; Kaida K; Ikegame K; Ogawa H; Domen K Changes in Borg scale for resistance training and test of exercise tolerance in patients undergoing allogeneic hematopoietic stem cell transplantation. Support Care Cancer Sep 2018;26(9):3217-3223	Ineligible study design (observational study)
1079	Kuriyama A; Endo K Goshajinkigan for prevention of chemotherapy-induced peripheral neuropathy: a systematic review and meta-analysis. Support Care Cancer Apr 2018;26(4):1051-1059	Ineligible study design (systematic review and meta-analysis)
1080	Grisanti S; Cosentini D; Tovazzi V; Bianchi S; Lazzari B; Consoli F; Roca E; Berruti A; Ferrari VD Hepatoprotective effect of N-acetylcysteine in trabectedin-induced liver toxicity in patients with advanced soft tissue sarcoma. Support Care Cancer Aug 2018;26(8):2929-2935	Ineligible study design (retrospective study)
1081	Sundberg K; Wengström Y; Blomberg K; Hälleberg-Nyman M; Frank C; Langius-Eklöf A Early detection and management of symptoms using an interactive smartphone application (Interaktor) during radiotherapy for prostate cancer. Support Care Cancer Jul 2017;25(7):2195-2204	Ineligible study design (non-randomized study)
1082	Carvalho CG; Medeiros-Filho JB; Ferreira MC Guide for health professionals addressing oral care for individuals in oncological treatment based on scientific evidence. Support Care Cancer Aug 2018;26(8):2651-2661	Ineligible study design (review paper)

1083	Dubinsky S; Thawer A; McLeod AG; McFarlane TRJ; Emmenegger U Management of anticoagulation in patients with metastatic castration-resistant prostate cancer receiving abiraterone + prednisone. Support Care Cancer Sep 2019;27(9):3209-3217	Ineligible study design (review paper)
1084	Porter LS; Pollak KI; Farrell D; Cooper M; Arnold RM; Jeffreys AS; Tulsky JA Development and implementation of an online program to improve how patients communicate emotional concerns to their oncology providers. Support Care Cancer Oct 2015;23(10):2907-16	Ineligible study design (sub-study from a larger trial)
1085	Hall CC; Cook J; Maddocks M; Skipworth RJE; Fallon M; Laird BJ Combined exercise and nutritional rehabilitation in outpatients with incurable cancer: a systematic review. Support Care Cancer Jul 2019;27(7):2371-2384	Ineligible study design (systematic review)
1086	Mazzarino M; Kerr D; Wajswelner H; Morris ME Pilates Method for Women's Health: Systematic Review of Randomized Controlled Trials. Arch Phys Med Rehabil Dec 2015;96(12):2231-42	Ineligible study design (Systematic review)
1087	Balasubramanian CK; Li CY; Bowden MG; Duncan PW; Kautz SA; Velozo CA Dimensionality and Item-Difficulty Hierarchy of the Lower Extremity Fugl-Meyer Assessment in Individuals With Subacute and Chronic Stroke. Arch Phys Med Rehabil Apr 2016;97(4):582-589.e2	Ineligible study design (Secondary data analysis)
1088	Graco M; Schembri R; Ross J; Green SE; Booker L; Cistulli PA; Ayas NT; Berlowitz DJ Continuous Positive Airway Pressure Use for Obstructive Sleep Apnea in Acute, Traumatic Tetraplegia. Arch Phys Med Rehabil Dec 2019;100(12):2276-2282	Ineligible study design (Secondary data analysis)
1089	Huisstede BM; Randsdorp MS; van den Brink J; Franke TPC; Koes BW; Hoogvliet P Effectiveness of Oral Pain Medication and Corticosteroid Injections for Carpal Tunnel Syndrome: A Systematic Review. Arch Phys Med Rehabil Aug 2018;99(8):1609-1622.e10	Ineligible study design (Systematic review)
1090	Ni X; Chan RJ; Yates P; Hu W; Huang X; Lou Y The effects of Tai Chi on quality of life of cancer survivors: a systematic review and meta-analysis. Support Care Cancer Oct 2019;27(10):3701-3716	Ineligible study design (systematic review and meta-analysis)
1091	Hanawa S; Mitsuhashi A; Matsuoka A; Nishikimi K; Tate S; Usui H; Uno T; Shozu M Efficacy of palonosetron plus aprepitant in preventing chemoradiotherapy-induced nausea and emesis in patients receiving daily low-dose cisplatin-based concurrent chemoradiotherapy for uterine cervical cancer: a phase II study. Support Care Cancer Nov 2016;24(11):4633-8	Ineligible study design (non-randomized study)

1092	Lohse KR; Pathania A; Wegman R; Boyd LA; Lang CE On the Reporting of Experimental and Control Therapies in Stroke Rehabilitation Trials: A Systematic Review. Arch Phys Med Rehabil Jul 2018;99(7):1424-1432	Ineligible study design (systematic review)
1093	Martinez-Calderon J; Flores-Cortes M; Morales-Asencio JM; Luque-Suarez A Conservative Interventions Reduce Fear in Individuals With Chronic Low Back Pain: A Systematic Review. Arch Phys Med Rehabil Feb 2020;101(2):329-358	Ineligible study design (systematic review)
1094	Demaneuf T; Aitken Z; Karahalios A; Leong TI; De Livera AM; Jelinek GA; Weiland TJ; Marck CH Effectiveness of Exercise Interventions for Pain Reduction in People With Multiple Sclerosis: A Systematic Review and Meta-analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Jan 2019;100(1):128-139	Ineligible study design (systematic review and meta-analysis)
1095	Linder SM; Davidson S; Rosenfeldt A; Penko A; Lee J; Koop MM; Phelan D; Alberts JL Predictors of Improved Aerobic Capacity in Individuals With Chronic Stroke Participating in Cycling Interventions. Arch Phys Med Rehabil Apr 2020;101(4):717-721	Ineligible study design (Secondary data analysis)
1096	Noten S; Meeus M; Stassijns G; Van Glabbeek F; Verborgt O; Struyf F Efficacy of Different Types of Mobilization Techniques in Patients With Primary Adhesive Capsulitis of the Shoulder: A Systematic Review. Arch Phys Med Rehabil May 2016;97(5):815-25	Ineligible study design (systematic review)
1097	Schardong J; Stein C; Della Méa Plentz R Neuromuscular Electrical Stimulation in Chronic Kidney Failure: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Apr 2020;101(4):700-711	Ineligible study design (systematic review and meta-analysis)
1098	Bade M; Struessel T; Paxton R; Winters J; Baym C; Stevens-Lapsley J Performance on a Clinical Quadriceps Activation Battery Is Related to a Laboratory Measure of Activation and Recovery After Total Knee Arthroplasty. Arch Phys Med Rehabil Jan 2018;99(1):99-106	Ineligible study design (secondary data analysis)
1099	Kang N; Lee RD; Lee JH; Hwang MH Functional Balance and Postural Control Improvements in Patients With Stroke After Noninvasive Brain Stimulation: A Meta-analysis. Arch Phys Med Rehabil Jan 2020;101(1):141-153	Ineligible study design (meta-analysis)
1100	Koelmel E; Hughes AJ; Alschuler KN; Ehde DM Resilience Mediates the Longitudinal Relationships Between Social Support and Mental Health Outcomes in Multiple Sclerosis. Arch Phys Med Rehabil Jun 2017;98(6):1139-1148	Ineligible study design (. Observational, longitudinal cohort study)

1101	Cox CL; Zhu L; Ojha RP; Steen BD; Ogg S; Robison LL; Hudson MM Factors supporting cardiomyopathy screening among at-risk adult survivors of pediatric malignancies. Support Care Cancer Apr 2017;25(4):1307-1316	Ineligible study design (Post-hoc analysis)
1102	Herrstedt J; Roila F; Warr D; Celio L; Navari RM; Hesketh PJ; Chan A; Aapro MS 2016 Updated MASCC/ESMO Consensus Recommendations: Prevention of Nausea and Vomiting Following High Emetic Risk Chemotherapy. Support Care Cancer Jan 2017;25(1):277-288	Ineligible study design (Consensus recommendations)
1103	Yang M; Yu X Management of bone metastasis with intravenous bisphosphonates in breast cancer: a systematic review and meta-analysis of dosing frequency. Support Care Cancer Jun 2020;28(6):2533-2540	Ineligible study design (systematic review and meta-analysis)
1104	Miladi N; Dossa R; Dogba MJ; Cléophat-Jolicoeur MIF; Gagnon B Psychostimulants for cancer-related cognitive impairment in adult cancer survivors: a systematic review and meta-analysis. Support Care Cancer Oct 2019;27(10):3717-3727	Ineligible study design (systematic review and meta-analysis)
1105	Soares AL; Simon S; Gebrim LH; Nazário ACP; Lazaretti-Castro M Prevalence and risk factors of medication-related osteonecrosis of the jaw in osteoporotic and breast cancer patients: a cross-sectional study. Support Care Cancer May 2020;28(5):2265-2271	Ineligible study design (cross-sectional study)
1106	Herrstedt J; Summers Y; Daugaard G; Christensen TB; Holmskov K; Taylor PD; Fox GM; Molassiotis A Amisulpride in the prevention of nausea and vomiting induced by cisplatin-based chemotherapy: a dose-escalation study. Support Care Cancer Jan 2018;26(1):139-145	Ineligible study design (, non-randomised study)
1107	Laliberté M; Mazer B; Orozco T; Chilingaryan G; Williams-Jones B; Hunt M; Feldman DE Low Back Pain: Investigation of Biases in Outpatient Canadian Physical Therapy. Phys Ther Oct 2017;97(10):985-997	Ineligible study design (cross-sectional study)
1108	Pécourneau V; Degboé Y; Barnetche T; Cantagrel A; Constantin A; Ruyssen-Witrand A Effectiveness of Exercise Programs in Ankylosing Spondylitis: A Meta-Analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Feb 2018;99(2):383-389.e1	Ineligible study design (Meta-analysis)
1109	Yang AJ; Coronado RA; Hoffecker L; Gao C; Saurwein K; Shoreman D; Hoffberg AS; Akuthota V Conservative Care in Lumbar Spine Surgery Trials: A Descriptive Literature Review. Arch Phys Med Rehabil Jan 2017;98(1):165-172	Ineligible study design (Literature review)

1110	Kellerman QD; Hartoonian N; Beier ML; Leipertz SL; Maynard C; Hostetter TA; Haselkorn JK; Turner AP Risk Factors for Suicide in a National Sample of Veterans With Multiple Sclerosis. Arch Phys Med Rehabil Apr 2020;():	Ineligible study design (case control study)
1111	Oliveira CB; Franco MR; Maher CG; Ferreira PH; Morelhão PK; Damato TM; Gobbi C; Pinto RZ Physical Activity-Based Interventions Using Electronic Feedback May Be Ineffective in Reducing Pain and Disability in Patients With Chronic Musculoskeletal Pain: A Systematic Review With Meta-Analysis. Arch Phys Med Rehabil Sep 2018;99(9):1900-1912	Ineligible study design (Systematic review and meta-analysis)
1112	Wu YC; Tsai WC; Tu YK; Yu TY Comparative Effectiveness of Nonoperative Treatments for Chronic Calcific Tendinitis of the Shoulder: A Systematic Review and Network Meta-Analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Aug 2017;98(8):1678-1692.e6	Ineligible study design (Systematic review and network meta-analysis)
1113	Salcedo PA; Lindheimer JB; Klein-Adams JC; Sotolongo AM; Falvo MJ Effects of Exercise Training on Pulmonary Function in Adults With Chronic Lung Disease: A Meta-Analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Dec 2018;99(12):2561-2569.e7	Ineligible study design (meta-analysis)
1114	Lin IH; Tsai HT; Wang CY; Hsu CY; Liou TH; Lin YN Effectiveness and Superiority of Rehabilitative Treatments in Enhancing Motor Recovery Within 6 Months Poststroke: A Systemic Review. Arch Phys Med Rehabil Feb 2019;100(2):366-378	Ineligible study design (Systematic review)
1115	Gallois M; Davergne T; Ledinot P; Ravaud P; Regnaux JP Dosage of Preventive or Therapeutic Exercise Interventions: Review of Published Randomized Controlled Trials and Survey of Authors. Arch Phys Med Rehabil Dec 2017;98(12):2558-2565.e10	Ineligible study design (review paper)
1116	Scheper MC; Juul-Kristensen B; Rombaut L; Rameckers EA; Verbunt J; Engelbert RH Disability in Adolescents and Adults Diagnosed With Hypermobility-Related Disorders: A Meta-Analysis. Arch Phys Med Rehabil Dec 2016;97(12):2174-2187	Ineligible study design (meta-analysis)
1117	Alomar JA; Catelani MBC; Smith CN; Patterson CG; Artman TM; Piva SR Validity and Responsiveness of Floor Sitting-Rising Test in Post-Total Knee Arthroplasty: A Cohort Study. Arch Phys Med Rehabil Apr 2020;():	Ineligible study design (Cohort study)
1118	Jordan K; Blättermann L; Hinke A; Müller-Tidow C; Jahn F Is the addition of a neurokinin-1 receptor antagonist beneficial in moderately emetogenic chemotherapy?-a systematic review and meta-analysis.	Ineligible study design (systematic review and meta-analysis)

	Support Care Cancer Jan 2018;26(1):21-32	
1119	Baili P; Di Salvo F; de Lorenzo F; Maietta F; Pinto C; Rizzotto V; Vicentini M; Rossi PG; Tumino R; Rollo PC; Tagliabue G; Contiero P; Candela P; Scuderi T; Iannelli E; Cascinu S; Aurora F; Agresti R; Turco A; Sant M; Meneghini E; Micheli A Out-of-pocket costs for cancer survivors between 5 and 10 years from diagnosis: an Italian population-based study. Support Care Cancer May 2016;24(5):2225-2233	Ineligible study design (population-based study)
1120	Cabezón-Gutiérrez L; Khosravi-Shahi P; Custodio-Cabello S; Muñiz-González F; Cano-Aguirre Mdel P; Alonso-Viteri S Opioids for management of episodic breathlessness or dyspnea in patients with advanced disease. Support Care Cancer Sep 2016;24(9):4045-55	Ineligible study design (non-systematic literature review)
1121	Yu JJ; Burnett AF; Sit CH Motor Skill Interventions in Children With Developmental Coordination Disorder: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Oct 2018;99(10):2076-2099	Ineligible study design (systematic review and meta-analysis)
1122	Minshull C; Gleeson N Considerations of the Principles of Resistance Training in Exercise Studies for the Management of Knee Osteoarthritis: A Systematic Review. Arch Phys Med Rehabil Sep 2017;98(9):1842-1851	Ineligible study design (systematic review)
1123	Rowe VT; Winstein CJ; Wolf SL; Woodbury ML Functional Test of the Hemiparetic Upper Extremity: A Rasch Analysis With Theoretical Implications. Arch Phys Med Rehabil Oct 2017;98(10):1977-1983	Ineligible study design (Secondary data analysis)
1124	Liu L; Huang QM; Liu QG; Thitham N; Li LH; Ma YT; Zhao JM Evidence for Dry Needling in the Management of Myofascial Trigger Points Associated With Low Back Pain: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Jan 2018;99(1):144-152.e2	Ineligible study design (systematic review and meta-analysis)
1125	Kikuuchi M; Akezaki Y; Nakata E; Yamashita N; Tominaga R; Kurokawa H; Hamada M; Aogi K; Ohsumi S; Tsuji T; Sugihara S Risk factors of impairment of shoulder function after axillary dissection for breast cancer. Support Care Cancer May 2020;():	Ineligible study design (not randomized study)
1126	Bai J; Behera M; Bruner DW The gut microbiome, symptoms, and targeted interventions in children with cancer: a systematic review. Support Care Cancer Feb 2018;26(2):427-439	Ineligible study design (systematic review)
1127	Brandwein JM; Seki JT; Atenafu EG; Rostom A; Lutynski A; Rydlewski A; Schimmer AD;	Ineligible study design (not a

	Schuh AC; Gupta V; Yee KWL A phase II open-label study of aprepitant as anti-emetic prophylaxis in patients with acute myeloid leukemia (AML) undergoing induction chemotherapy. Support Care Cancer Jun 2019;27(6):2295-2300	randomized trial)
1128	Wang Y; Lin Y; Chen J; Wang C; Hu R; Wu Y Effects of Internet-based psycho-educational interventions on mental health and quality of life among cancer patients: a systematic review and meta-analysis. Support Care Cancer Jun 2020;28(6):2541-2552	Ineligible study design (systematic review and meta-analysis)
1129	Bernstein LJ; McCreath GA; Nyhof-Young J; Dissanayake D; Rich JB A brief psychoeducational intervention improves memory contentment in breast cancer survivors with cognitive concerns: results of a single-arm prospective study. Support Care Cancer Aug 2018;26(8):2851-2859	Ineligible study design (single-arm longitudinal study)
1130	Winser SJ; Tsang WW; Krishnamurthy K; Kannan P Does Tai Chi improve balance and reduce falls incidence in neurological disorders? A systematic review and meta-analysis. Clin Rehabil Sep 2018;32(9):1157-1168	Ineligible study design (systematic review and meta-analysis)
1131	Mehta S; McIntyre A; Janzen S; Iruthayarajah J; Bateman A; Teasell R Pharmacological management of agitation among individuals with moderate to severe acquired brain injury: A systematic review. Brain Inj 2018;32(3):287-296	Ineligible study design (systematic review)
1132	Núñez-Patiño RA; Zorrilla-Vaca A; Rivera-Lara L Comparison of intensive versus conventional insulin therapy in traumatic brain injury: a meta-analysis of randomized controlled trials. Brain Inj 2018;32(6):693-703	Ineligible study design (meta-analysis)
1133	Campbell KA; Kennedy RE; Brunner RC; Hollis SD; Lumsden RA; Novack TA The effect of donepezil on the cognitive ability early in the course of recovery from traumatic brain injury. Brain Inj 2018;32(8):972-979	Ineligible study design (retrospective study)
1134	Gomes Neto M; Ferrari F; Helal L; Lopes AA; Carvalho VO; Stein R The impact of high-intensity inspiratory muscle training on exercise capacity and inspiratory muscle strength in heart failure with reduced ejection fraction: a systematic review and meta-analysis. Clin Rehabil Nov 2018;32(11):1482-1492	Ineligible study design (systematic review and meta-analysis)
1135	Cheng YH; Hsu CY; Lin YN The effect of mechanical traction on low back pain in patients with herniated intervertebral disks: a systemic review and meta-analysis. Clin Rehabil Jan 2020;34(1):13-22	Ineligible study design (systematic review and meta-analysis)

1136	Bergersen K; Halvorsen JØ; Tryti EA; Taylor SI; Olsen A A systematic literature review of psychotherapeutic treatment of prolonged symptoms after mild traumatic brain injury. Brain Inj 2017;31(3):279-289	Ineligible study design (systematic review)
1137	Peng TH; Zhu JD; Chen CC; Tai RY; Lee CY; Hsieh YW Action observation therapy for improving arm function, walking ability, and daily activity performance after stroke: a systematic review and meta-analysis. Clin Rehabil Aug 2019;33(8):1277-1285	Ineligible study design (systematic review and meta-analysis)
1138	Veldema J; Jansen P Ergometer Training in Stroke Rehabilitation: Systematic Review and Meta-analysis. Arch Phys Med Rehabil Apr 2020;101(4):674-689	Ineligible study design (systematic review and meta-analysis)
1139	Turton AJ.; Cunningham P.; van Wijck F.; Smartt H.; Rogers CA.; Sackley CM.; Jowett S.; Wolf SL.; Wheatley K.; van Vliet P. Home-based Reach-to-Grasp training for people after stroke is feasible: a pilot randomised controlled trial. Clinical rehabilitation Jul 2017;31(7):891-903	Ineligible study design (pilot RCT)
1140	Boyne P; Welge J; Kissela B; Dunning K Factors Influencing the Efficacy of Aerobic Exercise for Improving Fitness and Walking Capacity After Stroke: A Meta-Analysis With Meta-Regression. Arch Phys Med Rehabil Mar 2017;98(3):581-595	Ineligible study design (Meta-analysis with meta-regression)
1141	Calabrò RS.; Naro A.; Russo M.; Leo A.; De Luca R.; Balletta T.; Buda A.; La Rosa G.; Bramanti A.; Bramanti P. The role of virtual reality in improving motor performance as revealed by EEG: a randomized clinical trial. Journal of neuroengineering and rehabilitation 06 2017;14(1):53 2017 06	Ineligible study design (pilot RCT)
1142	Saleem GT; Crasta JE; Slomine BS; Cantarero GL; Suskauer SJ Transcranial Direct Current Stimulation in Pediatric Motor Disorders: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Apr 2019;100(4):724-738	Ineligible study design (systematic review and meta-analysis)
1143	Frost R; Levati S; McClurg D; Brady M; Williams B What Adherence Measures Should Be Used in Trials of Home-Based Rehabilitation Interventions? A Systematic Review of the Validity, Reliability, and Acceptability of Measures. Arch Phys Med Rehabil Jun 2017;98(6):1241-1256.e45	Ineligible study design (systematic review)
1144	Plummer P; Iyigün G Effects of Physical Exercise Interventions on Dual-Task Gait Speed Following Stroke: A	Ineligible study design (systematic review and meta-

	Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Dec 2018;99(12):2548-2560	analysis)
1145	Salsman JM.; Beaumont JL.; Wortman K.; Yan Y.; Friend J.; Cella D. Brief versions of the FACIT-fatigue and FAACT subscales for patients with non-small cell lung cancer cachexia. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2015;23(5):1355-64	Ineligible study design (sub-study from larger RCT)
1146	Barton DL.; Shuster LT.; Dockter T.; Atherton PJ.; Thielen J.; Birrell SN.; Sood R.; Griffin P.; Terstriep SA.; Mattar B.; Lafky JM.; Loprinzi CL. Systemic and local effects of vaginal dehydroepiandrosterone (DHEA): NCCTG N10C1 (Alliance). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2018;26(4):1335-1343	Ineligible study design (Secondary data analysis)
1147	Wu LM.; Amidi A.; Tanenbaum ML.; Winkel G.; Gordon WA.; Hall SJ.; Bovbjerg K.; Diefenbach MA. Computerized cognitive training in prostate cancer patients on androgen deprivation therapy: a pilot study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2018;26(6):1917-1926	Ineligible study design (pilot study)
1148	Bleakley CM; Taylor JB; Dischiavi SL; Doherty C; Delahunt E Rehabilitation Exercises Reduce Reinjury Post Ankle Sprain, But the Content and Parameters of an Optimal Exercise Program Have Yet to Be Established: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Jul 2019;100(7):1367-1375	Ineligible study design (systematic review and meta-analysis)
1149	De Giglio L.; De Luca F.; Prosperini L.; Borriello G.; Bianchi V.; Pantano P.; Pozzilli C. A low-cost cognitive rehabilitation with a commercial video game improves sustained attention and executive functions in multiple sclerosis: a pilot study. Neurorehabilitation and neural repair Jun 2015;29(5):453-61	Ineligible study design (pilot study)
1150	Loprinzi C.; Le-Rademacher JG.; Majithia N.; McMurray RP.; O'Neill CR.; Bendel MA.; Beutler A.; Lachance DH.; Cheville A.; Strick DM.; Black DF.; Tilburt JC.; Smith TJ. Scrambler therapy for chemotherapy neuropathy: a randomized phase II pilot trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1183-1197	Ineligible study design (pilot trial)
1151	Skidmore ER.; Whyte EM.; Butters MA.; Terhorst L.; Reynolds CF. Strategy Training During Inpatient Rehabilitation May Prevent Apathy Symptoms After Acute Stroke. PM & R : the journal of injury, function, and rehabilitation Jun 2015;7(6):562-70	Ineligible study design (Secondary data analysis)
1152	Fromme EK.; Holliday EB.; Nail LM.; Lyons KS.; Hribar MR.; Thomas CR.	Ineligible study design (pilot

	Computerized patient-reported symptom assessment in radiotherapy: a pilot randomized, controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1897-906	RCT)
1153	Jordan K; Warr DG; Hinke A; Sun L; Hesketh PJ Defining the efficacy of neurokinin-1 receptor antagonists in controlling chemotherapy-induced nausea and vomiting in different emetogenic settings -a meta-analysis. Support Care Cancer May 2016;24(5):1941-1954	Ineligible study design (meta-analysis)
1154	Susanto EA.; Tong RK.; Ockenfeld C.; Ho NS. Efficacy of robot-assisted fingers training in chronic stroke survivors: a pilot randomized-controlled trial. Journal of neuroengineering and rehabilitation Apr 2015;12():42	Ineligible study design (pilot RCT)
1155	Zhu Z.; Cui L.; Yin M.; Yu Y.; Zhou X.; Wang H.; Yan H. Hydrotherapy vs. conventional land-based exercise for improving walking and balance after stroke: a randomized controlled trial. Clinical rehabilitation Jun 2016;30(6):587-93	Ineligible study design (pilot RCT)
1156	Imai R.; Osumi M.; Morioka S. Influence of illusory kinesthesia by vibratory tendon stimulation on acute pain after surgery for distal radius fractures: a quasi-randomized controlled study. Clinical rehabilitation Jun 2016;30(6):594-603	Ineligible study design (quasi-randomized controlled study)
1157	Miller L; McFadyen A; Lord AC; Hunter R; Paul L; Rafferty D; Bowers R; Mattison P Functional Electrical Stimulation for Foot Drop in Multiple Sclerosis: A Systematic Review and Meta-Analysis of the Effect on Gait Speed. Arch Phys Med Rehabil Jul 2017;98(7):1435-1452	Ineligible study design (Systematic review and meta-analysis)
1158	Kleffelgaard I.; Soberg HL.; Bruusgaard KA.; Tamber AL.; Langhammer B. Vestibular Rehabilitation After Traumatic Brain Injury: Case Series. Physical therapy Jun 2016;96(6):839-49	Ineligible study design (Case series)
1159	Ward RE; Beauchamp MK; Latham NK; Leveille SG; Percac-Lima S; Kurlinski L; Ni P; Goldstein R; Jette AM; Bean JF Neuromuscular Impairments Contributing to Persistently Poor and Declining Lower-Extremity Mobility Among Older Adults: New Findings Informing Geriatric Rehabilitation. Arch Phys Med Rehabil Aug 2016;97(8):1316-22	Ineligible study design (Longitudinal cohort study)
1160	Denneny D; Frawley HC; Petersen K; McLoughlin R; Brook S; Hassan S; Williams AC Trigger Point Manual Therapy for the Treatment of Chronic Noncancer Pain in Adults: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Mar 2019;100(3):562-577	Ineligible study design (Systematic review and meta-analysis)
1161	Singh H; Sanders O; McCombe Waller S; Bair WN; Beamer B; Creath RA; Rogers MW	Ineligible study design (Cross-

	Relationship Between Head-Turn Gait Speed and Lateral Balance Function in Community-Dwelling Older Adults. Arch Phys Med Rehabil Oct 2017;98(10):1955-1961	sectional study)
1162	Pasquina PF.; Perry BN.; Alphonso AL.; Finn S.; Fitzpatrick KF.; Tsao JW. Residual Limb Hyperhidrosis and RimabotulinumtoxinB: A Randomized Placebo-Controlled Study. Archives of physical medicine and rehabilitation 05 2016;97(5):659-664.e2	Ineligible study design (pilot study)
1163	Liebs TR.; Herzberg W.; Rüther W.; Russlies M.; Hassenpflug J.; . Quality-Adjusted Life Years Gained by Hip and Knee Replacement Surgery and Its Aftercare. Archives of physical medicine and rehabilitation 05 2016;97(5):691-700	Ineligible study design (Secondary data analysis)
1164	Liu KPY; Hanly J; Fahey P; Fong SSM; Bye R A Systematic Review and Meta-Analysis of Rehabilitative Interventions for Unilateral Spatial Neglect and Hemianopia Poststroke From 2006 Through 2016. Arch Phys Med Rehabil May 2019;100(5):956-979	Ineligible study design (Systematic review and meta-analysis)
1165	Campbell TM; Ghaedi BB; Tanjong Ghogomu E; Welch V Shoe Lifts for Leg Length Discrepancy in Adults With Common Painful Musculoskeletal Conditions: A Systematic Review of the Literature. Arch Phys Med Rehabil May 2018;99(5):981-993.e2	Ineligible study design (Systematic review)
1166	Pearson M; Dieberg G; Smart N Exercise as a therapy for improvement of walking ability in adults with multiple sclerosis: a meta-analysis. Arch Phys Med Rehabil Jul 2015;96(7):1339-1348.e7	Ineligible study design (meta-analysis)
1167	Bahouth MN; Power MC; Zink EK; Kozeniewski K; Kumble S; Deluzio S; Urrutia VC; Stevens RD Safety and Feasibility of a Neuroscience Critical Care Program to Mobilize Patients With Primary Intracerebral Hemorrhage. Arch Phys Med Rehabil Jun 2018;99(6):1220-1225	Ineligible study design (feasibility study)
1168	Wouters RM; Tsehaie J; Hovius SER; Dilek B; Selles RW Postoperative Rehabilitation Following Thumb Base Surgery: A Systematic Review of the Literature. Arch Phys Med Rehabil Jun 2018;99(6):1177-1212.e2	Ineligible study design (Systematic review)
1169	Wrobel JS.; Fleischer AE.; Matzkin-Bridger J.; Fascione J.; Crews RT.; Bruning N.; Jarrett B. Physical Examination Variables Predict Response to Conservative Treatment of Nonchronic Plantar Fasciitis: Secondary Analysis of a Randomized, Placebo-Controlled Footwear Study. PM & R : the journal of injury, function, and rehabilitation 05 2016;8(5):436-44	Ineligible study design (Secondary data analysis)
1170	Fernandez-Gonzalo R.; Fernandez-Gonzalo S.; Turon M.; Prieto C.; Tesch PA.; García-Carreira Mdel C.	Ineligible study design (pilot RCT)

	Muscle, functional and cognitive adaptations after flywheel resistance training in stroke patients: a pilot randomized controlled trial. Journal of neuroengineering and rehabilitation Apr 2016;13():37	
1171	Verweij L; van de Korput E; Daams JG; Ter Riet G; Peters RJG; Engelbert RHH; Scholte Op Reimer WJM; Buurman BM Effects of Postacute Multidisciplinary Rehabilitation Including Exercise in Out-of-Hospital Settings in the Aged: Systematic Review and Meta-analysis. Arch Phys Med Rehabil Mar 2019;100(3):530-550	Ineligible study design (Systematic review and meta-analysis)
1172	Moore SA.; Jakovljevic DG.; Ford GA.; Rochester L.; Trenell MI. Exercise Induces Peripheral Muscle But Not Cardiac Adaptations After Stroke: A Randomized Controlled Pilot Trial. Archives of physical medicine and rehabilitation Apr 2016;97(4):596-603	Ineligible study design (pilot trial)
1173	Dupuis LL; Sung L; Molassiotis A; Orsey AD; Tissing W; van de Wetering M 2016 updated MASCC/ESMO consensus recommendations: Prevention of acute chemotherapy-induced nausea and vomiting in children. Support Care Cancer Jan 2017;25(1):323-331	Ineligible study design (consensus recommendations)
1174	Scorza F; Rodrigues L; Oliveira L; Andersen M; Tufik S; Finsterer J On "Comparative Effectiveness of mHealth-Supported Exercise Compared With Exercise Alone for People With Parkinson Disease: Randomized Controlled Pilot Study." Ellis TD, Cavanaugh, JT, DeAngelis, T, Hendron, K, Thomas, CA, Saint-Hilaire, M, Pencina, K, La Phys Ther Apr 2020;():	Ineligible study design (Letter to the editor)
1175	Kim Y; Mehta T; Lai B; Motl RW Immediate and Sustained Effects of Interventions for Changing Physical Activity in People with Multiple Sclerosis: Meta-Analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Apr 2020;():	Ineligible study design (meta-analysis)
1176	Behm K; Morgan P The effect of symptom-controlling medication on gait outcomes in people with multiple sclerosis: a systematic review. Disabil Rehabil Jul 2018;40(15):1733-1744	Ineligible study design (Systematic review)
1177	Carroquino-Garcia P; Jiménez-Rejano JJ; Medrano-Sanchez E; de la Casa-Almeida M; Diaz-Mohedo E; Suarez-Serrano C Therapeutic Exercise in the Treatment of Primary Dysmenorrhea: A Systematic Review and Meta-Analysis. Phys Ther Oct 2019;99(10):1371-1380	Ineligible study design (Systematic review and meta-analysis)
1178	Wang L; Baser O; Kutikova L; Page JH; Barron R The impact of primary prophylaxis with granulocyte colony-stimulating factors on febrile neutropenia during chemotherapy: a systematic review and meta-analysis of randomized controlled trials.	Ineligible study design (Systematic review and meta-analysis)

	Support Care Cancer Nov 2015;23(11):3131-40	
1179	Wang L; Baser O; Kutikova L; Page JH; Barron R The impact of primary prophylaxis with granulocyte colony-stimulating factors on febrile neutropenia during chemotherapy: a systematic review and meta-analysis of randomized controlled trials. Support Care Cancer Nov 2015;23(11):3131-40	Ineligible study design (Systematic review and meta-analysis)
1180	Medeiros FC; Costa LOP; Added MAN; Salomão EC; Costa LDCM Longitudinal Monitoring of Patients With Chronic Low Back Pain During Physical Therapy Treatment Using the STarT Back Screening Tool. J Orthop Sports Phys Ther May 2017;47(5):314-323	Ineligible study design (Secondary data analysis)
1181	Lawrence DW; Sharma B A review of the neuroprotective role of vitamin D in traumatic brain injury with implications for supplementation post-concussion. Brain Inj 2016;30(8):960-8	Ineligible study design (review paper)
1182	Lee JH; Baker LL; Johnson RE; Tilson JK Effectiveness of neuromuscular electrical stimulation for management of shoulder subluxation post-stroke: a systematic review with meta-analysis. Clin Rehabil Nov 2017;31(11):1431-1444	Ineligible study design (Systematic review and meta-analysis)
1183	Cramer H; Klose P; Brinkhaus B; Michalsen A; Dobos G Effects of yoga on chronic neck pain: a systematic review and meta-analysis. Clin Rehabil Nov 2017;31(11):1457-1465	Ineligible study design (Systematic review and meta-analysis)
1184	Benthien KS; Nordly M; Videbæk K; Kurita GP; von der Maase H; Timm H; Simonsen MK; Johansen C; Sjøgren P Classification of a palliative care population in a comprehensive cancer centre. Support Care Cancer Apr 2016;24(4):1865-73	Ineligible study design (cross-sectional study)
1185	Vandrevala T; Senior V; Spring L; Kelliher L; Jones C 'Am I really ready to go home?': a qualitative study of patients' experience of early discharge following an enhanced recovery programme for liver resection surgery. Support Care Cancer Aug 2016;24(8):3447-54	Ineligible study design (qualitative study)
1186	Shen C; Liu F; Yao L; Li Z; Qiu L; Fang S Effects of MOTOmed movement therapy on the mobility and activities of daily living of stroke patients with hemiplegia: a systematic review and meta-analysis. Clin Rehabil Dec 2018;32(12):1569-1580	Ineligible study design (Systematic review and meta-analysis)
1187	Hodson T; Gustafsson L; Cornwell P "Just got to live life as it comes": A case study of the spousal-dyad longitudinal mild stroke transitional experience. Brain Inj 2019;33(9):1200-1207	Ineligible study design (case study)

1188	Bleakley C; Reijgers J; Smoliga JM Many High-Quality Randomized Controlled Trials in Sports Physical Therapy Are Making False-Positive Claims of Treatment Effect: A Systematic Survey. J Orthop Sports Phys Ther Feb 2020;50(2):104-109	Ineligible study design ((Systematic survey)
1189	Harrison EG; Keating JL; Morgan PE Non-pharmacological interventions for restless legs syndrome: a systematic review of randomised controlled trials. Disabil Rehabil Aug 2019;41(17):2006-2014	Ineligible study design (Systematic review)
1190	Wolf TJ; Doherty M; Boone A; Rios J; Polatajko H; Baum C; McEwen S Cognitive oriented strategy training augmented rehabilitation (COSTAR) for ischemic stroke: a pilot exploratory randomized controlled study. Disabil Rehabil Jun 2019;():1-10	Ineligible study design (pilot study)
1191	Huang M; Liao LR; Pang MY Effects of whole body vibration on muscle spasticity for people with central nervous system disorders: a systematic review. Clin Rehabil Jan 2017;31(1):23-33	Ineligible study design (Systematic review)
1192	Cogan AM; Blanchard J; Garber SL; Vigen CL; Carlson M; Clark FA Systematic review of behavioral and educational interventions to prevent pressure ulcers in adults with spinal cord injury. Clin Rehabil Jul 2017;31(7):871-880	Ineligible study design (Systematic review)
1193	Dickerson SM; Weaver JM; Boyson AN; Thacker JA; Junak AA; Ritzline PD; Donaldson MB The effectiveness of exercise therapy for temporomandibular dysfunction: a systematic review and meta-analysis. Clin Rehabil Aug 2017;31(8):1039-1048	Ineligible study design (systematic review and meta-analysis)
1194	Wu T; Song HX; Dong Y; Ye Y; Li JH Intra-articular injections of botulinum toxin a for refractory joint pain: a systematic review and meta-analysis. Clin Rehabil Apr 2017;31(4):435-443	Ineligible study design (systematic review and meta-analysis)
1195	Sutton JA; Clauss RP A review of the evidence of zolpidem efficacy in neurological disability after brain damage due to stroke, trauma and hypoxia: A justification of further clinical trials. Brain Inj 2017;31(8):1019-1027	Ineligible study design (review paper)
1196	Saragiotto BT; Maher CG; Hancock MJ; Koes BW Subgrouping Patients With Nonspecific Low Back Pain: Hope or Hype? J Orthop Sports Phys Ther Feb 2017;47(2):44-48	Ineligible study design (Viewpoint)
1197	Da-Silva RH; Moore SA; Price CI	Ineligible study design

	Self-directed therapy programmes for arm rehabilitation after stroke: a systematic review. Clin Rehabil Aug 2018;32(8):1022-1036	(systematic review)
1198	Shahabi S; Shabaninejad H; Kamali M; Jalali M; Ahmadi Teymourlouy A The effects of ankle-foot orthoses on walking speed in patients with stroke: a systematic review and meta-analysis of randomized controlled trials. Clin Rehabil Feb 2020;34(2):145-159	Ineligible study design (systematic review and meta-analysis)
1199	Celik D; Karaborklu Argut S; Coban O; Eren I The clinical efficacy of kinesio taping in shoulder disorders: a systematic review and meta analysis. Clin Rehabil Jun 2020;34(6):723-740	Ineligible study design (systematic review and meta-analysis)
1200	Chung CL; Thilarajah S; Tan D Effectiveness of resistance training on muscle strength and physical function in people with Parkinson's disease: a systematic review and meta-analysis. Clin Rehabil Jan 2016;30(1):11-23	Ineligible study design (systematic review and meta-analysis)
1201	Sangelaji B; Smith CM; Paul L; Sampath KK; Treharne GJ; Hale LA The effectiveness of behaviour change interventions to increase physical activity participation in people with multiple sclerosis: a systematic review and meta-analysis. Clin Rehabil Jun 2016;30(6):559-76	Ineligible study design (systematic review and meta-analysis)
1202	Vooijs M; Siemonsma PC; Heus I; Sont JK; Rövekamp TA; van Meeteren NL Therapeutic validity and effectiveness of supervised physical exercise training on exercise capacity in patients with chronic obstructive pulmonary disease: a systematic review and meta-analysis. Clin Rehabil Nov 2016;30(11):1037-1048	Ineligible study design (systematic review and meta-analysis)
1203	Laimi K; Mäkilä A; Bärlund E; Katajapuu N; Oksanen A; Seikkula V; Karppinen J; Saltychev M Effectiveness of myofascial release in treatment of chronic musculoskeletal pain: a systematic review. Clin Rehabil Apr 2018;32(4):440-450	Ineligible study design (systematic review)
1204	Neri SG; Cardoso JR; Cruz L; Lima RM; de Oliveira RJ; Iversen MD; Carregaro RL Do virtual reality games improve mobility skills and balance measurements in community-dwelling older adults? Systematic review and meta-analysis. Clin Rehabil Oct 2017;31(10):1292-1304	Ineligible study design (systematic review and meta-analysis)
1205	Mekbib DB; Han J; Zhang L; Fang S; Jiang H; Zhu J; Roe AW; Xu D Virtual reality therapy for upper limb rehabilitation in patients with stroke: a meta-analysis of randomized clinical trials. Brain Inj Mar 2020;34(4):456-465	Ineligible study design (meta-analysis)
1206	asellato C; Ambrosini E; Galbiati A; Biffi E; Cesareo A; Beretta E; Lunardini F; Zorzi G;	Ineligible study design (pilot

	Sanger TD; Pedrocchi A EMG-based vibro-tactile biofeedback training: effective learning accelerator for children and adolescents with dystonia? A pilot crossover trial. J Neuroeng Rehabil Nov 2019;16(1):150	trial)
1207	Zhang L; Xing G; Fan Y; Guo Z; Chen H; Mu Q Short- and Long-term Effects of Repetitive Transcranial Magnetic Stimulation on Upper Limb Motor Function after Stroke: a Systematic Review and Meta-Analysis. Clin Rehabil Sep 2017;31(9):1137-1153	Ineligible study design (systematic review and meta-analysis)
1208	Elnahhas AM; Elshennawy S; Aly MG Effects of backward gait training on balance, gross motor function, and gait in children with cerebral palsy: a systematic review. Clin Rehabil Jan 2019;33(1):3-12	Ineligible study design (systematic review)
1209	Myrden A; Chau T A Passive EEG-BCI for Single-Trial Detection of Changes in Mental State. IEEE Trans Neural Syst Rehabil Eng Apr 2017;25(4):345-356	Ineligible study design (not an RCT)
1210	Pourahmadi MR; Mohsenifar H; Dariush M; Aftabi A; Amiri A Effectiveness of mobilization with movement (Mulligan concept techniques) on low back pain: a systematic review. Clin Rehabil Oct 2018;32(10):1289-1298	Ineligible study design (systematic review)
1211	Wang B; Shen M; Wang YX; He ZW; Chi SQ; Yang ZH Effect of virtual reality on balance and gait ability in patients with Parkinson's disease: a systematic review and meta-analysis. Clin Rehabil Jul 2019;33(7):1130-1138	Ineligible study design (systematic review and meta-analysis)
1212	Tederko P; Krasuski M; Tarnacka B Effectiveness of rehabilitation after cervical disk surgery: a systematic review of controlled studies. Clin Rehabil Mar 2019;33(3):370-380	Ineligible study design (systematic review)
1213	McIntyre A; Mirkowski M; Thompson S; Burhan AM; Miller T; Teasell R A Systematic Review and Meta-Analysis on the Use of Repetitive Transcranial Magnetic Stimulation for Spasticity Poststroke. PM R Mar 2018;10(3):293-302	Ineligible study design (systematic review and meta-analysis)
1214	van Hedel HJA; Severini G; Scarton A; O'Brien A; Reed T; Gaebler-Spira D; Egan T; Meyer-Heim A; Graser J; Chua K; Zutter D; Schweinfurther R; Möller JC; Paredes LP; Esquenazi A; Berweck S; Schroeder S; Warken B; Chan A; Devers A; Petioky J; Paik NJ; Kim WS; Bonato P; Boninger M Advanced Robotic Therapy Integrated Centers (ARTIC): an international collaboration facilitating the application of rehabilitation technologies. J Neuroeng Rehabil Apr 2018;15(1):30	Ineligible study design (observational study)

1215	Tian Y; Zhang H; Jiang Y; Li P; Li Y A Fusion Feature for Enhancing the Performance of Classification in Working Memory Load With Single-Trial Detection. IEEE Trans Neural Syst Rehabil Eng Oct 2019;27(10):1985-1993	Ineligible study design (not an RCT)
1216	Lee HK; Ahn SJ; Shin YM; Kang N; Cauraugh JH Does transcranial direct current stimulation improve functional locomotion in people with Parkinson's disease? A systematic review and meta-analysis. J Neuroeng Rehabil Jul 2019;16(1):84	Ineligible study design (systematic review and meta-analysis)
1217	Deblock-Bellamy A; Batcho CS; Mercier C; Blanchette AK Quantification of upper limb position sense using an exoskeleton and a virtual reality display. J Neuroeng Rehabil Mar 2018;15(1):24	Ineligible study design (descriptive study)
1218	Broeder S; Nackaerts E; Cuypers K; Meesen R; Verheyden G; Nieuwboer A tDCS-Enhanced Consolidation of Writing Skills and Its Associations With Cortical Excitability in Parkinson Disease: A Pilot Study. Neurorehabil Neural Repair Dec 2019;33(12):1050-1060	Ineligible study design (pilot study)
1219	Birch N; Graham J; Priestley T; Heywood C; Sakel M; Gall A; Nunn A; Signal N Results of the first interim analysis of the RAPPER II trial in patients with spinal cord injury: ambulation and functional exercise programs in the REX powered walking aid. J Neuroeng Rehabil Jun 2017;14(1):60	Ineligible study design (interim analysis)
1220	Linder SM; Rosenfeldt AB; Davidson S; Zimmerman N; Penko A; Lee J; Clark C; Alberts JL Forced, Not Voluntary, Aerobic Exercise Enhances Motor Recovery in Persons With Chronic Stroke. Neurorehabil Neural Repair Aug 2019;33(8):681-690	Ineligible study design (secondary data analysis)
1221	Gibbs JC; McArthur C; Wark JD; Thabane L; Scherer SC; Prasad S; Papaioannou A; Mittmann N; Laprade J; Kim S; Khan A; Kendler DL; Hill KD; Cheung AM; Bleakney R; Ashe MC; Adachi JD; Giangregorio LM The Effects of Home Exercise in Older Women With Vertebral Fractures: A Pilot Randomized Controlled Trial. Phys Ther Apr 2020;100(4):662-676	Ineligible study design (pilot RCT)
1222	Maier M; Rubio Ballester B; Duff A; Duarte Oller E; Verschure PFMJ Effect of Specific Over Nonspecific VR-Based Rehabilitation on Poststroke Motor Recovery: A Systematic Meta-analysis. Neurorehabil Neural Repair Feb 2019;33(2):112-129	Ineligible study design (systematic review/meta-analysis)
1223	Tu CJ; Liu L; Wang W; Du HP; Wang YM; Xu YB; Li P Effectiveness and safety of wheelchair skills training program in improving the wheelchair skills capacity: a systematic review. Clin Rehabil Dec 2017;31(12):1573-1582	Ineligible study design (systematic review)

1224	Lystad RP; Cameron CM; Mitchell RJ Excess Mortality Among Adults Hospitalized With Traumatic Brain Injury in Australia: A Population-Based Matched Cohort Study. J Head Trauma Rehabil May/Jun 2019;34(3):E1-E9	Ineligible study design (Cohort study)
1225	Rietdijk R; Power E; Attard M; Heard R; Togher L A Clinical Trial Investigating Telehealth and In-Person Social Communication Skills Training for People With Traumatic Brain Injury: Participant-Reported Communication Outcomes. J Head Trauma Rehabil Jan 2020;()	Ineligible study design (Partially randomized controlled)
1226	Hurley J; O'Keeffe M; O'Sullivan P; Ryan C; McCreesh K; O'Sullivan K Effect of education on non-specific neck and low back pain: A meta-analysis of randomized controlled trials. Man Ther Jun 2016;23():e1-2	Ineligible study design (meta-analysis)
1227	Nguyen C; Boutron I; Roren A; Baron G; Pauwels C; Lefèvre-Colau MM; Poiraudeau S; Dupeyron A; Coudeyre E; Rannou F Home-based cycling using connected ergometric bicycles for people with lumbar spinal stenosis (FLEXCAL): protocol for a randomised trial. Ann Phys Rehabil Med Jan 2020;()	Ineligible study design (RCT protocol)
1228	Parreira Pdo C; Maher CG; Ferreira ML Effect of education on non-specific neck and low back pain: A meta-analysis of randomized controlled trials. Man Ther Jun 2016;23():e3-4	Ineligible study design (meta-analysis)
1229	Bury J; West M; Chamorro-Moriana G; Littlewood C Effectiveness of scapula-focused approaches in patients with rotator cuff related shoulder pain: A systematic review and meta-analysis. Man Ther Sep 2016;25():35-42	Ineligible study design (systematic review and meta-analysis)
1230	Ritchie C; Kenardy J; Smeets R; Sterling M Erratum to 'StressModEx - Physiotherapist-led Stress Inoculation Training integrated with exercise for acute whiplash injury: study protocol for a randomised controlled trial' [JPHYS 61/3 (2015) 157]. J Physiother Apr 2016;62(2):59	Ineligible study design (RCT protocol)
1231	Tamburella F; Moreno JC; Herrera Valenzuela DS; Pisotta I; Iosa M; Cincotti F; Mattia D; Pons JL; Molinari M Influences of the biofeedback content on robotic post-stroke gait rehabilitation: electromyographic vs joint torque biofeedback. J Neuroeng Rehabil Jul 2019;16(1):95	Ineligible study design (pilot trial)
1232	Sert AT; Ozcan E; Esmaeilzadeh S Poster 383 Effects of Dextrose Prolotherapy in the Treatment of Patients with Knee	Ineligible study design (Poster RCT)

	Osteoarthritis: A Randomized Controlled Trial. PM R Sep 2016;8(9S):S286	
1233	Ownsworth T; Arnautovska U; Beadle E; Shum DHK; Moyle W Efficacy of Telerehabilitation for Adults With Traumatic Brain Injury: A Systematic Review. J Head Trauma Rehabil Jul/Aug 2018;33(4):E33-E46	Ineligible study design (systematic review)
1234	Hsieh YH; Liao HF; Jeng SF; Tseng MH; Schiariti V; Tsai MY; Sun SC Collaborative Home-Visit Program for Young Children With Motor Delays in Rural Taiwan: A Pilot Randomized Controlled Trial. Phys Ther Mar 2020;():	Ineligible study design (pilot RCT)
1235	Gundmi S; Maiya AG; Bhat AK; Ravishankar N; Hande MH; Rajagopal KV Hand dysfunction in type 2 diabetes mellitus: Systematic review with meta-analysis. Ann Phys Rehabil Med Mar 2018;61(2):99-104	Ineligible study design (systematic review and meta-analysis)
1236	Wade D Registration of all rehabilitation clinical trials: an ethical and editorial imperative. Clin Rehabil Mar 2016;30(3):211-2	Ineligible study design (Editorial)
1237	Cheng SWM; Alison J; Dennis S; Stamatakis E; Spencer L; McNamara R; Sims S; McKeough Z A behaviour change intervention to reduce sedentary time in people with chronic obstructive pulmonary disease: protocol for a randomised controlled trial. J Physiother Jul 2017;63(3):182	Ineligible study design (RCT protocol)
1238	Chi B; Chau B; Yeo E; Ta P Virtual reality for spinal cord injury-associated neuropathic pain: Systematic review. Ann Phys Rehabil Med Jan 2019;62(1):49-57	Ineligible study design (systematic review)
1239	Mateo S; Di Marco J; Cucherat M; Gueyffier F; Rode G Inconclusive efficacy of intervention on upper-limb function after tetraplegia: A systematic review and meta-analysis. Ann Phys Rehabil Med May 2020;63(3):230-240	Ineligible study design (systematic review and meta-analysis)
1240	Winser SJ; Chan HTF; Ho L; Chung LS; Ching LT; Felix TKL; Kannan P Dosage for cost-effective exercise-based falls prevention programs for older people: A systematic review of economic evaluations. Ann Phys Rehabil Med Jan 2020;63(1):69-80	Ineligible study design (systematic review)
1241	Elkins M; Dentice R Inspiratory muscle training facilitates weaning from mechanical ventilation among patients in the intensive care unit: a systematic review. J Physiother Jul 2015;61(3):125-34	Ineligible study design (systematic review)
1242	Lecharte T; Gross R; Nordez A; Le Sant G	Ineligible study design

	Effect of chronic stretching interventions on the mechanical properties of muscles in patients with stroke: A systematic review. Ann Phys Rehabil Med May 2020;63(3):222-229	(systematic review)
1243	Nguyen C; Lefèvre-Colau MM; Poiraudeau S; Rannou F Evidence and recommendations for use of intra-articular injections for knee osteoarthritis. Ann Phys Rehabil Med Jun 2016;59(3):184-189	Ineligible study design (review paper)
1244	Bean JF; Brown L; DeAngelis TR; Ellis T; Kumar VSS; Latham NK; Lawler D; Ni M; Perloff J The Rehabilitation Enhancing Aging Through Connected Health Prehabilitation Trial. Arch Phys Med Rehabil Nov 2019;100(11):1999-2005	Ineligible study design (quasi-experimental)
1245	Zorowitz RD; Alexander DN; Formella AE; Ledon F; Davis C; Siffert J Dextromethorphan/Quinidine for Pseudobulbar Affect Following Stroke: Safety and Effectiveness in the PRISM II Trial. PM R Jun 2018;():	Ineligible study design (not a randomized trial)
1246	Duncan Millar J; van Wijck F; Pollock A; Ali M Outcome measures in post-stroke arm rehabilitation trials: do existing measures capture outcomes that are important to stroke survivors, carers, and clinicians? Clin Rehabil Apr 2019;33(4):737-749	Ineligible study design (review paper)
1247	Moretti E; Tenório A; Holanda L; Campos A; Lemos A Efficacy of the whole-body vibration for pain, fatigue and quality of life in women with fibromyalgia: a systematic review. Disabil Rehabil May 2018;40(9):988-996	Ineligible study design (systematic review)
1248	Manca A; Cabboi MP; Ortu E; Ginatempo F; Dragone D; Zarbo IR; de Natale ER; Mureddu G; Bua G; Deriu F Effect of Contralateral Strength Training on Muscle Weakness in People With Multiple Sclerosis: Proof-of-Concept Case Series. Phys Ther Jun 2016;96(6):828-38	Ineligible study design (Case series)
1249	Harder S; Groenvold M; Isaksen J; Sigaard J; Frandsen KB; Neergaard MA; Mondrup L; Herrstedt J Antiemetic use of olanzapine in patients with advanced cancer: results from an open-label multicenter study. Support Care Cancer Aug 2019;27(8):2849-2856	Ineligible study design (not a randomized trial)
1250	Ferreira EB; Vasques CI; Gadia R; Chan RJ; Guerra EN; Mezzomo LA; De Luca Canto G; Dos Reis PE Topical interventions to prevent acute radiation dermatitis in head and neck cancer patients: a systematic review. Support Care Cancer Mar 2017;25(3):1001-1011	Ineligible study design (systematic review)

1251	An KY; In Yang H; Kang DW; Courneya KS; Jeon JY Development process of an evidence-based exercise program for post-operative colorectal cancer patients. Support Care Cancer Feb 2020;28(2):755-765	Ineligible study design (not a primary RCT)
1252	Fioritto AP; Oliveira CC; Albuquerque VS; Almeida LB; Granger CL; Denehy L; Malaguti C Individualized in-hospital exercise training program for people undergoing hematopoietic stem cell transplantation: a feasibility study. Disabil Rehabil Jun 2019;():1-7	Ineligible study design (feasibility study)
1253	Bullock GS; Garrigues GE; Ledbetter L; Kennedy J A Systematic Review of Proposed Rehabilitation Guidelines Following Anatomic and Reverse Shoulder Arthroplasty. J Orthop Sports Phys Ther May 2019;49(5):337-346	Ineligible study design (systematic review)
1254	Tsao Y; Creedy DK Auricular acupressure: reducing side effects of chemotherapy in women with ovarian cancer. Support Care Cancer Nov 2019;27(11):4155-4163	Ineligible study design (quasi-randomized trial)
1255	Cramer H; Haller H; Klose P; Ward L; Chung VC; Lauche R The risks and benefits of yoga for patients with chronic obstructive pulmonary disease: a systematic review and meta-analysis. Clin Rehabil Dec 2019;33(12):1847-1862	Ineligible study design (systematic review and meta-analysis)
1256	Yang X; Wang P; Liu C; He C; Reinhardt JD The effect of whole body vibration on balance, gait performance and mobility in people with stroke: a systematic review and meta-analysis. Clin Rehabil Jul 2015;29(7):627-38	Ineligible study design (systematic review and meta-analysis)
1257	Zhao QG; Zhang HR; Wen X; Wang Y; Chen XM; Chen N; Sun Y; Liu H; Lu PJ Exercise interventions on patients with end-stage renal disease: a systematic review. Clin Rehabil Feb 2019;33(2):147-156	Ineligible study design (systematic review)
1258	Wiggins B; Corsini N; Ramsey I; Edwards S; Ball D; Cocks L; Lill J; Sharplin G; Wilson C An evaluation of social work services in a cancer accommodation facility for rural South Australians. Support Care Cancer Jan 2018;26(1):147-154	Ineligible study design (cross-sectional survey)
1259	Sandroff BM; Jones CD; Baird JF; Motl RW Systematic Review on Exercise Training as a Neuroplasticity-Inducing Behavior in Multiple Sclerosis. Neurorehabil Neural Repair May 2020;():1545968320921836	Ineligible study design (systematic review)
1260	Aoyagi M; Mani R; Jayamoorthy J; Tumilty S Determining the level of evidence for the effectiveness of spinal manipulation in upper limb	Ineligible study design (systematic review and meta-

	pain: A systematic review and meta-analysis. Man Ther Aug 2015;20(4):515-23	analysis)
1261	Thomas TM; Candrea DN; Fifer MS; McMullen DP; Anderson WS; Thakor NV; Crone NE Decoding Native Cortical Representations for Flexion and Extension at Upper Limb Joints Using Electrocorticography. IEEE Trans Neural Syst Rehabil Eng Feb 2019;27(2):293-303	Ineligible study design (not an RCT)
1262	Kopkow C; Lange T; Schmitt J; Kasten P Interrater reliability of the modified scapular assistance test with and without handheld weights. Man Ther Dec 2015;20(6):868-74	Ineligible study design (measurement study)
1263	Villarreal DJ; Poonawala HA; Gregg RD A Robust Parameterization of Human Gait Patterns Across Phase-Shifting Perturbations. IEEE Trans Neural Syst Rehabil Eng Mar 2017;25(3):265-278	Ineligible study design (not an RCT)
1264	Dawson J; Engineer ND; Prudente CN; Pierce D; Francisco G; Yozbatiran N; Tarver WB; Casavant R; Kline DK; Cramer SC; Van de Winckel A; Kimberley TJ Vagus Nerve Stimulation Paired With Upper-Limb Rehabilitation After Stroke: One-Year Follow-up. Neurorehabil Neural Repair Jun 2020;():1545968320924361	Ineligible study design (feasibility/follow up results of an RCT)
1265	Dennett R; Coulter E; Paul L; Freeman J A qualitative exploration of the participants' experience of a web-based physiotherapy program for people with multiple sclerosis: Does it impact on the ability to increase and sustain engagement in physical activity? Disabil Rehabil Mar 2019;():1-8	Ineligible study design (qualitative study)
1266	Halliday MH; Garcia AN; Amorim AB; Machado GC; Hayden JA; Pappas E; Ferreira PH; Hancock MJ Treatment Effect Sizes of Mechanical Diagnosis and Therapy for Pain and Disability in Patients With Low Back Pain: A Systematic Review. J Orthop Sports Phys Ther Apr 2019;49(4):219-229	Ineligible study design (systematic review)
1267	Yokoi M; Tsuji D; Suzuki K; Kawasaki Y; Nakao M; Ayuhara H; Kogure Y; Shibata K; Hayashi T; Hirai K; Inoue K; Hama T; Takeda K; Nishio M; Itoh K Genetic risk factors for chemotherapy-induced nausea and vomiting in patients with cancer receiving cisplatin-based chemotherapy. Support Care Cancer May 2018;26(5):1505-1513	Ineligible study design (sub-study from larger RCT)
1268	Armijo-Olivo S; Pitance L; Singh V; Neto F; Thie N; Michelotti A Effectiveness of Manual Therapy and Therapeutic Exercise for Temporomandibular Disorders: Systematic Review and Meta-Analysis. Phys Ther Jan 2016;96(1):9-25	Ineligible study design (systematic review and meta-analysis)
1269	Liu L; He X; Feng L	Ineligible study design

	Exercise on quality of life and cancer-related fatigue for lymphoma survivors: a systematic review and meta-analysis. Support Care Cancer Nov 2019;27(11):4069-4082	(systematic review and meta-analysis)
1270	Popov N; Phoenix M; King G To screen or not to screen? Exploring the value of parent mental health screening in children's rehabilitation services. Disabil Rehabil Jun 2019;():1-7	Ineligible study design (non-systematic narrative review)
1271	Yu H; Randhawa K; Côté P; Optima Collaboration The Effectiveness of Physical Agents for Lower-Limb Soft Tissue Injuries: A Systematic Review. J Orthop Sports Phys Ther Jul 2016;46(7):523-54	Ineligible study design (systematic review)
1272	Worthen-Chaudhari L; McGonigal J; Logan K; Bockbrader MA; Yeates KO; Mysiw WJ Reducing concussion symptoms among teenage youth: Evaluation of a mobile health app. Brain Inj 2017;31(10):1279-1286	Ineligible study design (non-randomized trial)
1273	Fernandes R; Mazzarello S; Majeed H; Smith S; Shorr R; Hutton B; Ibrahim MF; Jacobs C; Ong M; Clemons M Treatment of taxane acute pain syndrome (TAPS) in cancer patients receiving taxane-based chemotherapy-a systematic review. Support Care Cancer Apr 2016;24(4):1583-94	Ineligible study design (systematic review)
1274	Hu Z; Tian Y; Li W; Ruan Y; Zeng F The efficacy and safety of zoledronic acid and strontium-89 in treating non-small cell lung cancer: a systematic review and meta-analysis of randomized controlled trials. Support Care Cancer Jul 2020;28(7):3291-3301	Ineligible study design (systematic review and meta-analysis)
1275	Mansfield CJ; Vanetten L; Willy R; di Stasi S; Magnussen R; Briggs M The Effects of Needling Therapies on Muscle Force Production: A Systematic Review and Meta-analysis. J Orthop Sports Phys Ther Mar 2019;49(3):154-170	Ineligible study design (systematic review and meta-analysis)
1276	da Silva T; Mills K; Brown BT; Herbert RD; Maher CG; Hancock MJ Risk of Recurrence of Low Back Pain: A Systematic Review. J Orthop Sports Phys Ther May 2017;47(5):305-313	Ineligible study design (systematic review)
1277	Beckenkamp PR; Lin CW; Engelen L; Moseley AM Reduced Physical Activity in People Following Ankle Fractures: A Longitudinal Study. J Orthop Sports Phys Ther Apr 2016;46(4):235-42	Ineligible study design (longitudinal study)
1278	Garon EB; Winfree KB; Molife C; Cui ZL; Arriola E; Levy B; Mekhail T; Pérol M Healthcare resource utilization in advanced non-small-cell lung cancer: post hoc analysis of the randomized phase 3 REVEL study. Support Care Cancer Apr 2020;():	Ineligible study design (Post hoc analysis)

1279	Boland L; Bennett K; Connolly D Self-management interventions for cancer survivors: a systematic review. Support Care Cancer May 2018;26(5):1585-1595	Ineligible study design (systematic review)
1280	Crosby V; D'Souza C; Bristow C; Proffitt A; Hussain A; Potter V; Hennig I; O'Connor R; Baracos V; Wilcock A Can body composition be used to optimize the dose of platinum chemotherapy in lung cancer? A feasibility study. Support Care Cancer Apr 2017;25(4):1257-1261	Ineligible study design (feasibility study)
1281	Neal M; Fleming N; Eberman L; Games K; Vaughan J Effect of Body-Weight-Support Running on Lower-Limb Biomechanics. J Orthop Sports Phys Ther Sep 2016;46(9):784-93	Ineligible study design (laboratory study)
1282	Chan AK; Finlayson H; Mills PB Does the method of botulinum neurotoxin injection for limb spasticity affect outcomes? A systematic review. Clin Rehabil Jun 2017;31(6):713-721	Ineligible study design (systematic review)
1283	Cushman DM; Ofek E; Syed RH; Clements N; Gardner JE; Sams JM; Mulvey JL; McCormick ZL Comparison of Varying Corticosteroid Type, Dose, and Volume for the Treatment of Pain in Small- and Intermediate-Size Joint Injections: A Narrative Review. PM R Jul 2019;11(7):758-770	Ineligible study design (narrative review)
1284	Thomson C; Krouwel O; Kuisma R; Hebron C The outcome of hip exercise in patellofemoral pain: A systematic review. Man Ther Dec 2016;26():1-30	Ineligible study design (systematic review)
1285	De Vrieze T; Nevelsteen I; Thomis S; De Groef A; Tjalma WAA; Gebruers N; Devoogdt N What are the economic burden and costs associated with the treatment of breast cancer-related lymphoedema? A systematic review. Support Care Cancer Feb 2020;28(2):439-449	Ineligible study design (systematic review)
1286	Stan DL.; Croghan KA.; Croghan IT.; Jenkins SM.; Sutherland SJ.; Cheville AL.; Pruthi S. Randomized pilot trial of yoga versus strengthening exercises in breast cancer survivors with cancer-related fatigue. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2016;24(9):4005-15 2016 09	Ineligible study design (pilot trial)
1287	Chruzander C; Gottberg K; Ytterberg C; Backenroth G; Fredrikson S; Widén Holmqvist L; Johansson S A single-group pilot feasibility study of cognitive behavioural therapy in people with multiple sclerosis with depressive symptoms.	Ineligible study design (pilot/feasibility trial)

	Disabil Rehabil Dec 2016;38(24):2383-91	
1288	Vanti C; Andreatta S; Borghi S; Guccione AA; Pillastrini P; Bertozzi L The effectiveness of walking versus exercise on pain and function in chronic low back pain: a systematic review and meta-analysis of randomized trials. Disabil Rehabil Mar 2019;41(6):622-632	Ineligible study design (systematic review and meta-analysis)
1289	Gonzalez GZ; Moseley AM; Maher CG; Nascimento DP; Costa LDCM; Costa LO Methodologic Quality and Statistical Reporting of Physical Therapy Randomized Controlled Trials Relevant to Musculoskeletal Conditions. Arch Phys Med Rehabil Jan 2018;99(1):129-136	Ineligible study design (Cross-sectional study)
1290	Dale DC; Crawford J; Klippel Z; Reiner M; Osslund T; Fan E; Morrow PK; Allcott K; Lyman GH A systematic literature review of the efficacy, effectiveness, and safety of filgrastim. Support Care Cancer Jan 2018;26(1):7-20	Ineligible study design (systematic review)
1291	Hassan H; Rompola M; Glaser AW; Kinsey SE; Phillips RS Systematic review and meta-analysis investigating the efficacy and safety of probiotics in people with cancer. Support Care Cancer Aug 2018;26(8):2503-2509	Ineligible study design (systematic review and meta-analysis)
1292	Núñez-Cortés R; Cruz-Montecinos C; Vásquez-Rosel Á; Paredes-Molina O; Cuesta-Vargas A Dry Needling Combined With Physical Therapy in Patients With Chronic Postsurgical Pain Following Total Knee Arthroplasty: A Case Series. J Orthop Sports Phys Ther Mar 2017;47(3):209-216	Ineligible study design (Case-series)
1293	Wells KJ; Campbell K; Kumar A; Clark T; Jean-Pierre P Effects of patient navigation on satisfaction with cancer care: a systematic review and meta-analysis. Support Care Cancer May 2018;26(5):1369-1382	Ineligible study design (systematic review and meta-analysis)
1294	Abdulla SY; Southerst D; Côté P; Shearer HM; Sutton D; Randhawa K; Varatharajan S; Wong JJ; Yu H; Marchand AA; Chrobak K; Woitzik E; Shergill Y; Ferguson B; Stupar M; Nordin M; Jacobs C; Mior S; Carroll LJ; van der Velde G; Taylor-Vaisey A Is exercise effective for the management of subacromial impingement syndrome and other soft tissue injuries of the shoulder? A systematic review by the Ontario Protocol for Traffic Injury Management (OPTIMa) Collaboration. Man Ther Oct 2015;20(5):646-56	Ineligible study design (systematic review)
1295	Woitzik E; Jacobs C; Wong JJ; Côté P; Shearer HM; Randhawa K; Sutton D; Southerst D; Varatharajan S; Brison RJ; Yu H; van der Velde G; Stern PJ; Taylor-Vaisey A; Stupar M; Mior S; Carroll LJ The effectiveness of exercise on recovery and clinical outcomes of soft tissue injuries of the leg, ankle, and foot: A systematic review by the Ontario Protocol for Traffic Injury Management (OPTIMa) Collaboration.	Ineligible study design (systematic review)

	Man Ther Oct 2015;20(5):633-45	
1296	Sun S; Li X; Zhu J; Wang Y; La R; Zhang X; Wei L; Hu B Graph Theory Analysis of Functional Connectivity in Major Depression Disorder With High-Density Resting State EEG Data. IEEE Trans Neural Syst Rehabil Eng Mar 2019;27(3):429-439	Ineligible study design (not an RCT)
1297	Crozier J; Roig M; Eng JJ; MacKay-Lyons M; Fung J; Ploughman M; Bailey DM; Sweet SN; Giacomantonio N; Thiel A; Trivino M; Tang A High-Intensity Interval Training After Stroke: An Opportunity to Promote Functional Recovery, Cardiovascular Health, and Neuroplasticity. Neurorehabil Neural Repair Jun 2018;32(6-7):543-556	Ineligible study design (Point of View)
1298	Yang F; Butler AJ Efficacy of Controlled Whole-Body Vibration Training on Improving Fall Risk Factors in Stroke Survivors: A Meta-analysis. Neurorehabil Neural Repair Apr 2020;34(4):275-288	Ineligible study design (meta-analysis)
1299	Wade DT Having an impact, making a difference: the Editor's review of the first 30 years. Clin Rehabil Sep 2016;30(9):837-46	Ineligible study design (Personal review)
1300	Dobkin BH Provocative Walking Test of Strength for Diagnosis, Management, and Outcome Assessment of Symptomatic Lumbar Spinal Stenosis. Neurorehabil Neural Repair Dec 2019;33(12):1003-1007	Ineligible study design (case series)
1301	Robbertz AS; Weiss DM; Awan FT; Byrd JC; Rogers KA; Woyach JA Identifying risk factors for depression and anxiety symptoms in patients with chronic lymphocytic leukemia. Support Care Cancer Apr 2020;28(4):1799-1807	Ineligible study design (sub-study from larger RCTs)
1302	Jakob I; Kollreider A; Germanotta M; Benetti F; Cruciani A; Padua L; Aprile I Robotic and Sensor Technology for Upper Limb Rehabilitation. PM R Sep 2018;10(9 Suppl 2):S189-S197	Ineligible study design (not an RCT)
1303	Shin H; Hu X Multichannel Nerve Stimulation for Diverse Activation of Finger Flexors. IEEE Trans Neural Syst Rehabil Eng Dec 2019;27(12):2361-2368	Ineligible study design (not an RCT)
1304	Keating JL; McKenzie JE; O'Connor DA; French S; Walker BF; Charity M; Page MJ; Green SE Providing services for acute low-back pain: A survey of Australian physiotherapists. Man Ther Apr 2016;22():145-52	Ineligible study design (survey study)
1305	Intiso D; Bartolo M; Santamato A; Di Rienzo F	Ineligible study design

	The Role of Rehabilitation in Patients With Progressive Supranuclear Palsy: A Narrative Review. PM R Jun 2018;10(6):636-645	(narrative review)
1306	Shaikh S; So R; Sibindi T; Libedinsky C; Basu A Sparse Ensemble Machine Learning to Improve Robustness of Long-Term Decoding in iBMIs. IEEE Trans Neural Syst Rehabil Eng Feb 2020;28(2):380-389 United States 2020 Feb	Ineligible study design (not an RCT)
1307	Ruhlmann CH; Jahn F; Jordan K; Dennis K; Maranzano E; Molassiotis A; Roila F; Feyer P 2016 updated MASCC/ESMO consensus recommendations: prevention of radiotherapy-induced nausea and vomiting. Support Care Cancer Jan 2017;25(1):309-316	Ineligible study design (Consensus study)
1308	Ashing KT; George M Exploring the efficacy of a paraprofessional delivered telephonic psychoeducational intervention on emotional well-being in African American breast cancer survivors. Support Care Cancer Mar 2020;28(3):1163-1171	Ineligible study design (Secondary data analysis)
1309	Mafodda A; Giuffrida D; Prestifilippo A; Azzarello D; Giannicola R; Mare M; Maisano R Oral sucrosomial iron versus intravenous iron in anemic cancer patients without iron deficiency receiving darbepoetin alfa: a pilot study. Support Care Cancer Sep 2017;25(9):2779-2786	Ineligible study design (pilot study)
1310	Hanada R; Yokomichi N; Kato C; Miki K; Oyama S; Morita T; Kawahara R Efficacy and safety of reinfusion of concentrated ascitic fluid for malignant ascites: a concept-proof study. Support Care Cancer May 2018;26(5):1489-1497	Ineligible study design (concept-proof study)
1311	Kilgas MA; DenHerder AE; Lytle LLM; Williams CT; Elmer SJ Home-Based Exercise With Blood Flow Restriction to Improve Quadriceps Muscle and Physical Function After Total Knee Arthroplasty: A Case Report. Phys Ther Nov 2019;99(11):1495-1500	Ineligible study design (Case report)
1312	Bae WK; Kwon J; Lee HW; Lee SC; Song EK; Shim H; Ryu KH; Song J; Seo S; Yang Y; Park JH; Lee KH; Han HS Feasibility and accessibility of electronic patient-reported outcome measures using a smartphone during routine chemotherapy: a pilot study. Support Care Cancer Nov 2018;26(11):3721-3728	Ineligible study design (pilot study)
1313	Mahtani GB; Kinnaird CR; Connolly M; Holleran CL; Hennessy PW; Woodward J; Brazg G; Roth EJ; Hornby TG Altered Sagittal- and Frontal-Plane Kinematics Following High-Intensity Stepping Training Versus Conventional Interventions in Subacute Stroke. Phys Ther Mar 2017;97(3):320-329	Ineligible study design (sub-study an RCT)

1314	Quinn G; Comber L; Galvin R; Coote S The ability of clinical balance measures to identify falls risk in multiple sclerosis: a systematic review and meta-analysis. Clin Rehabil May 2018;32(5):571-582	Ineligible study design (systematic review and meta-analysis)
1315	Zhang XF; Liu L; Wang BB; Liu X; Li P Evidence for kinesio taping in management of myofascial pain syndrome: a systematic review and meta-analysis. Clin Rehabil May 2019;33(5):865-874	Ineligible study design (systematic review and meta-analysis)
1316	Gay C; Guiguet-Auclair C; Coste N; Boisseau N; Gerbaud L; Pereira B; Coudeyre E Limited effect of a self-management exercise program added to spa therapy for increasing physical activity in patients with knee osteoarthritis: A quasi-randomized controlled trial. Ann Phys Rehabil Med May 2020;63(3):181-188	Ineligible study design (quasi-randomized controlled trial)
1317	Testa M; Rossettini G Enhance placebo, avoid nocebo: How contextual factors affect physiotherapy outcomes. Man Ther Aug 2016;24():65-74	Ineligible study design (not an RCT)
1318	Levin MF; Hiengkaew V; Nilanont Y; Cheung D; Dai D; Shaw J; Bayley M; Saposnik G Relationship Between Clinical Measures of Upper Limb Movement Quality and Activity Poststroke. Neurorehabil Neural Repair Jun 2019;33(6):432-441	Ineligible study design (Cross-sectional)
1319	Vibrac C; Avias A; François PO; Isner-Horobeti ME; Krasny-Pacini A Charlie Chaplin and gesture training in severe aphasia: a randomized double-blind single-case experimental design. Ann Phys Rehabil Med Feb 2020;():	Ineligible study design (pilot study)
1320	Ritchie C; Kenardy J; Smeets R; Sterling M StressModEx–Physiotherapist-led Stress Inoculation Training integrated with exercise for acute whiplash injury: study protocol for a randomised controlled trial. J Physiother Jul 2015;61(3):157	Ineligible study design (RCT protocol)
1321	Erratum to Ebenbichler GR, Inschlag S, Pflüger V, et al. Twelve-year follow-up of a randomized controlled trial of comprehensive physiotherapy following disc herniation operation Clinical Rehabilitation 2015; 29: 548–560 DOI: 10.1177/0269215514552032	Ineligible study design (Erratum to a follow up publication of an RCT)
1322	Yau DKW; Underwood MJ; Joynt GM; Lee A Effect of preparative rehabilitation on recovery after cardiac surgery: a systematic review. Ann Phys Rehabil Med May 2020;():	Ineligible study design (systematic review)
1323	Nicholson V; Watts N; Chani Y; Keogh JW Motor imagery training improves balance and mobility outcomes in older adults: a systematic review.	Ineligible study design (systematic review)

	J Physiother Oct 2019;65(4):200-207	
1324	Crawford C; Teo L; Yang E; Isbister C; Berry K Is Hyperbaric Oxygen Therapy Effective for Traumatic Brain Injury? A Rapid Evidence Assessment of the Literature and Recommendations for the Field. J Head Trauma Rehabil May/Jun 2017;32(3):E27-E37	Ineligible study design (review paper)
1325	Burrus C; Deriaz O; Luthi F; Konzelmann M Role of pain in measuring shoulder strength abduction and flexion with the Constant-Murley score. Ann Phys Rehabil Med Jul 2017;60(4):258-262	Ineligible study design (not an RCT)
1326	Kim S; Mortera M; Hu X; Krishnan S; Hoffecker L; Herrold A; Terhorst L; King L; Machtinger J; Zumsteg JM; Negm A; Heyn P Overview of pharmacological interventions after traumatic brain injuries: impact on selected outcomes. Brain Inj 2019;33(4):442-455	Ineligible study design (overview of systematic reviews)
1327	Ter Mors BJ; Backx APM; Spauwen P; Ponds RWHM; Van Harten PN; Van Heugten CM Efficacy of amantadine on behavioural problems due to acquired brain injury: A systematic review. Brain Inj 2019;33(9):1137-1150	Ineligible study design (systematic review)
1328	Aguiar LT; Nadeau S; Martins JC; Teixeira-Salmela LF; Britto RR; Faria CDCM Efficacy of interventions aimed at improving physical activity in individuals with stroke: a systematic review. Disabil Rehabil Apr 2020;42(7):902-917	Ineligible study design (systematic review)
1329	Abou L; Malala VD; Yarnot R; Alluri A; Rice LA Effects of Virtual Reality Therapy on Gait and Balance Among Individuals With Spinal Cord Injury: A Systematic Review and Meta-analysis. Neurorehabil Neural Repair May 2020;34(5):375-388	Ineligible study design (systematic review and meta-analysis)
1330	van Lieshout ECC; van Hooijdonk RF; Dijkhuizen RM; Visser-Meily JMA; Nijboer TCW The Effect of Noninvasive Brain Stimulation on Poststroke Cognitive Function: A Systematic Review. Neurorehabil Neural Repair May 2019;33(5):355-374	Ineligible study design (systematic review)
1331	Veerbeek JM; Langbroek-Amersfoort AC; van Wegen EE; Meskers CG; Kwakkel G Effects of Robot-Assisted Therapy for the Upper Limb After Stroke. Neurorehabil Neural Repair Feb 2017;31(2):107-121	Ineligible study design (review paper)
1332	Hott A; Liavaag S; Juel NG; Brox JI; Ekeberg OM The reliability, validity, interpretability, and responsiveness of the Norwegian version of the Anterior Knee Pain Scale in patellofemoral pain. Disabil Rehabil Oct 2019;():1-10	Ineligible study design (measurement study)

1333	Lyle S; Williamson E; Darton F; Griffiths F; Lamb SE A qualitative study of older people's experience of living with neurogenic claudication to inform the development of a physiotherapy intervention. Disabil Rehabil May 2017;39(10):1009-1017	Ineligible study design (qualitative study)
1334	Arnold JB; Walters JL; Ferrar KE Does Physical Activity Increase After Total Hip or Knee Arthroplasty for Osteoarthritis? A Systematic Review. J Orthop Sports Phys Ther Jun 2016;46(6):431-42	Ineligible study design (systematic review)
1335	Ojha HA; Wyrsta NJ; Davenport TE; Egan WE; Gellhorn AC Timing of Physical Therapy Initiation for Nonsurgical Management of Musculoskeletal Disorders and Effects on Patient Outcomes: A Systematic Review. J Orthop Sports Phys Ther Feb 2016;46(2):56-70	Ineligible study design (systematic review)
1336	Walston Z; Yake D Lumbar Thrust Manipulation and Exercise for the Treatment of Mechanical Low Back Pain in Adolescents: A Case Series. J Orthop Sports Phys Ther May 2016;46(5):391-8	Ineligible study design (Case series)
1337	Basson A; Olivier B; Ellis R; Coppieters M; Stewart A; Mudzi W The Effectiveness of Neural Mobilization for Neuromusculoskeletal Conditions: A Systematic Review and Meta-analysis. J Orthop Sports Phys Ther Sep 2017;47(9):593-615	Ineligible study design (systematic review and meta-analysis)
1338	Murray A; Hall A; Williams GC; McDonough SM; Ntoumanis N; Taylor I; Jackson B; Copsey B; Hurley DA; Matthews J Assessing physiotherapists' communication skills for promoting patient autonomy for self-management: reliability and validity of the communication evaluation in rehabilitation tool. Disabil Rehabil Jul 2019;41(14):1699-1705	Ineligible study design (measurement study)
1339	Ickmans K; Meeus M; De Kooning M; De Backer A; Kooremans D; Hubloue I; Schmitz T; Van Loo M; Nijs J Exercise and Cognitive Functioning in People With Chronic Whiplash-Associated Disorders: A Controlled Laboratory Study. J Orthop Sports Phys Ther Feb 2016;46(2):87-95	Ineligible study design (laboratory study)
1340	Matsukawa H; Shinoda M; Fujii M; Uemura A; Takahashi O; Niimi Y Basilar dolichoectasia and the spontaneous intradural vertebral artery dissection. Brain Inj 2016;30(1):90-4	Ineligible study design (retrospectively study)
1341	Travers S; Martin S; Litofsky NS The effects of anaemia and transfusion on patients with traumatic brain injury: A review. Brain Inj 2016;30(13-14):1525-1532	Ineligible study design (review paper)

1342	Poulin V; Korner-Bitensky N; Bherer L; Lussier M; Dawson DR Comparison of two cognitive interventions for adults experiencing executive dysfunction post-stroke: a pilot study. Disabil Rehabil Jan 2017;39(1):1-13	Ineligible study design (pilot study)
1343	Lee LS; Banks L; Oh PI; Brooks D; Colella TJF Capturing the perspectives of women with coronary artery disease regarding interval training or continuous exercise in cardiac rehabilitation. Disabil Rehabil Apr 2020;():1-11	Ineligible study design (not an RCT)
1344	Goom TS; Malliaras P; Reiman MP; Purdam CR Proximal Hamstring Tendinopathy: Clinical Aspects of Assessment and Management. J Orthop Sports Phys Ther Jun 2016;46(6):483-93	Ineligible study design (Synopsis)
1345	Mehalick ML; Glueck AC Examining the relationship and clinical management between traumatic brain injury and pain in military and civilian populations. Brain Inj 2018;32(11):1307-1314	Ineligible study design (review)
1346	de Oliveira Silva D; Pazzinatto MF; Rathleff MS; Holden S; Bell E; Azevedo F; Barton C Patient Education for Patellofemoral Pain: A Systematic Review. J Orthop Sports Phys Ther Apr 2020;():1-36	Ineligible study design (systematic review)
1347	Tao WW; Tao XM; Song CL Effects of non-pharmacological supportive care for hot flushes in breast cancer: a meta-analysis. Support Care Cancer Jul 2017;25(7):2335-2347	Ineligible study design (meta-analysis)
1348	Lu G; Zheng J; Zhang L The effect of exercise on aromatase inhibitor-induced musculoskeletal symptoms in breast cancer survivors :a systematic review and meta-analysis. Support Care Cancer Apr 2020;28(4):1587-1596	Ineligible study design (systematic review and meta-analysis)
1349	Yang J; Zhu X; Yuan P; Liu J; Wang B; Wang G Efficacy of traditional Chinese Medicine combined with chemotherapy in patients with non-small cell lung cancer (NSCLC): a meta-analysis of randomized clinical trials. Support Care Cancer Apr 2020;():	Ineligible study design (meta-analysis)
1350	Schneider J; Schlüter K; Sprave T; Wiskemann J; Rosenberger F Exercise intensity prescription in cancer survivors: ventilatory and lactate thresholds are useful submaximal alternatives to VO(2peak). Support Care Cancer Mar 2020;():	Ineligible study design (cross-sectional design)
1351	Khanal N; Ahmed SS; Kalra M; Miller TJ; Brames MJ; Stump TE; Monahan P; Hanna NH; Einhorn LH	Ineligible study design (non-randomized study)

	The effects of hypogonadism on quality of life in survivors of germ cell tumors treated with surgery alone versus surgery plus platinum-based chemotherapy. Support Care Cancer Jul 2020;28(7):3165-3170	
1352	Wittkopf PG; Lloyd DM; Coe O; Yacoobali S; Billington J The effect of interactive virtual reality on pain perception: a systematic review of clinical studies. Disabil Rehabil May 2019;():1-12	Ineligible study design (systematic review)
1353	Braillon A; Ross N; Fisken RA; Ernst E; Colquhoun D Placebo therapy for cancer-related pain: an alternative to psychotherapy or health misinformation? Support Care Cancer Mar 2020;28(3):963-964	Ineligible study design (Letter to the Editor)
1354	Campo RA; Bluth K; Santacroce SJ; Knapik S; Tan J; Gold S; Philips K; Gaylord S; Asher GN A mindful self-compassion videoconference intervention for nationally recruited posttreatment young adult cancer survivors: feasibility, acceptability, and psychosocial outcomes. Support Care Cancer Jun 2017;25(6):1759-1768	Ineligible study design (feasibility study)
1355	Scheffold K; Philipp R; Vehling S; Koranyi S; Engelmann D; Schulz-Kindermann F; Härter M; Mehnert-Theuerkauf A Spiritual well-being mediates the association between attachment insecurity and psychological distress in advanced cancer patients. Support Care Cancer Nov 2019;27(11):4317-4325	Ineligible study design (sub-study from larger RCT)
1356	Song B; Wang XX; Yang HY; Kong LT; Sun HY Temperature-sensitive bone mesenchymal stem cells combined with mild hypothermia reduces neurological deficit in rats of severe traumatic brain injury. Brain Inj May 2020;():1-8	Ineligible population (animals/rats)
1357	Wiener J; McIntyre A; Janssen S; Chow JT; Batey C; Teasell R Effectiveness of High-Intensity Interval Training for Fitness and Mobility Post Stroke: A Systematic Review. PM R Aug 2019;11(8):868-878	Ineligible study design (systematic review)
1358	Rudd AG; Hoffman A; Paley L; Bray B 20 years of researching stroke through audit. Clin Rehabil Aug 2018;32(8):997-1006	Ineligible study design (not an RCT)
1359	Dorminy M; Hoogeveen A; Tierney RT; Higgins M; McDevitt JK; Kretzschmar J Effect of soccer heading ball speed on S100B, sideline concussion assessments and head impact kinematics. Brain Inj Sep 2015;29(10):1158-1164	Ineligible study design (pre-test post-test study design)
1360	Scheenen ME; Visser-Keizer AC; van der Naalt J; Spikman JM Description of an early cognitive behavioral intervention (UPFRONT-intervention) following	Ineligible study design (not an RCT)

	mild traumatic brain injury to prevent persistent complaints and facilitate return to work. Clin Rehabil Aug 2017;31(8):1019-1029	
1361	Eckert T; Kampe K; Kohler M; Albrecht D; Büchele G; Hauer K; Schäufele M; Becker C; Pfeiffer K Correlates of fear of falling and falls efficacy in geriatric patients recovering from hip/pelvic fracture. Clin Rehabil Mar 2020;34(3):416-425	Ineligible study design (sub-study from larger RCT)
1362	Cheshire A; Ridge D; Clark L; White P Guided graded Exercise Self-help for chronic fatigue syndrome: patient experiences and perceptions. Disabil Rehabil Feb 2020;42(3):368-377	Ineligible study design (qualitative study)
1363	Arias-Vázquez PI; Tovilla-Zárate CA; Hernández-Díaz Y; González-Castro TB; Juárez-Rojop IE; López-Narváez ML; Bermudez-Ocaña DY; Barjau-Madrigal HA; Legorreta-Ramírez G Short-Term Therapeutic Effects of Ozone in the Management of Pain in Knee Osteoarthritis: A Meta-Analysis. PM R Aug 2019;11(8):879-887	Ineligible study design (meta-analysis)
1364	Misra VP; Trosch R; Maisonobe P; Om S Poster 182 Baseline Characteristics of Cervical Dystonia Subjects in Observational Routine-Practice Studies are Different to Those from Randomized Controlled Trials. PM R Sep 2016;8(9S):S221	Ineligible study design (Poster)
1365	Cabrera-Martos I; Ortiz-Rubio A; Torres-Sánchez I; López-López L; Jarrar M; Valenza MC The Effectiveness of Core Exercising for Postural Control in Patients with Stroke: A Systematic Review and Meta-Analysis. PM R Jan 2020;():	Ineligible study design (systematic review and meta-analysis)
1366	Naghibi SS; Ghassemi F; Maleki A; Fallah A The Effects of Upper Limb Motor Recovery on Submovement Characteristics among the Patients with Stroke: A Meta-Analysis. PM R Jun 2020;12(6):589-601	Ineligible study design (meta-analysis)
1367	Ellis R; Shields N; Lim K; Dodd KJ Eccentric exercise in adults with cardiorespiratory disease: a systematic review. Clin Rehabil Dec 2015;29(12):1178-97	Ineligible study design (systematic review)
1368	Watson NJ; Martin SA; Keating JL The impact of wrist fracture, surgical repair and immobilization on patients: a qualitative study. Clin Rehabil Jun 2018;32(6):841-851	Ineligible study design (qualitative study)
1369	Lew MF; Camba GC; Snyder D Poster 290 Efficacy and Safety of a 2 mL Dilution of AbobotulinumtoxinA Compared with Placebo in Adult Patients with Cervical Dystonia.	Ineligible study design (Poster)

	PM R Sep 2016;8(9S):S254-S255	
1370	Straudi S; Bonsangue V; Mele S; Craighero L; Montis A; Fregni F; Lavezzi S; Basaglia N Bilateral M1 anodal transcranial direct current stimulation in post traumatic chronic minimally conscious state: a pilot EEG-tDCS study. Brain Inj 2019;33(4):490-495	Ineligible study design (pilot study)
1371	Chen BL; Guo JB; Zhang HW; Zhang YJ; Zhu Y; Zhang J; Hu HY; Zheng YL; Wang XQ Surgical versus non-operative treatment for lumbar disc herniation: a systematic review and meta-analysis. Clin Rehabil Feb 2018;32(2):146-160	Ineligible study design (systematic review and meta-analysis)
1372	Eckstrom J; Bartels T; Abraham I; Patel H; Elquza E; Scott AJ; Malangone S; Hollings J; McBride A A single-arm, retrospective analysis of the incidence of febrile neutropenia using same-day versus next-day pegfilgrastim in patients with gastrointestinal cancers treated with FOLFOX or FOLFIRI. Support Care Cancer Mar 2019;27(3):873-878	Ineligible study design (retrospective analysis)
1373	Dee M; Lennon O; O'Sullivan C A systematic review of physical rehabilitation interventions for stroke in low and lower-middle income countries. Disabil Rehabil Feb 2020;42(4):473-501	Ineligible study design (systematic review)
1374	Zhang X; Li Y; Liu D Effects of exercise on the quality of life in breast cancer patients: a systematic review of randomized controlled trials. Support Care Cancer Jan 2019;27(1):9-21	Ineligible study design (systematic review)
1375	Macías-Hernández SI; Morones-Alba JD; Miranda-Duarte A; Coronado-Zarco R; Soria-Bastida MLA; Nava-Bringas T; Cruz-Medina E; Olascoaga-Gómez A; Tallabs-Almazan LV; Palencia C Glenohumeral osteoarthritis: overview, therapy, and rehabilitation. Disabil Rehabil Aug 2017;39(16):1674-1682	Ineligible study design (review paper)
1376	Beauchamp MK; Lee A; Ward RF; Harrison SL; Bain PA; Goldstein RS; Brooks D; Bean JF; Jette AM Do Exercise Interventions Improve Participation in Life Roles in Older Adults? A Systematic Review and Meta-Analysis. Phys Ther Oct 2017;97(10):964-974	Ineligible study design (systematic review and meta-analysis)
1377	Campbell KL; Zadravec K; Bland KA; Chesley E; Wolf F; Janelsins MC The Effect of Exercise on Cancer-Related Cognitive Impairment and Applications for Physical Therapy: Systematic Review of Randomized Controlled Trials. Phys Ther Mar 2020;100(3):523-542	Ineligible study design (systematic review)

1378	An AW; Ladwig S; Epstein RM; Prigerson HG; Duberstein PR The impact of the caregiver-oncologist relationship on caregiver experiences of end-of-life care and bereavement outcomes. Support Care Cancer Jan 2020;():	Ineligible study design (Secondary data analysis)
1379	Chow R; Valdez C; Chow N; Zhang D; Im J; Sodhi E; Lock M Oral cannabinoid for the prophylaxis of chemotherapy-induced nausea and vomiting-a systematic review and meta-analysis. Support Care Cancer May 2020;28(5):2095-2103	Ineligible study design (systematic review and meta-analysis)
1380	Lin MT; Chiang CF; Wu CH; Huang YT; Tu YK; Wang TG Comparative Effectiveness of Injection Therapies in Rotator Cuff Tendinopathy: A Systematic Review, Pairwise and Network Meta-analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Feb 2019;100(2):336-349.e15	Ineligible study design (systematic review and meta-analysis)
1381	Codima A; das Neves Silva W; de Souza Borges AP; de Castro G Jr Exercise prescription for symptoms and quality of life improvements in lung cancer patients: a systematic review. Support Care Cancer May 2020;():	Ineligible study design (systematic review)
1382	Howes SC; Charles DK; Marley J; Pedlow K; McDonough SM Gaming for Health: Systematic Review and Meta-analysis of the Physical and Cognitive Effects of Active Computer Gaming in Older Adults. Phys Ther Dec 2017;97(12):1122-1137	Ineligible study design (systematic review and meta-analysis)
1383	Nguyen DT; Shayani S; Palmer J; Dagis A; Forman SJ; Epstein J; Spielberger R Palifermin for prevention of oral mucositis in allogeneic hematopoietic stem cell transplantation: a single-institution retrospective evaluation. Support Care Cancer Nov 2015;23(11):3141-7	Ineligible study design (retrospective analysis)
1384	Camden C; Pratte G; Fallon F; Couture M; Berbari J; Tousignant M Diversity of practices in telerehabilitation for children with disabilities and effective intervention characteristics: results from a systematic review. Disabil Rehabil Apr 2019;():1-13	Ineligible study design (systematic review)
1385	Aasdahl L; Fimland MS Is there really a "golden hour" for work disability interventions? A narrative review. Disabil Rehabil Feb 2020;42(4):586-593	Ineligible study design (narrative review)
1386	Hanna KL; Hepworth LR; Rowe F Screening methods for post-stroke visual impairment: a systematic review. Disabil Rehabil Dec 2017;39(25):2531-2543	Ineligible study design (systematic review)
1387	Martin RA; Taylor WJ; Surgenor LJ; Graham FP; Levack WMM; Blampied NM Evaluating the effectiveness of therapeutic horse riding for children and young people	Ineligible study design (single-case experimental study)

	experiencing disability: a single-case experimental design study. Disabil Rehabil May 2019;():1-10	
1388	Hassan NM; Shields N; Landorf KB; Buldt AK; Taylor NF; Evans AM; Williams CM; Menz HB; Munteanu SE Efficacy of custom-fitted footwear to increase physical activity in children and adolescents with Down syndrome (ShoeFIT): randomised pilot study. Disabil Rehabil Nov 2019;():1-10	Ineligible study design (pilot study)
1389	McGill K; McGarry J; Sackley C; Godwin J; Nicoll A; Brady MC Recruitment challenges in stroke rehabilitation randomized controlled trials: a qualitative exploration of trialists' perspectives using Framework analysis. Clin Rehabil Jun 2020;():269215520930796	Ineligible study design (qualitative study)
1390	Kornblith ES; Langa KM; Yaffe K; Gardner RC Physical and Functional Impairment Among Older Adults With a History of Traumatic Brain Injury. J Head Trauma Rehabil Jan 2020;():	Ineligible study design (Cross-sectional survey study)
1391	Krasny-Pacini A; Evans J Single-case experimental designs to assess intervention effectiveness in rehabilitation: A practical guide. Ann Phys Rehabil Med May 2018;61(3):164-179	Ineligible study design (not an RCT)
1392	Harvey LA; Katalinic OM; Herbert RD; Moseley AM; Lannin NA; Schurr K Stretch for the treatment and prevention of contracture: an abridged republication of a Cochrane Systematic Review. J Physiother Apr 2017;63(2):67-75	Ineligible study design (systematic review and meta-analysis)
1393	de Sousa DG; Harvey LA; Dorsch S; Glinsky JV Interventions involving repetitive practice improve strength after stroke: a systematic review. J Physiother Oct 2018;64(4):210-221	Ineligible study design (systematic review)
1394	Nichols VP; Williamson E; Toye F; Lamb SE A longitudinal, qualitative study exploring sustained adherence to a hand exercise programme for rheumatoid arthritis evaluated in the SARAH trial. Disabil Rehabil Sep 2017;39(18):1856-1863	Ineligible study design (longitudinal qualitative study)
1395	Maiers M; Hondras MA; Salsbury SA; Bronfort G; Evans R What do patients value about spinal manipulation and home exercise for back-related leg pain? A qualitative study within a controlled clinical trial. Man Ther Dec 2016;26():183-191	Ineligible study design (qualitative study)
1396	Kramer JLK; Geisler F; Ramer L; Plunet W; Cragg JJ Open Access Platforms in Spinal Cord Injury: Existing Clinical Trial Data to Predict and Improve Outcomes.	Ineligible study design (not an RCT)

	Neurorehabil Neural Repair May 2017;31(5):399-401	
1397	Thomas VJ; Seet-Lee C; Marthick M; Cheema BS; Boyer M; Edwards KM Aerobic exercise during chemotherapy infusion for cancer treatment: a novel randomised crossover safety and feasibility trial. Support Care Cancer Feb 2020;28(2):625-632	Ineligible study design (feasibility study)
1398	Korkeila EA; Salminen T; Kallio R; Mikkola M; Auvinen P; Pyrhönen S; Ristamäki R Quality of life with biweekly docetaxel and capecitabine in advanced gastro-oesophageal cancer. Support Care Cancer Sep 2017;25(9):2771-2777	Ineligible study design (feasibility/non-randomized study)
1399	Oflazoglu U; Alacacioglu A; Varol U; Kucukzeybek Y; Salman T; Taskaynatan H; Yildiz Y; Saray S; Tarhan MO Chemotherapy-induced sarcopenia in newly diagnosed cancer patients: Izmir Oncology Group (IZOG) study. Support Care Cancer Jun 2020;28(6):2899-2910	Ineligible study design (non-randomized study)
1400	Covington KR; Hidde MC; Pergolotti M; Leach HJ Community-based exercise programs for cancer survivors: a scoping review of practice-based evidence. Support Care Cancer Dec 2019;27(12):4435-4450	Ineligible study design (scoping review)
1401	Wei TT; Tian X; Zhang FY; Qiang WM; Bai AL Music interventions for chemotherapy-induced nausea and vomiting: a systematic review and meta-analysis. Support Care Cancer Apr 2020;():	Ineligible study design (systematic review and meta-analysis)
1402	Lakhani A; Martin K; Gray L; Mallison J; Grimbeek P; Hollins I; Mackareth C What is the impact of engaging with natural environments delivered via virtual reality on the psycho-emotional health of people with spinal cord injury receiving rehabilitation in hospital? Findings from a pilot randomized controlled trial. Arch Phys Med Rehabil Jun 2020;():	Ineligible study design (pilot RCT)
1403	Jang SH Letter to the Editor Re: "The Effects of a Robot-Assisted Arm Training Plus Hand Functional Electrical Stimulation on Recovery After Stroke: A Randomized Clinical Trial". Arch Phys Med Rehabil May 2020;101(5):924-925	Ineligible study design (letter to editor)
1404	Esquenazi A; Geis C; Wein T; Ward AB; Liu C; Dimitrova R Poster 312 Muscle Selection Patterns for Injection of OnabotulinumtoxinA in Adult Patients with Post-Stroke Lower-Limb Spasticity Influence Outcome: Results from a Double-Blind, Placebo-Controlled Phase 3 Clinical Trial. PM R Sep 2016;8(9S):S262	Ineligible study design (Poster)
1405	Frontera WR	Ineligible study design (not an

	Some reflections on the past, present, and future of Physical and Rehabilitation Medicine (on the occasion of the 30th SOFMER congress). Ann Phys Rehabil Med Apr 2016;59(2):79-82	RCT)
1406	Holden MA; Whittle R; Healey EL; Hill S; Mullis R; Roddy E; Sowden G; Tooth S; Foster NE Content and Evaluation of the Benefits of Effective Exercise for Older Adults With Knee Pain Trial Physiotherapist Training Program. Arch Phys Med Rehabil May 2017;98(5):866-873	Ineligible study design (not a randomized trial)
1407	Oshima O; Kawakami M; Okuyama K; Suda M; Oka A; Liu M Effects of hybrid assistive neuromuscular dynamic stimulation therapy for hemiparesis after pediatric stroke: a feasibility trial. Disabil Rehabil Jul 2019;():1-5	Ineligible study design (feasibility study)
1408	McArthur C; Gibbs JC; Ashe MC; Cheung AM; Hill KD; Kendler DL; Khan A; Prasad S; Thabane L; Wark JD; Giangregorio LM The association between trunk muscle endurance, balance and falls self-efficacy in women with osteoporotic vertebral fractures: an exploratory analysis from a pilot randomized controlled trial. Disabil Rehabil Dec 2019;():1-7	Ineligible study design (exploratory analysis)
1409	Escalante CP; Chang YC; Liao K; Rouleau T; Halm J; Bossi P; Bhadriraju S; Brito-Dellan N; Sahai S; Yusuf SW; Zalpour A; Elting LS Meta-analysis of cardiovascular toxicity risks in cancer patients on selected targeted agents. Support Care Cancer Sep 2016;24(9):4057-74	Ineligible study design (meta-analysis)
1410	Chiu L; Chow R; Popovic M; Navari RM; Shumway NM; Chiu N; Lam H; Milakovic M; Pasetka M; Vuong S; Chow E; DeAngelis C Efficacy of olanzapine for the prophylaxis and rescue of chemotherapy-induced nausea and vomiting (CINV): a systematic review and meta-analysis. Support Care Cancer May 2016;24(5):2381-2392	Ineligible study design (systematic review and meta-analysis)
1411	Arch JJ; Stanton AL Examining the "usual" in usual care: a critical review and recommendations for usual care conditions in psycho-oncology. Support Care Cancer May 2019;27(5):1591-1600	Ineligible study design (not an RCT)
1412	Bui KL; Mathur S; Dechman G; Maltais F; Camp P; Saey D Fixed Handheld Dynamometry Provides Reliable and Valid Values for Quadriceps Isometric Strength in People With Chronic Obstructive Pulmonary Disease: A Multicenter Study. Phys Ther Sep 2019;99(9):1255-1267	Ineligible study design (measurement study)
1413	Hocking DR; Farhat H; Gavrila R; Caeyenberghs K; Shields N Do Active Video Games Improve Motor Function in People With Developmental Disabilities? A Meta-analysis of Randomized Controlled Trials. Arch Phys Med Rehabil Apr 2019;100(4):769-781	Ineligible study design (meta-analysis)

1414	Fernandes R; Mazzarello S; Joy AA; Pond GR; Hilton J; Ibrahim MFK; Canil C; Ong M; Stober C; Vandermeer L; Hutton B; da Costa M; Damaraju S; Clemons M Taxane acute pain syndrome (TAPS) in patients receiving chemotherapy for breast or prostate cancer: a prospective multi-center study. Support Care Cancer Sep 2018;26(9):3073-3081	Ineligible study design (non-randomized study)
1415	Lu F; Dong J; Tang Y; Huang H; Liu H; Song L; Zhang K Bilateral vs. unilateral endoscopic ultrasound-guided celiac plexus neurolysis for abdominal pain management in patients with pancreatic malignancy: a systematic review and meta-analysis. Support Care Cancer Feb 2018;26(2):353-359	Ineligible study design (systematic review and meta-analysis)
1416	Gebruers N; Camberlin M; Theunissen F; Tjalma W; Verbelen H; Van Soom T; van Breda E The effect of training interventions on physical performance, quality of life, and fatigue in patients receiving breast cancer treatment: a systematic review. Support Care Cancer Jan 2019;27(1):109-122	Ineligible study design (systematic review)
1417	Zhang F; Jin Y; Qiang W The effects of dietary advice on malnutrition in Cancer patients: a systematic review and meta-analysis. Support Care Cancer Apr 2020;28(4):1579-1585	Ineligible study design (systematic review and meta-analysis)
1418	Ross E; Purtill H; Uszynski M; Hayes S; Casey B; Browne C; Coote S Cohort Study Comparing the Berg Balance Scale and the Mini-BESTest in People Who Have Multiple Sclerosis and Are Ambulatory. Phys Ther Sep 2016;96(9):1448-55	Ineligible study design (Cohort study)
1419	Kannan P; Winser SJ; Fung B; Cheing G Effectiveness of Pelvic Floor Muscle Training Alone and in Combination With Biofeedback, Electrical Stimulation, or Both Compared to Control for Urinary Incontinence in Men Following Prostatectomy: Systematic Review and Meta-Analysis. Phys Ther Nov 2018;98(11):932-945	Ineligible study design (systematic review and meta-analysis)
1420	Bakker RM; Mens JW; de Groot HE; Tuijnman-Raasveld CC; Braat C; Hompus WC; Poelman JG; Laman MS; Velema LA; de Kroon CD; van Doorn HC; Creutzberg CL; Ter Kuile MM A nurse-led sexual rehabilitation intervention after radiotherapy for gynecological cancer. Support Care Cancer Mar 2017;25(3):729-737	Ineligible study design (non-randomized feasibility study)
1421	Li Y; Wei Q; Gou W; He C Effects of mirror therapy on walking ability, balance and lower limb motor recovery after stroke: a systematic review and meta-analysis of randomized controlled trials. Clin Rehabil Aug 2018;32(8):1007-1021	Ineligible study design (systematic review and meta-analysis)
1422	Liu TM; Luo YW; Tam KW; Lin CC; Huang TW Prophylactic and therapeutic effects of honey on radiochemotherapy-induced mucositis: a	Ineligible study design (meta-analysis)

	meta-analysis of randomized controlled trials. Support Care Cancer Jul 2019;27(7):2361-2370	
1423	Kajiwara K; Kako J; Noto H; Oosono Y; Kobayashi M Letter to the editor: "Improving information to caregivers of cancer patients: the Herlev Hospital Empowerment of Relatives through More and Earlier information Supply (HERMES) randomized controlled trial". Support Care Cancer Feb 2020;28(2):415-416	Ineligible study design (letter to editor)
1424	Wang J.; Zhang ZY.; Lu S.; Powers D.; Kansra V.; Wang X. Effects of rolapitant administered orally on the pharmacokinetics of dextromethorphan (CYP2D6), tolbutamide (CYP2C9), omeprazole (CYP2C19), efavirenz (CYP2B6), and repaglinide (CYP2C8) in healthy subjects. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2019;27(3):819-827	Ineligible study design (phase 1 RCT)
1425	Van Ginckel A.; Hinman RS.; Wrigley TV.; Hunter DJ.; Marshall CJ.; Melo L.; Meneses SRF.; Simic M.; Kasza J.; Duryea J.; Wallis JA.; Bennell KL. Impact of Cane Use on Bone Marrow Lesion Volume in People With Medial Knee Osteoarthritis (CUBA Trial). Physical therapy May 2017;97(5):537-549	Ineligible study design (RCT protocol)
1426	Hayward KS.; Brauer SG.; Ruddy KL.; Lloyd D.; Carson RG. Repetitive reaching training combined with transcranial Random Noise Stimulation in stroke survivors with chronic and severe arm paresis is feasible: a pilot, triple-blind, randomised case series. Journal of neuroengineering and rehabilitation 05 2017;14(1):46	Ineligible study design (pilot study)
1427	Busse M.; Quinn L.; Drew C.; Kelson M.; Trubey R.; McEwan K.; Jones C.; Townson J.; Dawes H.; Tudor-Edwards R.; Rosser A.; Hood K. Physical Activity Self-Management and Coaching Compared to Social Interaction in Huntington Disease: Results From the ENGAGE-HD Randomized, Controlled Pilot Feasibility Trial. Physical therapy Jun 2017;97(6):625-639	Ineligible study design (pilot study)
1428	Bravi R.; Ioannou CI.; Minciacchi D.; Altenmüller E. Assessment of the effects of Kinesiotaping on musical motor performance in musicians suffering from focal hand dystonia: a pilot study. Clinical rehabilitation Oct 2019;33(10):1636-1648	Ineligible study design (pilot study)
1429	Hammond FM.; Malec JF.; Zafonte RD.; Sherer M.; Bogner J.; Dikmen S.; Whitney MP.; Bell KR.; Perkins SM.; Moser EA. Potential Impact of Amantadine on Aggression in Chronic Traumatic Brain Injury. The Journal of head trauma rehabilitation ;32(5):308-318	Ineligible study design (sub-study from larger RCT)
1430	Bossink LW.; van der Putten AA.; Waninge A.; Vlaskamp C.	Ineligible study design (pilot

	A power-assisted exercise intervention in people with profound intellectual and multiple disabilities living in a residential facility: a pilot randomised controlled trial. Clinical rehabilitation Sep 2017;31(9):1168-1178	study)
1431	Pape TL.; Rosenow JM.; Steiner M.; Parrish T.; Guernon A.; Harton B.; Patil V.; Bhaumik DK.; McNamee S.; Walker M.; Froehlich K.; Burress C.; Odle C.; Wang X.; Herrold AA.; Zhao W.; Reda D.; Mallinson T.; Conneely M.; Nemeth AJ. Placebo-Controlled Trial of Familiar Auditory Sensory Training for Acute Severe Traumatic Brain Injury: A Preliminary Report. Neurorehabilitation and neural repair Jul 2015;29(6):537-47	Ineligible study design (preliminary results/report)
1432	Feys P.; Coninx K.; Kerkhofs L.; De Weyer T.; Truyens V.; Maris A.; Lamers I. Robot-supported upper limb training in a virtual learning environment : a pilot randomized controlled trial in persons with MS. Journal of neuroengineering and rehabilitation Jul 2015;12():60	Ineligible study design (pilot trial)
1433	Dusing S; Burnsed J; Brown S; Harper A; Hendricks-Munoz K; Stevenson R; Thacker L; Molinini R; Kane A; Khurana S Efficacy of Supporting Play Exploration and Early Development Intervention (SPEEDI) in the First Months of Life for Infants Born Very Preterm: 3-Arm Randomized Clinical Trial Protocol. Phys Ther Apr 2020;():	Ineligible study design (RCT protocol)
1434	Keogh A; Matthews J; Segurado R; Hurley DA Feasibility of Training Physical Therapists to Deliver the Theory-Based Self-Management of Osteoarthritis and Low Back Pain Through Activity and Skills (SOLAS) Intervention Within a Trial. Phys Ther Feb 2018;98(2):95-107	Ineligible study design (feasibility study)
1435	Learmonth YC; Kinnett-Hopkins D; Motl RW Capitalising on the opinions of persons with multiple sclerosis to inform the main trial - participant opinions from participation in a feasibility study, a qualitative extension study. Disabil Rehabil Dec 2019;41(25):3071-3078	Ineligible study design (feasibility and qualitative study)
1436	Liu JYW; Kor PPK; Lee PL; Chien WT; Siu PM; Hill KD Effects of an Individualized Exercise Program Plus Behavioral Change Enhancement Strategies for Managing Fatigue in Older People Who Are Frail: Protocol for a Cluster Randomized Controlled Trial. Phys Ther Dec 2019;99(12):1616-1627	Ineligible study design (RCT protocol)
1437	Maier M; Ballester BR; Leiva Bañuelos N; Duarte Oller E; Verschure PFMJ Adaptive conjunctive cognitive training (ACCT) in virtual reality for chronic stroke patients: a randomized controlled pilot trial. J Neuroeng Rehabil Mar 2020;17(1):42	Ineligible study design (pilot trial)
1438	Hendrey G.; Clark RA.; Holland AE.; Mentiplay BF.; Davis C.; Windfeld-Lund C.; Raymond	Ineligible study design (pilot

	MJ.; Williams G. Feasibility of Ballistic Strength Training in Subacute Stroke: A Randomized, Controlled, Assessor-Blinded Pilot Study. Archives of physical medicine and rehabilitation 12 2018;99(12):2430-2446	study)
1439	Hendrey G; Holland AE; Mentiplay BF; Clark RA; Williams G Do Trials of Resistance Training to Improve Mobility After Stroke Adhere to the American College of Sports Medicine Guidelines? A Systematic Review. Arch Phys Med Rehabil Mar 2018;99(3):584-597.e13	Ineligible study design (Systematic review)
1440	Golding K.; Fife-Schaw C.; Kneebone I. A pilot randomized controlled trial of self-help relaxation to reduce post-stroke depression. Clinical rehabilitation Jun 2018;32(6):747-751	Ineligible study design (pilot trial)
1441	das Nair R.; Mhizha-Murira JR.; Anderson P.; Carpenter H.; Clarke S.; Groves S.; Leighton P.; Scammell BE.; Topcu G.; Walsh DA.; Lincoln NB. Home-based pre-surgical psychological intervention for knee osteoarthritis (HAPPiKNEES): a feasibility randomized controlled trial. Clinical rehabilitation Jun 2018;32(6):777-789	Ineligible study design (feasibility RCT)
1442	Eccles A.; Morris R.; Kneebone I. Psychometric properties of the Behavioural Outcomes of Anxiety questionnaire in stroke patients with aphasia. Clinical rehabilitation Mar 2017;31(3):369-378	Ineligible study design (measurement study)
1443	Mintken PE.; McDevitt AW.; Michener LA.; Boyles RE.; Beardslee AR.; Burns SA.; Haberl MD.; Hinrichs LA.; Cleland JA. Examination of the Validity of a Clinical Prediction Rule to Identify Patients With Shoulder Pain Likely to Benefit From Cervicothoracic Manipulation. The Journal of orthopaedic and sports physical therapy Apr 2017;47(4):252-260	Ineligible study design (secondary data anlysis)
1444	Clarke SP.; Poulis N.; Moreton BJ.; Walsh DA.; Lincoln NB. Evaluation of a group acceptance commitment therapy intervention for people with knee or hip osteoarthritis: a pilot randomized controlled trial. Disability and rehabilitation 04 2017;39(7):663-670	Ineligible study design (pilot RCT)
1445	Carpinella I.; Cattaneo D.; Bonora G.; Bowman T.; Martina L.; Montesano A.; Ferrarin M. Wearable Sensor-Based Biofeedback Training for Balance and Gait in Parkinson Disease: A Pilot Randomized Controlled Trial. Archives of physical medicine and rehabilitation 04 2017;98(4):622-630.e3	Ineligible study design (pilot RCT)
1446	Seo NJ.; Woodbury ML.; Bonilha L.; Ramakrishnan V.; Kautz SA.; Downey RJ.; Dellenbach BHS.; Lauer AW.; Roark CM.; Landers LE.; Phillips SK.; Vatinno AA. TheraBracelet Stimulation During Task-Practice Therapy to Improve Upper Extremity Function After Stroke: A Pilot Randomized Controlled Study. Physical therapy 03 2019;99(3):319-328	Ineligible study design (pilot RCT)

1447	Imai R.; Osumi M.; Ishigaki T.; Morioka S. Effect of illusory kinesthesia on hand function in patients with distal radius fractures: a quasi-randomized controlled study. Clinical rehabilitation May 2017;31(5):696-701	Ineligible study design (quasi-randomized study)
1448	Nazari G; Lu S; MacDermid JC Psychometric Properties of Performance-Based Functional Tests in Patients With Shoulder Pathologies: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Jun 2020;101(6):1053-1063	Ineligible study design (Systematic review and meta-analysis)
1449	Salazar APS; Vaz PG; Marchese RR; Stein C; Pinto C; Pagnussat AS Noninvasive Brain Stimulation Improves Hemispatial Neglect After Stroke: A Systematic Review and Meta-Analysis. Arch Phys Med Rehabil Feb 2018;99(2):355-366.e1	Ineligible study design (Systematic review and meta-analysis)
1450	Wu B; Ding Y; Zhong B; Jin X; Cao Y; Xu D Intervention Treatment for Myocardial Infarction With Tai Chi: A Systematic Review and Meta-analysis. Arch Phys Med Rehabil Mar 2020;():	Ineligible study design (Systematic review and meta-analysis)
1451	Shaw WS; Hartvigsen J; Woiszwillo MJ; Linton SJ; Reme SE Psychological Distress in Acute Low Back Pain: A Review of Measurement Scales and Levels of Distress Reported in the First 2 Months After Pain Onset. Arch Phys Med Rehabil Sep 2016;97(9):1573-1587	Ineligible study design (review paper)
1452	Huisstede BM; van den Brink J; Randsdorp MS; Geelen SJ; Koes BW Effectiveness of Surgical and Postsurgical Interventions for Carpal Tunnel Syndrome-A Systematic Review. Arch Phys Med Rehabil Aug 2018;99(8):1660-1680.e21	Ineligible study design (Systematic review)
1453	Burggraaff J; Dorn J; D'Souza M; Morrison C; Kamm CP; Kontschieder P; Tewarie P; Steinheimer S; Sellen A; Dahlke F; Kappos L; Uitdehaag B Video-Based Pairwise Comparison: Enabling the Development of Automated Rating of Motor Dysfunction in Multiple Sclerosis. Arch Phys Med Rehabil Feb 2020;101(2):234-241	Ineligible study design (Cross sectional study)
1454	Lin MT; Hsiao MY; Tu YK; Wang TG Comparative Efficacy of Intra-Articular Steroid Injection and Distension in Patients With Frozen Shoulder: A Systematic Review and Network Meta-Analysis. Arch Phys Med Rehabil Jul 2018;99(7):1383-1394.e6	Ineligible study design (Systematic review and meta-analysis)
1455	Carpinella I; Lencioni T; Bowman T; Bertoni R; Turolla A; Ferrarin M; Jonsdottir J Effects of robot therapy on upper body kinematics and arm function in persons post stroke: a pilot randomized controlled trial. J Neuroeng Rehabil Jan 2020;17(1):10	Ineligible study design (pilot RCT)

1456	Fattahi A; Taheri M Response to letter to the editor: The effects of amantadine on traumatic brain injury outcome: a double-blind, randomized, controlled, clinical trial. Brain Inj 2019;33(3):399-400	Ineligible study design (letter to editor)
1457	Scully AE; Lim ECW; Teow PP; Tan DML A systematic review of the diagnostic utility of simple tests of change after trial removal of cerebrospinal fluid in adults with normal pressure hydrocephalus. Clin Rehabil Jul 2018;32(7):942-953	Ineligible study design (Systematic review)
1458	Aceituno-Gómez J; Avendaño-Coy J; Gómez-Soriano J; García-Madero VM; Ávila-Martín G; Serrano-Muñoz D; González-González J; Criado-Álvarez JJ Efficacy of high-intensity laser therapy in subacromial impingement syndrome: a three-month follow-up controlled clinical trial. Clin Rehabil May 2019;33(5):894-903	Ineligible study design (non-randomized study)
1459	Øra HP; Kirmess M; Brady MC; Partee I; Hognestad RB; Johannessen BB; Thommessen B; Becker F The effect of augmented speech-language therapy delivered by telerehabilitation on poststroke aphasia-a pilot randomized controlled trial. Clin Rehabil Mar 2020;34(3):369-381	Ineligible study design (pilot trial)
1460	Erdodi LA; Rai JK A single error is one too many: Examining alternative cutoffs on Trial 2 of the TOMM. Brain Inj 2017;31(10):1362-1368	Ineligible study design (not an RCT)
1461	Andrade J; Cecílio J; Simões M; Sales F; Castelo-Branco M Separability of motor imagery of the self from interpretation of motor intentions of others at the single trial level: an EEG study. J Neuroeng Rehabil Jun 2017;14(1):63	Ineligible study design (not an RCT)
1462	Fairhall N; Sherrington C; Cameron ID; Kurrle SE; Lord SR; Lockwood K; Herbert RD A multifactorial intervention for frail older people is more than twice as effective among those who are compliant: complier average causal effect analysis of a randomised trial. J Physiother Jan 2017;63(1):40-44	Ineligible study design (Secondary data analysis)
1463	Bates A; Furber S; Tiedemann A; Ginn K; van den Dolder P; Howard K; Bauman A; Chittenden C; Franco L; Kershaw M; Sherrington C Trial Protocol: Home-based exercise programs to prevent falls and upper limb dysfunction among community-dwelling older people: study protocol for the BEST (Balance Exercise Strength Training) at Home randomised, controlled trial. J Physiother Apr 2018;64(2):121	Ineligible study design (study protocol)
1464	Campbell L; Kenardy J; Andersen T; McGregor L; Maujean A; Sterling M Trauma-focused cognitive behaviour therapy and exercise for chronic whiplash: protocol of a	Ineligible study design (RCT protocol)

	randomised, controlled trial. J Physiother Oct 2015;61(4):218	
1465	Bagg MK; Hübscher M; Rabey M; Wand BM; O'Hagan E; Moseley GL; Stanton TR; Maher CG; Goodall S; Saing S; O'Connell NE; Luomajoki H; McAuley JH The RESOLVE Trial for people with chronic low back pain: protocol for a randomised clinical trial. J Physiother Jan 2017;63(1):47-48	Ineligible study design (RCT protocol)
1466	Dupeyron A; Dénarié M; Richard D; Dobija L; Castelli C; Petiot S; Tavares I; Gelis A; Coudeyre E Analgesic gas for rehabilitation of frozen shoulder: Protocol for a randomized controlled trial. Ann Phys Rehabil Med Jan 2019;62(1):43-48	Ineligible study design (RCT protocol)
1467	Longobardi Y; Savoia V; Bussu F; Morra L; Mari G; Nesci DA; Parrilla C; D'Alatri L Integrated rehabilitation after total laryngectomy: a pilot trial study. Support Care Cancer Sep 2019;27(9):3537-3544	Ineligible study design (pilot trial)
1468	Schwitzguébel AJ; Benaïm C; Carda S; Torea Filgueira AM; Frischknecht R; Rapin PA GABAergic drug use and global, cognitive, and motor functional outcomes after stroke. Ann Phys Rehabil Med Dec 2016;59(5-6):320-325	Ineligible study design (retrospectively study)
1469	Antônio FI; Herbert RD; Bø K; Japur Sá Rosa-E-Silva AC; Silva Lara LA; de Menezes Franco M; Jorge Ferreira CH Erratum to 'Pelvic floor muscle training increases pelvic floor muscle strength more in post-menopausal women who are not using hormone therapy than in women who are using hormone therapy: a randomised trial' [J Physiother. 2018;64:166-171]. J Physiother Jan 2020;66(1):7-8	Ineligible study design (Erratum to an included RCT)
1470	Lee H; Moseley GL; Hübscher M; Kamper SJ; Traeger AC; Skinner IW; McAuley JH Understanding how pain education causes changes in pain and disability: protocol for a causal mediation analysis of the PREVENT trial. J Physiother Jul 2015;61(3):156	Ineligible study design (protocol)
1471	Tamplin J; Morris ME; Marigliani C; Baker FA; Vogel AP ParkinSong: A Controlled Trial of Singing-Based Therapy for Parkinson's Disease. Neurorehabil Neural Repair Jun 2019;33(6):453-463	Ineligible study design (non-randomized trial)
1472	Farr WJ; Green D; Bremner S; Male I; Gage H; Bailey S; Speller S; Colville V; Jackson M; Memon A; Morris C Feasibility of a randomised controlled trial to evaluate home-based virtual reality therapy in children with cerebral palsy. Disabil Rehabil May 2019;():1-13	Ineligible study design (feasibility study)
1473	Clanchy KM; Tweedy SM; Trost SG Evaluation of a Physical Activity Intervention for Adults With Brain Impairment: A Controlled	Ineligible study design (non-randomized trial)

	Clinical Trial. Neurorehabil Neural Repair Oct 2016;30(9):854-65	
1474	Orwig D; Mangione KK; Baumgarten M; Terrin M; Fortinsky R; Kenny AM; Gruber-Baldini AL; Beamer B; Tosteson A; Shardell M; Magder L; Binder E; Koval K; Resnick B; Craik RL; Magaziner J Improving community ambulation after hip fracture: protocol for a randomised, controlled trial. J Physiother Jan 2017;63(1):45-46	Ineligible study design (RCT protocol)
1475	Taylor NF; Peiris CL; Kennedy G; Shields N Walking tolerance of patients recovering from hip fracture: a phase I trial. Disabil Rehabil Sep 2016;38(19):1900-8	Ineligible study design (Phase 1 trial)
1476	Williams G; Ada L; Hassett L; Morris ME; Clark R; Bryant AL; Olver J Ballistic strength training compared with usual care for improving mobility following traumatic brain injury: protocol for a randomised, controlled trial. J Physiother Jul 2016;62(3):164	Ineligible study design (RCT protocol)
1477	Cook S; Vettese E; Tomlinson GA; Soman D; Schechter T; Kuczynski S; Gladstone B; Dupuis LL; Sung L Feasibility of a randomized controlled trial of symptom screening and feedback to healthcare providers compared with standard of care using the SPARK platform. Support Care Cancer Jun 2020;28(6):2729-2734	Ineligible study design (feasibility study)
1478	Sveaas SH; Dagfinrud H; Berg IJ; Provan SA; Johansen MW; Pedersen E; Bilberg A High-Intensity Exercise Improves Fatigue, Sleep, and Mood in Patients With Axial Spondyloarthritis: Secondary Analysis of a Randomized Controlled Trial. Phys Ther May 2020;():	Ineligible study design (Secondary data analysis)
1479	Matsuoka H; Iwase S; Miyaji T; Kawaguchi T; Ariyoshi K; Oyamada S; Satomi E; Ishiki H; Hasuo H; Sakuma H; Tokoro A; Matsuda Y; Tahara K; Otani H; Ohtake Y; Tsukuura H; Matsumoto Y; Hasegawa Y; Kataoka Y; Otsuka M; Sakai K; Nakura M; Morita T; Yamaguchi T; Koyama A Predictors of duloxetine response in patients with neuropathic cancer pain: a secondary analysis of a randomized controlled trial-JORTC-PAL08 (DIRECT) study. Support Care Cancer Jun 2020;28(6):2931-2939	Ineligible study design (Secondary data analysis)
1480	Parrington L; Jehu DA; Fino PC; Stuart S; Wilhelm J; Pettigrew N; Murchison CF; El-Gohary M; VanDerwalker J; Pearson S; Hullar T; Chesnutt JC; Peterka RJ; Horak FB; King LA The Sensor Technology and Rehabilitative Timing (START) Protocol: A Randomized Controlled Trial for the Rehabilitation of Mild Traumatic Brain Injury. Phys Ther Apr 2020;100(4):687-697	Ineligible study design (RCT protocol)
1481	Guerrero Y; Soomro N; Wilson G; Dam Y; Meiklejohn J; Simpson K; Smith R; Brand-Miller J; Simic M; O'Connor H; Mavros Y; Foroughi N; Poon T; Bradshaw K; March L; Vanwanseele B; Eckstein F; Fransen M; Bergamasco J; Anandacoomarasamy A; Singh MF	Ineligible study design (RCT protocol)

	Train High Eat Low for Osteoarthritis study (THE LO study): protocol for a randomized controlled trial. J Physiother Oct 2015;61(4):217	
1482	Turunen K.; Salpakoski A.; Edgren J.; Törmäkangas T.; Arkela M.; Kallinen M.; Pesola M.; Hartikainen S.; Nikander R.; Sipilä S. Physical Activity After a Hip Fracture: Effect of a Multicomponent Home-Based Rehabilitation Program-A Secondary Analysis of a Randomized Controlled Trial. Archives of physical medicine and rehabilitation 05 2017;98(5):981-988	Ineligible study design (Secondary data analysis)
1483	Zdenkowski N.; Radvan G.; Pugliese L.; Charlton J.; Oldmeadow C.; Fraser A.; Bonaventura A. Treatment of pancreatic insufficiency using pancreatic extract in patients with advanced pancreatic cancer: a pilot study (PICNIC). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 06 2017;25(6):1963-1971	Ineligible study design (pilot study)
1484	Dymowski AR.; Ponsford JL.; Owens JA.; Olver JH.; Ponsford M.; Willmott C. The efficacy and safety of extended-release methylphenidate following traumatic brain injury: a randomised controlled pilot study. Clinical rehabilitation Jun 2017;31(6):733-741	Ineligible study design (pilot study)
1485	Paul L.; Renfrew L.; Freeman J.; Murray H.; Weller B.; Mattison P.; McConnachie A.; Heggie R.; Wu O.; Coulter EH. Web-based physiotherapy for people affected by multiple sclerosis: a single blind, randomized controlled feasibility study. Clinical rehabilitation Mar 2019;33(3):473-484	Ineligible study design (feasibility study)
1486	Fleckenstein J.; Friton M.; Himmelreich H.; Banzer W. Effect of a Single Administration of Focused Extracorporeal Shock Wave in the Relief of Delayed-Onset Muscle Soreness: Results of a Partially Blinded Randomized Controlled Trial. Archives of physical medicine and rehabilitation 05 2017;98(5):923-930	Ineligible study design (pilot trial)
1487	Rothgangel A.; Braun S.; Smeets R.; Beurskens A. Feasibility of a traditional and teletreatment approach to mirror therapy in patients with phantom limb pain: a process evaluation performed alongside a randomized controlled trial. Clinical rehabilitation Oct 2019;33(10):1649-1660	Ineligible study design (feasibility study)
1488	Stillman MD.; Barber J.; Burns S.; Williams S.; Hoffman JM. Complications of Spinal Cord Injury Over the First Year After Discharge From Inpatient Rehabilitation. Archives of physical medicine and rehabilitation 09 2017;98(9):1800-1805	Ineligible study design (Secondary data analysis)
1489	Brazg G.; Fahey M.; Holleran CL.; Connolly M.; Woodward J.; Hennessy PW.; Schmit BD.; Hornby TG. Effects of Training Intensity on Locomotor Performance in Individuals With Chronic Spinal	Ineligible study design (pilot study)

	Cord Injury: A Randomized Crossover Study. Neurorehabilitation and neural repair ;31(10-11):944-954	
1490	Waddell KJ; Lang CE Comparison of Self-Report Versus Sensor-Based Methods for Measuring the Amount of Upper Limb Activity Outside the Clinic. Arch Phys Med Rehabil Sep 2018;99(9):1913-1916	Ineligible study design (Secondary data analysis)
1491	Louw A; Puentedura EJ; Reese D; Parker P; Miller T; Mintken PE Immediate Effects of Mirror Therapy in Patients With Shoulder Pain and Decreased Range of Motion. Arch Phys Med Rehabil Oct 2017;98(10):1941-1947	Ineligible study design (case series)
1492	Williams A.; Lee H.; Kamper SJ.; O'Brien KM.; Wiggers J.; Wolfenden L.; Yoong SL.; Hodder RK.; Robson EK.; Haskins R.; McAuley JH.; Williams CM. Causal mechanisms of a healthy lifestyle intervention for patients with musculoskeletal pain who are overweight or obese. Clinical rehabilitation Jun 2019;33(6):1088-1097	Ineligible study design (sub-study from larger RCT)
1493	Arden-Close EJ.; Kirby SE.; Yardley L.; Bruton A.; Ainsworth B.; Thomas DM. Evaluation of a breathing retraining intervention to improve quality of life in asthma: quantitative process analysis of the BREATHE randomized controlled trial. Clinical rehabilitation Jul 2019;33(7):1139-1149	Ineligible study design (quantitative process study)
1494	Robijns J.; Censabella S.; Claes S.; Pannekoeke L.; Bussé L.; Colson D.; Kaminski I.; Lodewijckx J.; Bulens P.; Maes A.; Noé L.; Brosens M.; Timmermans A.; Lambrichts I.; Somers V.; Mebis J. Biophysical skin measurements to evaluate the effectiveness of photobiomodulation therapy in the prevention of acute radiation dermatitis in breast cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2019;27(4):1245-1254	Ineligible study design (Secondary data analysis)
1495	Pradines M.; Ghedira M.; Portero R.; Masson I.; Marciniak C.; Hicklin D.; Hutin E.; Portero P.; Gracies JM.; Bayle N. Ultrasound Structural Changes in Triceps Surae After a 1-Year Daily Self-stretch Program: A Prospective Randomized Controlled Trial in Chronic Hemiparesis. Neurorehabilitation and neural repair 04 2019;33(4):245-259	Ineligible study design (ancillary study)
1496	Liao CD.; Lin LF.; Huang YC.; Huang SW.; Chou LC.; Liou TH. Functional outcomes of outpatient balance training following total knee replacement in patients with knee osteoarthritis: a randomized controlled trial. Clinical rehabilitation Sep 2015;29(9):855-67	Ineligible study design (follow up publication of an RCT)
1497	Dalager T.; Bredahl TG.; Pedersen MT.; Boyle E.; Andersen LL.; Sjøgaard G. Does training frequency and supervision affect compliance, performance and muscular health? A cluster randomized controlled trial.	Ineligible study design (Secondary data analysis)

	Manual therapy Oct 2015;20(5):657-65	
1498	Fisher BE.; Piraino A.; Lee YY.; Smith JA.; Johnson S.; Davenport TE.; Kulig K. The Effect of Velocity of Joint Mobilization on Corticospinal Excitability in Individuals With a History of Ankle Sprain. The Journal of orthopaedic and sports physical therapy Jul 2016;46(7):562-70	Ineligible study design (laboratory study)
1499	Check DK.; Rosenstein DL.; Dusetzina SB. Early supportive medication use and end-of-life care among Medicare beneficiaries with advanced breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2016;24(8):3463-72	Ineligible study design (Secondary data analysis)
1500	Kuehl R.; Schmidt ME.; Dreger P.; Steindorf K.; Bohus M.; Wiskemann J. Determinants of exercise adherence and contamination in a randomized controlled trial in cancer patients during and after allogeneic HCT. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 10 2016;24(10):4327-37	Ineligible study design (sub-study from on-going RCT)
1501	Sturkenboom IH.; Nijhuis-van der Sanden MW.; Graff MJ. A process evaluation of a home-based occupational therapy intervention for Parkinson's patients and their caregivers performed alongside a randomized controlled trial. Clinical rehabilitation Dec 2016;30(12):1186-1199	Ineligible study design (process evaluation)
1502	Maffei P.; Wiramus S.; Bensoussan L.; Bienvenu L.; Haddad E.; Morange S.; Fathallah M.; Hardwigsen J.; Viton JM.; Le Treut YP.; Albanese J.; Gregoire E. Intensive Early Rehabilitation in the Intensive Care Unit for Liver Transplant Recipients: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 08 2017;98(8):1518-1525	Ineligible study design (pilot RCT)
1503	Lee I. The effect of postural control intervention for congenital muscular torticollis: a randomized controlled trial. Clinical rehabilitation Aug 2015;29(8):795-802	Ineligible study design (Retracted)
1504	Bennell KL.; Rini C.; Keefe F.; French S.; Nelligan R.; Kasza J.; Forbes A.; Dobson F.; Abbott JH.; Dalwood A.; Vicenzino B.; Harris A.; Hinman RS. Effects of Adding an Internet-Based Pain Coping Skills Training Protocol to a Standardized Education and Exercise Program for People With Persistent Hip Pain (HOPE Trial): Randomized Controlled Trial Protocol. Physical therapy Oct 2015;95(10):1408-22	Ineligible study design (RCT protocol)
1505	Jordan K.; Gralla R.; Rizzi G.; Kashef K. Efficacy benefit of an NK1 receptor antagonist (NK1RA) in patients receiving carboplatin: supportive evidence with NEPA (a fixed combination of the NK1 RA, netupitant, and palonosetron) and aprepitant regimens.	Ineligible study design (sub-study from a larger RCT)

	Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 11 2016;24(11):4617-25 2016 11	
1506	Totosy de Zepetnek JO.; Pelletier CA.; Hicks AL.; MacDonald MJ. Following the Physical Activity Guidelines for Adults With Spinal Cord Injury for 16 Weeks Does Not Improve Vascular Health: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation Sep 2015;96(9):1566-75	Ineligible study design (sub-study from a larger RCT)
1507	Awad LN.; Reisman DS.; Pohlig RT.; Binder-Macleod SA. Reducing The Cost of Transport and Increasing Walking Distance After Stroke: A Randomized Controlled Trial on Fast Locomotor Training Combined With Functional Electrical Stimulation. Neurorehabilitation and neural repair 08 2016;30(7):661-70	Ineligible study design (sub-study from a larger RCT/ registry)
1508	Moustafa IM.; Diab AA.; Taha S.; Harrison DE. Addition of a Sagittal Cervical Posture Corrective Orthotic Device to a Multimodal Rehabilitation Program Improves Short- and Long-Term Outcomes in Patients With Discogenic Cervical Radiculopathy. Archives of physical medicine and rehabilitation 12 2016;97(12):2034-2044	Ineligible study design (pilot RCT)
1509	Hedman A.; Eriksson G.; von Koch L.; Guidetti S. Five-year follow-up of a cluster-randomized controlled trial of a client-centred activities of daily living intervention for people with stroke. Clinical rehabilitation Feb 2019;33(2):262-276	Ineligible study design (follow up publication of an RCT)
1510	Barnhoorn K.; Staal JB.; van Dongen RT.; Frölke JPM.; Klomp FP.; van de Meent H.; Adang E.; Nijhuis-van der Sanden MW. Pain Exposure Physical Therapy versus conventional treatment in complex regional pain syndrome type 1-a cost-effectiveness analysis alongside a randomized controlled trial. Clinical rehabilitation Jun 2018;32(6):790-798	Ineligible study design (cost-effectiveness analysis)
1511	Hewitt J.; Saing S.; Goodall S.; Henwood T.; Clemson L.; Refshauge K. An economic evaluation of the SUNBEAM programme: a falls-prevention randomized controlled trial in residential aged care. Clinical rehabilitation Mar 2019;33(3):524-534	Ineligible study design (economic evaluation)
1512	Langhammer B.; Ada L.; Gunnes M.; Ihle-Hansen H.; Indredavik B.; Askim T. A physical activity program is no more effective than standard care at maintaining upper limb activity in community-dwelling people with stroke: secondary outcomes from a randomized trial. Clinical rehabilitation Oct 2019;33(10):1607-1613	Ineligible study design (secondary data/outcomes analysis)
1513	Peruzzi A.; Zarbo IR.; Cereatti A.; Della Croce U.; Mirelman A. An innovative training program based on virtual reality and treadmill: effects on gait of persons with multiple sclerosis.	Ineligible study design (feasibility study)

	Disability and rehabilitation 07 2017;39(15):1557-1563	
1514	Aapro M.; Karthaus M.; Schwartzberg L.; Bondarenko I.; Sarosiek T.; Oprean C.; Cardona-Huerta S.; Hansen V.; Rossi G.; Rizzi G.; Borroni ME.; Rugo H. NEPA, a fixed oral combination of netupitant and palonosetron, improves control of chemotherapy-induced nausea and vomiting (CINV) over multiple cycles of chemotherapy: results of a randomized, double-blind, phase 3 trial versus oral palonosetron. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 04 2017;25(4):1127-1135	Ineligible study design (sub-study/extension of previous RCT)
1515	Tsuji D.; Suzuki K.; Kawasaki Y.; Goto K.; Matsui R.; Seki N.; Hashimoto H.; Hama T.; Yamanaka T.; Yamamoto N.; Itoh K. Risk factors associated with chemotherapy-induced nausea and vomiting in the triplet antiemetic regimen including palonosetron or granisetron for cisplatin-based chemotherapy: analysis of a randomized, double-blind controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2019;27(3):1139-1147	Ineligible study design (sub-study of previous RCT)
1516	Cogné M.; Creuzé A.; Petit H.; Delleci C.; Dehail P.; de Seze M. Number of botulinum toxin injections needed to stop requests for treatment for chronic lateral epicondylar tendinopathy. A 1-year follow-up study. Annals of physical and rehabilitation medicine Sep 2019;62(5):336-341	Ineligible study design (follow up publication of an RCT)
1517	Schofield PE.; Stockler MR.; Zannino D.; Tebbutt NC.; Price TJ.; Simes RJ.; Wong N.; Pavlakis N.; Ransom D.; Moylan E.; Underhill C.; Wyld D.; Burns I.; Ward R.; Wilcken N.; Jefford M. Hope, optimism and survival in a randomised trial of chemotherapy for metastatic colorectal cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2016;24(1):401-408	Ineligible study design (sub-study of previous RCT)
1518	Rice IM.; Rice LA.; Motl RW. Promoting Physical Activity Through a Manual Wheelchair Propulsion Intervention in Persons With Multiple Sclerosis. Archives of physical medicine and rehabilitation Oct 2015;96(10):1850-8	Ineligible study design (pilot trial)
1519	Bethoux F.; Rogers HL.; Nolan KJ.; Abrams GM.; Annaswamy T.; Brandstater M.; Browne B.; Burnfield JM.; Feng W.; Freed MJ.; Geis C.; Greenberg J.; Gudesblatt M.; Ikramuddin F.; Jayaraman A.; Kautz SA.; Lutsep HL.; Madhavan S.; Meilahn J.; Pease WS.; Rao N.; Seetharama S.; Sethi P.; Turk MA.; Wallis RA.; Kufta C. Long-Term Follow-up to a Randomized Controlled Trial Comparing Peroneal Nerve Functional Electrical Stimulation to an Ankle Foot Orthosis for Patients With Chronic Stroke. Neurorehabilitation and neural repair ;29(10):911-22	Ineligible study design (follow up publication of an RCT)
1520	Chen HL.; Lin KC.; Hsieh YW.; Wu CY.; Liing RJ.; Chen CL. A study of predictive validity, responsiveness, and minimal clinically important difference of	Ineligible study design (measurement study)

	arm accelerometer in real-world activity of patients with chronic stroke. Clinical rehabilitation Jan 2018;32(1):75-83	
1521	Collett J.; Franssen M.; Winward C.; Izadi H.; Meaney A.; Mahmoud W.; Bogdanovic M.; Tims M.; Wade D.; Dawes H. A long-term self-managed handwriting intervention for people with Parkinson's disease: results from the control group of a phase II randomized controlled trial. Clinical rehabilitation Dec 2017;31(12):1636-1645	Ineligible study design (Secondary data analysis)
1522	Lewthwaite R.; Winstein CJ.; Lane CJ.; Blanton S.; Wagenheim BR.; Nelsen MA.; Dromerick AW.; Wolf SL. Accelerating Stroke Recovery: Body Structures and Functions, Activities, Participation, and Quality of Life Outcomes From a Large Rehabilitation Trial. Neurorehabilitation and neural repair 02 2018;32(2):150-165	Ineligible study design (sub-study of previous RCT)
1523	Esquenazi A.; Lee S.; Wikoff A.; Packel A.; Toczylowski T.; Feeley J. A Comparison of Locomotor Therapy Interventions: Partial-Body Weight-Supported Treadmill, Lokomat, and G-EO Training in People With Traumatic Brain Injury. PM & R : the journal of injury, function, and rehabilitation Sep 2017;9(9):839-846	Ineligible study design (sub-study/extension of previous RCT)
1524	Hamilton C.; McCluskey A.; Hassett L.; Killington M.; Lovarini M. Patient and therapist experiences of using affordable feedback-based technology in rehabilitation: a qualitative study nested in a randomized controlled trial. Clinical rehabilitation Sep 2018;32(9):1258-1270	Ineligible study design (qualitative study)
1525	Lund C.; Dalgas U.; Grønborg TK.; Andersen H.; Severinsen K.; Riemenschneider M.; Overgaard K. Balance and walking performance are improved after resistance and aerobic training in persons with chronic stroke. Disability and rehabilitation 10 2018;40(20):2408-2415	Ineligible study design (sub-study of previous RCT)
1526	Wales K.; Salkeld G.; Clemson L.; Lannin NA.; Gitlin L.; Rubenstein L.; Howard K.; Howell M.; Cameron ID. A trial based economic evaluation of occupational therapy discharge planning for older adults: the HOME randomized trial. Clinical rehabilitation Jul 2018;32(7):919-929	Ineligible study design (economic evaluation)
1527	Slaman J.; van den Berg-Emons HJ.; van Meeteren J.; Twisk J.; van Markus F.; Stam HJ.; van der Slot WM.; Roebroeck ME. A lifestyle intervention improves fatigue, mental health and social support among adolescents and young adults with cerebral palsy: focus on mediating effects. Clinical rehabilitation Jul 2015;29(7):717-27	Ineligible study design (sub-study of previous RCT)
1528	Cabanas-Valdés R.; Bagur-Calafat C.; Girabent-Farrés M.; Caballero-Gómez FM.; du Port de Pontcharra-Serra H.; German-Romero A.; Urrútia G. Long-term follow-up of a randomized controlled trial on additional core stability exercises	Ineligible study design (follow up of previous RCT)

	training for improving dynamic sitting balance and trunk control in stroke patients. Clinical rehabilitation Nov 2017;31(11):1492-1499	
1529	Manor B.; Zhou J.; Harrison R.; Lo OY.; Travison TG.; Hausdorff JM.; Pascual-Leone A.; Lipsitz L. Transcranial Direct Current Stimulation May Improve Cognitive-Motor Function in Functionally Limited Older Adults. Neurorehabilitation and neural repair 09 2018;32(9):788-798	Ineligible study design (pilot study)
1530	Smale KJ.; Carr SE.; Schwartz AF.; das Nair R.; Lincoln NB. An evaluation of treatment integrity in a randomised controlled trial of memory rehabilitation for people with multiple sclerosis. Clinical rehabilitation May 2015;29(5):493-9	Ineligible study design (sub-study of previous RCT)
1531	Ebenbichler GR.; Inschlag S.; Pflüger V.; Stemberger R.; Wiesinger G.; Novak K.; Christoph K.; Resch KL. Twelve-year follow-up of a randomized controlled trial of comprehensive physiotherapy following discherniation operation. Clinical rehabilitation Jun 2015;29(6):548-60	Ineligible study design (follow up publication of an RCT)
1532	Nadkarni NK.; Perera S.; Studenski SA.; Rosano C.; Aizenstein HJ.; VanSwearingen JM. Callosal hyperintensities and gait speed gain from two types of mobility interventions in older adults. Archives of physical medicine and rehabilitation Jun 2015;96(6):1154-7	Ineligible study design (Secondary data analysis)
1533	Si Z.; Hu K.; Wang C.; Jia L.; Zhang X.; Wang A. The effects of neuromuscular facilitation techniques on osteoporosis of hemiplegia limbs and serum leptin level in patients or rats with cerebral infarction. Brain injury 2016;30(4):474-479	Ineligible population (animals/rats)
1534	Bertens D.; Fasotti L.; Boelen DH.; Kessels RP. Moderators, Mediators, and Nonspecific Predictors of Treatment Outcome in an Intervention for Everyday Task Improvement in Persons With Executive Deficits After Brain Injury. Archives of physical medicine and rehabilitation Jan 2016;97(1):97-103	Ineligible study design (secondary/predictor data analysis)
1535	Morganroth J.; Flaharty KK.; Parisi S.; Moresino C. Effect of single doses of IV palonosetron, up to 2.25 mg, on the QTc interval duration: a double-blind, randomized, parallel group study in healthy volunteers. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):621-627	Ineligible study design (Phase 1 trial)
1536	Celio L.; Bonizzoni E.; De Braud F.; Agustoni F.; Aapro M. Should clinicians always administer dexamethasone beyond 24 h after chemotherapy to control delayed nausea and vomiting caused by moderately emetogenic regimens? Insight from the re-evaluation of two randomized studies. Supportive care in cancer : official journal of the Multinational Association of Supportive Care	Ineligible study design (re-analysis of published RCT data)

	in Cancer Mar 2016;24(3):1025-34	
1537	Viziano A.; Micarelli A.; Augimeri I.; Micarelli D.; Alessandrini M. Long-term effects of vestibular rehabilitation and head-mounted gaming task procedure in unilateral vestibular hypofunction: a 12-month follow-up of a randomized controlled trial. Clinical rehabilitation Jan 2019;33(1):24-33	Ineligible study design (sub-study of larger RCT)
1538	Heckler CE.; Garland SN.; Peoples AR.; Perlis ML.; Shayne M.; Morrow GR.; Kamen C.; Hoefler J.; Roscoe JA. Cognitive behavioral therapy for insomnia, but not armodafinil, improves fatigue in cancer survivors with insomnia: a randomized placebo-controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2016;24(5):2059-2066	Ineligible study design (sub-study of larger RCT)
1539	Berggren M.; Karlsson Å.; Lindelöf N.; Englund U.; Olofsson B.; Nordström P.; Gustafson Y.; Stenvall M. Effects of geriatric interdisciplinary home rehabilitation on complications and readmissions after hip fracture: a randomized controlled trial. Clinical rehabilitation Jan 2019;33(1):64-73	Ineligible study design (sub-study of larger RCT)
1540	Malling ASB.; Morberg BM.; Wermuth L.; Gredal O.; Bech P.; Jensen BR. The effect of 8 weeks of treatment with transcranial pulsed electromagnetic fields on hand tremor and inter-hand coherence in persons with Parkinson's disease. Journal of neuroengineering and rehabilitation 01 2019;16(1):19	Ineligible study design (sub-study of larger RCT)
1541	Steele J.; Bruce-Low S.; Smith D.; Jessop D.; Osborne N. A Randomized Controlled Trial of the Effects of Isolated Lumbar Extension Exercise on Lumbar Kinematic Pattern Variability During Gait in Chronic Low Back Pain. PM & R : the journal of injury, function, and rehabilitation Feb 2016;8(2):105-14	Ineligible study design (sub-study of larger RCT)
1542	Wallén MB.; Hagströmer M.; Conradsson D.; Sorjonen K.; Franzén E. Long-term effects of highly challenging balance training in Parkinson's disease-a randomized controlled trial. Clinical rehabilitation Nov 2018;32(11):1520-1529	Ineligible study design (follow up publication of an RCT)
1543	Treleaven J.; Peterson G.; Ludvigsson ML.; Kammerlind AS.; Peolsson A. Balance, dizziness and proprioception in patients with chronic whiplash associated disorders complaining of dizziness: A prospective randomized study comparing three exercise programs. Manual therapy Apr 2016;22():122-30	Ineligible study design (sub-analysis of a randomized study)
1544	Alfredo PP.; Bjordal JM.; Junior WS.; Lopes-Martins RÁB.; Stausholm MB.; Casarotto RA.; Marques AP.; Joensen J. Long-term results of a randomized, controlled, double-blind study of low-level laser therapy before exercises in knee osteoarthritis: laser and exercises in knee osteoarthritis. Clinical rehabilitation Feb 2018;32(2):173-178	Ineligible study design (follow up publication of an RCT)

1545	Kleckner IR.; Kamen C.; Cole C.; Fung C.; Heckler CE.; Guido JJ.; Culakova E.; Onitilo AA.; Conlin A.; Kuebler JP.; Mohile S.; Janelsins M.; Mustian KM. Effects of exercise on inflammation in patients receiving chemotherapy: a nationwide NCORP randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Dec 2019;27(12):4615-4625	Ineligible study design (Secondary data analysis)
1546	Kjaersgaard A.; Nielsen LH.; Sjölund BH. Factors affecting return to oral intake in inpatient rehabilitation after acquired brain injury. Brain injury 2015;29(9):1094-104	Ineligible study design (sub-study of larger RCT)
1547	Kleckner IR.; Kamen C.; Gewandter JS.; Mohile NA.; Heckler CE.; Culakova E.; Fung C.; Janelsins MC.; Asare M.; Lin PJ.; Reddy PS.; Giguere J.; Berenberg J.; Kesler SR.; Mustian KM. Effects of exercise during chemotherapy on chemotherapy-induced peripheral neuropathy: a multicenter, randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2018;26(4):1019-1028	Ineligible study design (Secondary data analysis)
1548	Risberg MA.; Ageberg E.; Nilstad A.; Lund B.; Nordsletten L.; Løken S.; Ludvigsen T.; Kierkegaard S.; Carsen S.; Kostogiannis I.; Crossley KM.; Glyn-Jones S.; Kemp JL. Arthroscopic Surgical Procedures Versus Sham Surgery for Patients With Femoroacetabular Impingement and/or Labral Tears: Study Protocol for a Randomized Controlled Trial (HIPARTI) and a Prospective Cohort Study (HARP). The Journal of orthopaedic and sports physical therapy Apr 2018;48(4):325-335	Ineligible study design (RCT protocol)
1549	Blaha RZ.; Arnett AB.; Kirkwood MW.; Taylor HG.; Stancin T.; Brown TM.; Wade SL. Factors influencing attrition in a multisite, randomized, clinical trial following traumatic brain injury in adolescence. The Journal of head trauma rehabilitation ;30(3):E33-40	Ineligible study design (sub-study of larger RCT)
1550	Rahimi A.; Mohamad O.; Albuquerque K.; Kim DWN.; Chen D.; Thomas K.; Wooldridge R.; Rivers A.; Leitch M.; Rao R.; Haley B.; Ahn C.; Garwood D.; Spangler A. Novel hyaluronan formulation for preventing acute skin reactions in breast during radiotherapy: a randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1481-1489	Ineligible study design (pilot study)
1551	Driessen CML.; Groenewoud JMM.; de Boer JP.; Gelderblom H.; van der Graaf WTA.; Prins JB.; Kaanders JHAM.; van Herpen CML. Quality of life of patients with locally advanced head and neck cancer treated with induction chemotherapy followed by cisplatin-containing chemoradiotherapy in the Dutch CONDOR study: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2018;26(4):1233-1242	Ineligible study design (sub-study of larger RCT)

1552	Gluppe SL.; Hilde G.; Tennfjord MK.; Engh ME.; Bø K. Effect of a Postpartum Training Program on the Prevalence of Diastasis Recti Abdominis in Postpartum Primiparous Women: A Randomized Controlled Trial. Physical therapy 04 2018;98(4):260-268	Ineligible study design (Secondary data analysis)
1553	Kolb NA.; Smith AG.; Singleton JR.; Beck SL.; Howard D.; Dittus K.; Karafiath S.; Mooney K. Chemotherapy-related neuropathic symptom management: a randomized trial of an automated symptom-monitoring system paired with nurse practitioner follow-up. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2018;26(5):1607-1615	Ineligible study design (sub-study of larger RCT)
1554	Peoples, A. R., Roscoe, J. A., Block, R. C., Heckler, C. E., Ryan, J. L., Mustian, K. M., … Dozier, A. M. (2017). Nausea and disturbed sleep as predictors of cancer-related fatigue in breast cancer patients: a multicenter NCORP study. Supportive Care in Cancer. https://doi.org/10.1007/s00520-016-3520-8	Ineligible study design (Secondary data analysis)
1555	Davies A.; Kleeberg UR.; Jarosz J.; Mercadante S.; Poulain P.; O'Brien T.; Schneid H.; Kress HG. Improved patient functioning after treatment of breakthrough cancer pain: an open-label study of fentanyl buccal tablet in patients with cancer pain. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2015;23(7):2135-43	Ineligible study design (sub-study of larger RCT)
1556	Ramos-Murguialday A.; Curado MR.; Broetz D.; Yilmaz Ö.; Brasil FL.; Liberati G.; Garcia-Cossio E.; Cho W.; Caria A.; Cohen LG.; Birbaumer N. Brain-Machine Interface in Chronic Stroke: Randomized Trial Long-Term Follow-up. Neurorehabilitation and neural repair 03 2019;33(3):188-198	Ineligible study design (follow up of previous study)
1557	Kooijmans H.; Post MWM.; Stam HJ.; van der Woude LHV.; Spijkerman DCM.; Snoek GJ.; Bongers-Janssen HMH.; van Koppenhagen CF.; Twisk JW.; .; Bussmann JBJ. Effectiveness of a Self-Management Intervention to Promote an Active Lifestyle in Persons With Long-Term Spinal Cord Injury: The HABITS Randomized Clinical Trial. Neurorehabilitation and neural repair Dec 2017;31(12):991-1004	Ineligible study design (sub-study of larger RCT)
1558	Fronek P.; Kendall MB. The impact of Professional Boundaries for Health Professionals (PBHP) training on knowledge, comfort, experience, and ethical decision-making: a longitudinal randomized controlled trial. Disability and rehabilitation 12 2017;39(24):2522-2529	Ineligible study design (sub-study of larger RCT)
1559	Babbage DR.; Zupan B.; Neumann D.; Willer B. Sex differences in response to emotion recognition training after traumatic brain injury. Brain injury 2018;32(12):1492-1499	Ineligible study design (sub-study of larger RCT)
1560	Sio TT.; Atherton PJ.; Birckhead BJ.; Schwartz DJ.; Sloan JA.; Seisler DK.; Martenson JA.;	Ineligible study design (sub-

	Loprinzi CL.; Griffin PC.; Morton RF.; Anders JC.; Stoffel TJ.; Haselow RE.; Mowat RB.; Wittich MA.; Bearden JD.; Miller RC. Repeated measures analyses of dermatitis symptom evolution in breast cancer patients receiving radiotherapy in a phase 3 randomized trial of mometasone furoate vs placebo (N06C4 [alliance]). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2016;24(9):3847-55	study of larger RCT)
1561	Chasen M.; Urban L.; Schnadig I.; Rapoport B.; Powers D.; Arora S.; Navari R.; Schwartzberg L.; Gridelli C. Rolapitant improves quality of life of patients receiving highly or moderately emetogenic chemotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 01 2017;25(1):85-92	Ineligible study design (sub-study of larger RCT)
1562	Maldonado-Martín S.; Brubaker PH.; Eggebeen J.; Stewart KP.; Kitzman DW. Association Between 6-Minute Walk Test Distance and Objective Variables of Functional Capacity After Exercise Training in Elderly Heart Failure Patients With Preserved Ejection Fraction: A Randomized Exercise Trial. Archives of physical medicine and rehabilitation 03 2017;98(3):600-603	Ineligible study design (sub-study of larger RCT)
1563	Golding K.; Fife-Schaw C.; Kneebone I. Twelve month follow-up on a randomised controlled trial of relaxation training for post-stroke anxiety. Clinical rehabilitation Sep 2017;31(9):1164-1167	Ineligible study design (sub-study of larger RCT)
1564	Nightingale TE.; Rouse PC.; Walhin JP.; Thompson D.; Bilzon JLJ. Home-Based Exercise Enhances Health-Related Quality of Life in Persons With Spinal Cord Injury: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 10 2018;99(10):1998-2006.e1	Ineligible study design (sub-study of larger RCT)
1565	Sweeney FC.; Demark-Wahnefried W.; Courneya KS.; Sami N.; Lee K.; Tripathy D.; Yamada K.; Buchanan TA.; Spicer DV.; Bernstein L.; Mortimer JE.; Dieli-Conwright CM. Aerobic and Resistance Exercise Improves Shoulder Function in Women Who Are Overweight or Obese and Have Breast Cancer: A Randomized Controlled Trial. Physical therapy 10 2019;99(10):1334-1345	Ineligible study design (sub-study of larger RCT)
1566	van der Geer SJ.; Reintsema H.; Kamstra JI.; Roodenburg JLN.; Dijkstra PU. The use of stretching devices for treatment of trismus in head and neck cancer patients: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2020;28(1):9-11	Ineligible study design (Commentary)
1567	Yu YT.; Huang WC.; Hsieh WS.; Chang JH.; Lin CH.; Hsieh S.; Lu L.; Yao NJ.; Fan PC.; Lee CL.; Tu YK.; Jeng SF. Family-Centered Care Enhanced Neonatal Neurophysiological Function in Preterm Infants:	Ineligible study design (sub-study of larger RCT)

	Randomized Controlled Trial. Physical therapy 12 2019;99(12):1690-1702	
1568	Sikorskii A.; Niyogi PG.; Victorson D.; Tamkus D.; Wyatt G. Symptom response analysis of a randomized controlled trial of reflexology for symptom management among women with advanced breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1395-1404	Ineligible study design (Secondary data analysis)
1569	Dranitsaris G; Shane LG; Galanaud JP; Stemer G; Debourdeau P; Woodruff S Dalteparin or vitamin K antagonists to prevent recurrent venous thromboembolism in cancer patients: a patient-level economic analysis for France and Austria. Support Care Cancer Jul 2017;25(7):2093-2102	Ineligible study design (Secondary data analysis)
1570	Pang L; de la Cruz M; Wu J; Liu D; Naqvi M; Bruera E Symptom frequency and change of oldest old cancer patients. Support Care Cancer Nov 2019;27(11):4165-4170	Ineligible study design (retrospective study)
1571	Gómez-Vela P; Pérez-Ruiz M; Hernández Martín MF; Román J; Larumbe-Zabala E Acute effect of orange chromatic environment on perceived health status, pain, and vital signs during chemotherapy treatment. Support Care Cancer May 2020;28(5):2321-2329	Ineligible study design (not a parallel group RCT)
1572	Smith-Turchyn J; Richardson J; Tozer R; McNeely M; Thabane L Bridging the gap: incorporating exercise evidence into clinical practice in breast cancer care. Support Care Cancer Feb 2020;28(2):897-905	Ineligible study design (Pilot/implementation trial)
1573	Regueme SC; Echeverria I; Monéger N; Durrieu J; Becerro-Hallard M; Duc S; Lafargue A; Mertens C; Laksir H; Ceccaldi J; Lavau-Denes S; Dantoine T; Irazusta J; Bourdel-Marchasson I Protein intake, weight loss, dietary intervention, and worsening of quality of life in older patients during chemotherapy for cancer. Support Care Cancer May 2020;():	Ineligible study design (post hoc analysis)
1574	Rafiei MH; Kelly KM; Borstad AL; Adeli H; Gauthier LV Predicting Improved Daily Use of the More Affected Arm Poststroke Following Constraint-Induced Movement Therapy. Phys Ther Dec 2019;99(12):1667-1678	Ineligible study design (retrospective analysis)
1575	McDonald R; Ding K; Chow E; Meyer RM; Nabid A; Chabot P; Coulombe G; Ahmed S; Kuk J; Dar R; Mahmud A; Fairchild A; Wilson CF; Wu JS; Dennis K; DeAngelis C; Wong RK; Zhu L; Brundage M Classification of painful bone metastases as mild, moderate, or severe using both EORTC QLQ-C15-PAL and EORTC QLQ-BM22. Support Care Cancer Dec 2016;24(12):4871-4878	Ineligible study design (secondary data analysis)

1576	Holtmaat K; van der Spek N; Witte BI; Breitbart W; Cuijpers P; Verdonck-de Leeuw IM Moderators of the effects of meaning-centered group psychotherapy in cancer survivors on personal meaning, psychological well-being, and distress. Support Care Cancer Nov 2017;25(11):3385-3393	Ineligible study design (sub-study of larger RCT)
1577	Götze H; Friedrich M; Taubenheim S; Dietz A; Lordick F; Mehnert A Depression and anxiety in long-term survivors 5 and 10 years after cancer diagnosis. Support Care Cancer Jan 2020;28(1):211-220	Ineligible study design (cross-sectional cohort study)
1578	Bergström L; Ward EC; Finizia C Voice rehabilitation after laryngeal cancer: Associated effects on psychological well-being. Support Care Cancer Sep 2017;25(9):2683-2690	Ineligible study design (sub-study of larger RCT)
1579	McLennon SM.; Hancock RD.; Redelman K.; Scarton LJ.; Riley E.; Sweeney B.; Habermann B.; Jessup NM.; Bakas T. Comparing treatment fidelity between study arms of a randomized controlled clinical trial for stroke family caregivers. Clinical rehabilitation May 2016;30(5):495-507	Ineligible study design (secondary data analysis)
1580	Puts MTE.; Sattar S.; Kulik M.; MacDonald ME.; McWatters K.; Lee K.; Brennenstuhl S.; Jang R.; Amir E.; Krzyzanowska MK.; Joshua AM.; Monette J.; Wan-Chow-Wah D.; Alibhai SMH. A randomized phase II trial of geriatric assessment and management for older cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 01 2018;26(1):109-117	Ineligible study design (feasibility and preliminary study)
1581	Powierza CS; Clark MD; Hughes JM; Carneiro KA; Mihalik JP Validation of a Self-Monitoring Tool for Use in Exercise Therapy. PM R Nov 2017;9(11):1077-1084	Ineligible study design (measurement study)
1582	Maidan I; Nieuwhof F; Bernad-Elazari H; Bloem BR; Giladi N; Hausdorff JM; Claassen JAHR; Mirelman A Evidence for Differential Effects of 2 Forms of Exercise on Prefrontal Plasticity During Walking in Parkinson's Disease. Neurorehabil Neural Repair Mar 2018;32(3):200-208	Ineligible study design (sub-study of larger RCT)
1583	Trolle N; Maribo T; Jensen LD; Christiansen DH Task-Specific Sensitivity in Physical Function Testing Predicts Outcome in Patients With Low Back Pain. J Orthop Sports Phys Ther Apr 2020;50(4):206-213	Ineligible study design (Prospective cohort study)
1584	O'Neil J; McEwen D; Del Bel MJ; Jo D; Thevenot O; MacKiddie OS; Brosseau L Assessment of the content reporting for therapeutic exercise interventions among existing randomized controlled trials on knee osteoarthritis. Clin Rehabil Jul 2018;32(7):980-984	Ineligible study design (not an RCT)

1585	Esquenazi A; Lee S; Watanabe T; Nastaskin A; McKee C; O'Neill J; Scheponik K; May J A Comparison of the ARMEO to Tabletop Assisted Therapy Exercises as Supplemental Interventions in Acute Stroke Rehabilitation: A Randomized Single Blinded Study. PM&R. doi: 10.1002/pmrj.12397	Ineligible study design (feasibility study)
1586	Marciniak C; Munin MC; Brashear A; Rubin BS; Patel AT; Slawek J; Hanschmann A; Hiersemenzel R; Elovic EP IncobotulinumtoxinA Treatment in Upper-Limb Poststroke Spasticity in the Open-Label Extension Period of PURE: Efficacy in Passive Function, Caregiver Burden, and Quality of Life. PM R May 2020;12(5):491-499	Ineligible study design (secondary/tertiary data analysis)
1587	Lahtinen A; Leppilahti J; Vähänikkilä H; Harmainen S; Koistinen P; Rissanen P; Jalovaara P Costs after hip fracture in independently living patients: a randomised comparison of three rehabilitation modalities. Clin Rehabil May 2017;31(5):672-685	Ineligible study design (cost-effectivenes study of larger RCT)
1588	Wu CY; Skidmore ER; Rodakowski J Relationship Consensus and Caregiver Burden in Adults with Cognitive Impairments 6 Months Following Stroke. PM R Jun 2019;11(6):597-603	Ineligible study design (Prospective observational study)
1589	Yang SS; Jee S; Hwang SL; Sohn MK Strengthening of Quadriceps by Neuromuscular Magnetic Stimulation in Healthy Subjects. PM R Aug 2017;9(8):767-773	Ineligible study design (case-control study)
1590	Nottelmann L; Jensen LH; Vejlgaard TB; Groenvold M A new model of early, integrated palliative care: palliative rehabilitation for newly diagnosed patients with non-resectable cancer. Support Care Cancer Sep 2019;27(9):3291-3300	Ineligible study design (not an RCT)
1591	Hillig T; Ma H; Dorsch S Goal-oriented instructions increase the intensity of practice in stroke rehabilitation compared with non-specific instructions: a within-participant, repeated measures experimental study. J Physiother Apr 2019;65(2):95-98	Ineligible study design (not a parallel group RCT)
1592	Lobo-Prat J; Dong Y; Moreso G; Lew C; Sharifrazi N; Radom-Aizik S; Reinkensmeyer DJ Development and Evaluation of MOVit: An Exercise-Enabling Interface for Driving a Powered Wheelchair. IEEE Trans Neural Syst Rehabil Eng Sep 2019;27(9):1770-1779	Ineligible study design (laboratory study)
1593	Sedaghatnezhad P; Shams M; Karimi N; Rahnama L Uphill treadmill walking plus physical therapy versus physical therapy alone in the management of individuals with knee osteoarthritis: a randomized clinical trial. Disabil Rehabil Dec 2019;():1-9	Ineligible study design (sub-study of larger RCT)

1594	Cheng FY; Yang YR; Wu YR; Lu CF; Cheng SJ; Wang RY Beta event-related desynchronization can be enhanced by different training programs and is correlated with improved postural control in individuals with Parkinson's disease. IEEE Trans Neural Syst Rehabil Eng Aug 2018;():	Ineligible study design (pilot study)
1595	Ponsford J; Lee NK; Wong D; McKay A; Haines K; Downing M; Alway Y; Furtado C; O'Donnell ML Factors Associated With Response to Adapted Cognitive Behavioral Therapy for Anxiety and Depression Following Traumatic Brain Injury. J Head Trauma Rehabil Mar/Apr 2020;35(2):117-126	Ineligible study design (sub-study of larger RCT)
1596	Rebbeck T The Role of Exercise and Patient Education in the Noninvasive Management of Whiplash. J Orthop Sports Phys Ther Jul 2017;47(7):481-491	Ineligible study design (Clinical commentary)
1597	Riahi N; Vakorin VA; Menon C Estimating Fugl-Meyer Upper Extremity Motor Score From Functional-Connectivity Measures. IEEE Trans Neural Syst Rehabil Eng Apr 2020;28(4):860-868	Ineligible study design (laboratory study)
1598	Tavares I; Thomas E; Cyteval C; Picot MC; Manna F; Macioce V; Laffont I; Thouvenin Y; Viala P; Lharbi A; Gélis A; Dupeyron A Intradiscal glucocorticoids injection in chronic low back pain with active discopathy: a randomized controlled study. Ann Phys Rehabil Med May 2020;():	Study could not be retained
1599	Mayo NE; Kaur N; Barbic SP; Fiore J; Barclay R; Finch L; Kuspinar A; Asano M; Figueiredo S; Aburub AS; Alzoubi F; Arafah A; Askari S; Bakhshi B; Bouchard V; Higgins J; Hum S; Inceer M; Letellier ME; Lourenco C; Mate K; Salbach NM; Moriello C How have research questions and methods used in clinical trials published in Clinical Rehabilitation changed over the last 30 years? Clin Rehabil Sep 2016;30(9):847-64	Ineligible study design (review paper)
1600	Terranova CO; Lawler SP; Spathonis K; Eakin EG; Reeves MM Breast cancer survivors' experience of making weight, dietary and physical activity changes during participation in a weight loss intervention. Support Care Cancer May 2017;25(5):1455-1463	Ineligible study design (sub-study of larger RCT)
1601	Peoples AR; Roscoe JA; Block RC; Heckler CE; Ryan JL; Mustian KM; Janelsins MC; Peppone LJ; Moore DF Jr; Coles C; Hoelzer KL; Morrow GR; Dozier AM Nausea and disturbed sleep as predictors of cancer-related fatigue in breast cancer patients: a multicenter NCORP study. Support Care Cancer Apr 2017;25(4):1271-1278	Ineligible study design (secondary data analysis)
1602	Denton A; Bunn L; Hough A; Bugmann G; Marsden J	Ineligible study design (not a

	Superficial warming and cooling of the leg affects walking speed and neuromuscular impairments in people with spastic paraparesis. Ann Phys Rehabil Med Dec 2016;59(5-6):326-332	parallel group RCT)
1603	Proud E; Morris ME; Bilney B; Miller KJ; Nijkrake MJ; Munneke M; McGinley JL Hand dexterity assessment in Parkinson's disease: construct validity of the 9-Hole peg test for the more affected hand. Disabil Rehabil Apr 2020;():1-5	Ineligible study design (observational study)
1604	Valero-Cuevas FJ; Klamroth-Marganska V; Winstein CJ; Riener R Robot-assisted and conventional therapies produce distinct rehabilitative trends in stroke survivors. J Neuroeng Rehabil Oct 2016;13(1):92	Ineligible study design (retrospective study)
1605	Turner J; Mackenzie L; Kelly B; Clarke D; Yates P; Aranda S Building psychosocial capacity through training of front-line health professionals to provide brief therapy: lessons learned from the PROMPT study. Support Care Cancer Apr 2018;26(4):1105-1112	Ineligible study design (qualitative study)
1606	Sattler V; Acket B; Raposo N; Albucher JF; Thalamas C; Loubinoux I; Chollet F; Simonetta-Moreau M Anodal tDCS Combined With Radial Nerve Stimulation Promotes Hand Motor Recovery in the Acute Phase After Ischemic Stroke. Neurorehabil Neural Repair Sep 2015;29(8):743-54	Ineligible study design (pilot study)
1607	McGowan EL; Fuller D; Cutumisu N; North S; Courneya KS The role of the built environment in a randomized controlled trial to increase physical activity among men with prostate cancer: the PROMOTE trial. Support Care Cancer Oct 2017;25(10):2993-2996	Ineligible study design (sub-study of larger RCT)
1608	Paap D; Schepers M; Dijkstra PU Reducing ceiling effects in the Working Alliance Inventory-Rehabilitation Dutch Version. Disabil Rehabil Jan 2019;():1-7	Ineligible study design (measurement study)
1609	Willer BS; Haider MN; Bezherano I; Wilber CG; Mannix R; Kozlowski K; Leddy JJ Comparison of Rest to Aerobic Exercise and Placebo-like Treatment of Acute Sport-Related Concussion in Male and Female Adolescents. Arch Phys Med Rehabil Dec 2019;100(12):2267-2275	Ineligible study design (not a randomized trial)
1610	McKenna L; Cornwall X; Williams S Differences in Scapular Orientation Between Standing and Sitting Postures at Rest and in 120° Scaption: A Cross-Sectional Study. PM R Jun 2017;9(6):579-587	Ineligible study design (Cross-sectional study)
1611	Forslund M; Ottenblad A; Ginman C; Johansson S; Nygren P; Johansson B Effects of a nutrition intervention on acute and late bowel symptoms and health-related quality	Ineligible study design (sub-study of larger RCT)

	of life up to 24 months post radiotherapy in patients with prostate cancer: a multicentre randomised controlled trial. Support Care Cancer Jul 2020;28(7):3331-3342	
1612	Massie CL; Du Y; Conroy SS; Krebs HI; Wittenberg GF; Bever CT; Whitall J A Clinically Relevant Method of Analyzing Continuous Change in Robotic Upper Extremity Chronic Stroke Rehabilitation. Neurorehabil Neural Repair Sep 2016;30(8):703-12	Ineligible study design (sub-study of larger RCT)
1613	Rabinowitz AR; Watanabe TK Pharmacotherapy for Treatment of Cognitive and Neuropsychiatric Symptoms After mTBI. J Head Trauma Rehabil Jan/Feb 2020;35(1):76-83	Ineligible study design (review paper)
1614	Osborn AJ; Mathias JL; Fairweather-Schmidt AK; Anstey KJ Traumatic Brain Injury and Depression in a Community-Based Sample: A Cohort Study Across the Adult Life Span. J Head Trauma Rehabil Jan/Feb 2018;33(1):62-72	Ineligible study design (Cohort study)
1615	Labonté J; Caru M; Lemay V; Alos N; Drouin S; Bertout L; Andelfinger G; Krajinovic M; Laverdière C; Sinnett D; Curnier D Developing and validating equations to predict [Formula: see text]O(2) peak from the 6MWT in Childhood ALL Survivors. Disabil Rehabil Feb 2020;():1-8	Ineligible study design (sub-study of larger RCT)
1616	Gluppe SB; Engh ME; Bo K Immediate Effect of Abdominal and Pelvic Floor Muscle Exercises on Interrecti Distance in Women With Diastasis Recti Abdominis Who Were Parous. Phys Ther Apr 2020;():	Ineligible study design (Cross-sectional study)
1617	Wu X; Guarino P; Lo AC; Peduzzi P; Wininger M Long-term Effectiveness of Intensive Therapy in Chronic Stroke. Neurorehabil Neural Repair Jul 2016;30(6):583-90	Ineligible study design (sub-study of larger RCT)
1618	Paolantonio L; Kim SY; Ramirez J; Roberts-Eversley N; Li Y; Melnic I; Wu M; Jutagir DR; Smith J; Oladele M; Gany F Food Purchasing Behavior of Food Insecure Cancer Patients Receiving Supplemental Food Vouchers. Support Care Cancer Dec 2019;():	Ineligible study design (sub-study of larger RCT)
1619	Renaud MI; Klees C; van Haastregt JC; Catsman-Berrevoets CE; van de Port IG; Lambregts SA; van Heugten CM Process evaluation of 'Brains Ahead!': an intervention for children and adolescents with mild traumatic brain injury within a randomized controlled trial. Clin Rehabil May 2020;34(5):688-697	Ineligible study design (sub-study of larger RCT)
1620	Moss JL; Murphy J; Filiaci VL; Wenzel LB; Minasian L; Temkin SM	Ineligible study design

	Disparities in health-related quality of life in women undergoing treatment for advanced ovarian cancer: the role of individual-level and contextual social determinants. Support Care Cancer Feb 2019;27(2):531-538	(secondary data analysis)
1621	Fauerbach JA; Gehrke AK; Mason ST; Gould NF; Milner SM; Caffrey J Cognitive Behavioral Treatment for Acute Posttrauma Distress: A Randomized, Controlled Proof-of-Concept Study Among Hospitalized Adults With Burns. Arch Phys Med Rehabil Jan 2020;101(1S):S16-S25	Ineligible study design (proof-of-concept RCT)
1622	Trabjerg TB; Jensen LH; Søndergaard J; Sisler JJ; Hansen DG Cross-sectoral video consultations in cancer care: perspectives of cancer patients, oncologists and general practitioners. Support Care Cancer Apr 2020;():	Ineligible study design (sub-study of larger RCT)
1623	Karlsson Å; Lindelöf N; Olofsson B; Berggren M; Gustafson Y; Nordström P; Stenvall M Effects of Geriatric Interdisciplinary Home Rehabilitation on Independence in Activities of Daily Living in Older People With Hip Fracture: A Randomized Controlled Trial. Arch Phys Med Rehabil Apr 2020;101(4):571-578	Ineligible study design (planned analysis)
1624	King LA; Mancini M; Smulders K; Harker G; Lapidus JA; Ramsey K; Carlson-Kuhta P; Fling BW; Nutt JG; Peterson DS; Horak FB Cognitively Challenging Agility Boot Camp Program for Freezing of Gait in Parkinson Disease. Neurorehabil Neural Repair May 2020;34(5):417-427	Ineligible study design (proof-of-concept /feasibility study)
1625	Cavalcante Neto JL; Steenbergen B; Zamunér AR; Tudella E Wii training versus non-Wii task-specific training on motor learning in children with developmental coordination disorder: A randomized controlled trial. Ann Phys Rehabil Med May 2020;():	Ineligible study design (sub-study of larger RCT)
1626	Clemons M; Stober C; Kehoe A; Bedard D; MacDonald F; Brunet MC; Saunders D; Vandermeer L; Mazzarello S; Awan A; Basulaiman B; Robinson A; Mallick R; Hutton B; Fergusson D A randomized trial comparing vascular access strategies for patients receiving chemotherapy with trastuzumab for early-stage breast cancer. Support Care Cancer Jan 2020;():	Ineligible study design (feasibility study)
1627	Flink M; Bertilsson AS; Johansson U; Guidetti S; Tham K; von Koch L Training in client-centeredness enhances occupational therapist documentation on goal setting and client participation in goal setting in the medical records of people with stroke. Clin Rehabil Dec 2016;30(12):1200-1210	Ineligible study design (sub-study of larger RCTs)
1628	Ding L; Wang X; Guo X; Chen S; Wang H; Jiang N; Jia J Camera-Based Mirror Visual Feedback: Potential to Improve Motor Preparation in Stroke Patients. IEEE Trans Neural Syst Rehabil Eng Sep 2018;26(9):1897-1905	Ineligible study design (feasibility study)

1629	Perry J; Green A; Singh S; Watson P A randomised, independent groups study investigating the sympathetic nervous system responses to two manual therapy treatments in patients with LBP. Man Ther Dec 2015;20(6):861-7	Ineligible study design (sub-study of larger cohort study)
1630	Christiansen CL; Miller MJ; Kline PW; Fields TT; Sullivan WJ; Blatchford PJ; Stevens-Lapsley JE Biobehavioral Intervention Targeting Physical Activity Behavior Change for Older Veterans after Nontraumatic Amputation: A Randomized Controlled Trial. PM R Apr 2020;():	Ineligible study design (feasibility trial)
1631	Kootker JA.; Rasquin SM.; Lem FC.; van Heugten CM.; Fasotti L.; Geurts AC. Augmented Cognitive Behavioral Therapy for Poststroke Depressive Symptoms: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 04 2017;98(4):687-694	Ineligible study design (sub-study of larger RCTs)
1632	Fusco F.; Campbell H.; Barker K. Rehabilitation after resurfacing hip arthroplasty: cost-utility analysis alongside a randomized controlled trial. Clinical rehabilitation Jun 2019;33(6):1003-1014	Ineligible study design (cost-utility analysis)

Appendix D: List of Included Studies

No.	Author-year	Study	Journal	Registration status
1	Avendaño-Coy 2017	Avendaño-Coy J.; Gómez-Soriano J.; Goicoechea-García C.; Basco-López JA.; Taylor J. Effect of Unmodulated 5-kHz Alternating Currents Versus Transcutaneous Electrical Nerve Stimulation on Mechanical and Thermal Pain, Tactile Threshold, and Peripheral Nerve Conduction: A Double-Blind, Placebo-Controlled Crossover Trial. Archives of physical medicine and rehabilitation 05 2017;98(5):888-895	Archives of Physical Medicine and Rehabilitation	Prospective
2	Brouwer 2018	Brouwer B.; Bryant D.; Garland SJ. Effectiveness of Client-Centered "Tune-Ups" on Community Reintegration, Mobility, and Quality of Life After Stroke: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 07 2018;99(7):1325-1332	Archives of Physical Medicine and Rehabilitation	Prospective
3	Soh 2020	Soh SH; Joo MC; Yun NR; Kim MS Randomized Controlled Trial of the Lateral Push-Off Skater Exercise for High-Intensity Interval Training vs Conventional Treadmill Training. Arch Phys Med Rehabil Feb 2020;101(2):187-195	Archives of Physical Medicine and Rehabilitation	Prospective
4	Yoshida 2017	Yoshida Y.; Ikuno K.; Shomoto K. Comparison of the Effect of Sensory-Level and Conventional Motor-Level Neuromuscular Electrical Stimulations on Quadriceps Strength After Total Knee Arthroplasty: A Prospective Randomized Single-Blind Trial. Archives of physical medicine and rehabilitation 12 2017;98(12):2364-2370	Archives of Physical Medicine and Rehabilitation	Prospective
5	Osborne 2017	Osborne LA.; Whittall CM.; Emanuel R.; Emery S.; Reed P. Randomized Controlled Trial of the Effect of a Brief Telephone Support Intervention on Initial Attendance at Physiotherapy Group Sessions for Pelvic Floor Problems. Archives of physical medicine and rehabilitation 11 2017;98(11):2247-2252	Archives of Physical Medicine and Rehabilitation	Prospective

6	Cambron 2017	Cambron JA.; Dexheimer JM.; Duarte M.; Freels S. Shoe Orthotics for the Treatment of Chronic Low Back Pain: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 09 2017;98(9):1752-1762	Archives of Physical Medicine and Rehabilitation	Prospective
7	Chan 2018	Chan C.; Iverson GL.; Purtzki J.; Wong K.; Kwan V.; Gagnon I.; Silverberg ND. Safety of Active Rehabilitation for Persistent Symptoms After Pediatric Sport-Related Concussion: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 02 2018;99(2):242-249	Archives of Physical Medicine and Rehabilitation	Prospective
8	Cho 2019	Cho KH.; Song WK. Robot-Assisted Reach Training With an Active Assistant Protocol for Long-Term Upper Extremity Impairment Poststroke: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 02 2019;100(2):213-219	Archives of Physical Medicine and Rehabilitation	Prospective
9	Collado-Mateo 2017	Collado-Mateo D.; Dominguez-Muñoz FJ.; Adsuar JC.; Garcia-Gordillo MA.; Gusi N. Effects of Exergames on Quality of Life, Pain, and Disease Effect in Women With Fibromyalgia: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 09 2017;98(9):1725-1731	Archives of Physical Medicine and Rehabilitation	Prospective
10	DeGroef 2018	De Groef A.; Devoogdt N.; Van Kampen M.; Nevelsteen I.; Smeets A.; Neven P.; Geraerts I.; Dams L.; Van der Gucht E.; Debeer P. Effectiveness of Botulinum Toxin A for Persistent Upper Limb Pain After Breast Cancer Treatment: A Double-Blinded Randomized Controlled Trial. Archives of physical medicine and rehabilitation 07 2018;99(7):1342-1351	Archives of Physical Medicine and Rehabilitation	Prospective
11	Ehde 2015	Ehde DM.; Elzea JL.; Verrall AM.; Gibbons LE.; Smith AE.; Amtmann D. Efficacy of a Telephone-Delivered Self-Management Intervention for Persons With Multiple Sclerosis: A Randomized Controlled Trial With a One-Year Follow-Up.	Archives of Physical Medicine and Rehabilitation	Prospective

		Archives of physical medicine and rehabilitation Nov 2015;96(11):1945-58.e2		
12	Foroughi 2019	Foroughi F.; Sobhani S.; Yoosefinejad AK.; Motealleh A. Added Value of Isolated Core Postural Control Training on Knee Pain and Function in Women With Patellofemoral Pain Syndrome: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 02 2019;100(2):220-229	Archives of Physical Medicine and Rehabilitation	Prospective
13	Franco 2017	Franco KM.; Franco YD.; Oliveira NB.; Miyamoto GC.; Santos MO.; Liebano RE.; Cabral CN. Is Interferential Current Before Pilates Exercises More Effective Than Placebo in Patients With Chronic Nonspecific Low Back Pain?: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 02 2017;98(2):320-328	Archives of Physical Medicine and Rehabilitation	Prospective
14	Friedly 2017	Friedly JL.; Comstock BA.; Turner JA.; Heagerty PJ.; Deyo RA.; Bauer Z.; Avins AL.; Nedeljkovic SS.; Nerenz DR.; Shi XR.; Annaswamy T.; Standaert CJ.; Smuck M.; Kennedy DJ.; Akuthota V.; Sibell D.; Wasan AD.; Diehn F.; Suri P.; Rundell SD.; Kessler L.; Chen AS.; Jarvik JG. Long-Term Effects of Repeated Injections of Local Anesthetic With or Without Corticosteroid for Lumbar Spinal Stenosis: A Randomized Trial. Archives of physical medicine and rehabilitation 08 2017;98(8):1499-1507.e2	Archives of Physical Medicine and Rehabilitation	Prospective
15	Gama 2017	Gama GL.; Celestino ML.; Barela JA.; Forrester L.; Whitall J.; Barela AM. Effects of Gait Training With Body Weight Support on a Treadmill Versus Overground in Individuals With Stroke. Archives of physical medicine and rehabilitation 04 2017;98(4):738-745	Archives of Physical Medicine and Rehabilitation	Prospective
16	Hammerich 2019	Hammerich A.; Whitman J.; Mintken P.; Denninger T.; Akuthota V.; Sawyer EE.; Hofmann M.; Childs JD.; Cleland J. Effectiveness of Physical Therapy Combined With Epidural Steroid Injection for Individuals With	Archives of Physical Medicine and Rehabilitation	Prospective

		Lumbar Spinal Stenosis: A Randomized Parallel-Group Trial. Archives of physical medicine and rehabilitation 05 2019;100(5):797-810		
17	Harrison-Felix 2018	Harrison-Felix C.; Newman JK.; Hawley L.; Morey C.; Ketchum JM.; Walker WC.; Bell KR.; Millis SR.; Braden C.; Malec J.; Hammond FM.; Eagye CB.; Howe L. Social Competence Treatment After Traumatic Brain Injury: A Multicenter, Randomized Controlled Trial of Interactive Group Treatment Versus Noninteractive Treatment. Archives of physical medicine and rehabilitation 11 2018;99(11):2131-2142	Archives of Physical Medicine and Rehabilitation	Prospective
18	Hung 2019	Hung CS.; Lin KC.; Chang WY.; Huang WC.; Chang YJ.; Chen CL.; Grace Yao K.; Lee YY. Unilateral vs Bilateral Hybrid Approaches for Upper Limb Rehabilitation in Chronic Stroke: A Randomized Controlled Trial. Archives of physical medicine and rehabilitation 12 2019;100(12):2225-2232	Archives of Physical Medicine and Rehabilitation	Prospective
19	Ingwersen 2019	Ingwersen KG.; Vobbe JW.; Pedersen LL.; Sørensen L.; Wedderkopp N. Effect of Psychomotricity in Combination With 3 Months of Active Shoulder Exercises in Individuals With Chronic Shoulder Pain: Primary Results From an Investigator-Blinded, Randomized, Controlled Trial. Archives of physical medicine and rehabilitation 11 2019;100(11):2136-2143	Archives of Physical Medicine and Rehabilitation	Prospective
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21	Kleiner 2018	Kleiner AFR.; Souza Pagnussat A.; Pinto C.; Redivo Marchese R.; Salazar AP.; Galli M. Automated Mechanical Peripheral Stimulation Effects	Archives of Physical Medicine and Rehabilitation	Prospective

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31	Parreiras de Menezes 2019	Parreiras de Menezes KK.; Nascimento LR.; Ada L.; Avelino PR.; Polese JC.; Mota Alvarenga MT.; Barbosa MH.; Teixeira-Salmela LF. High-Intensity Respiratory Muscle Training Improves Strength and Dyspnea Poststroke: A Double-Blind Randomized Trial. Archives of physical medicine and rehabilitation 02	Archives of Physical Medicine and Rehabilitation	Prospective

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33	Tefertiller 2019	Tefertiller C.; Hays K.; Natale A.; O'Dell D.; Ketchum J.; Sevigny M.; Eagye CB.; Philippus A.; Harrison-Felix C. Results From a Randomized Controlled Trial to Address Balance Deficits After Traumatic Brain Injury. Archives of physical medicine and rehabilitation 08 2019;100(8):1409-1416	Archives of Physical Medicine and Rehabilitation	Prospective
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35	Vainshelboim 2016	Vainshelboim B.; Fox BD.; Kramer MR.; Izhakian S.; Gershman E.; Oliveira J. Short-Term Improvement in Physical Activity and Body Composition After Supervised Exercise Training Program in Idiopathic Pulmonary Fibrosis. Archives of physical medicine and rehabilitation 05 2016;97(5):788-97	Archives of Physical Medicine and Rehabilitation	Prospective
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51	MacGillivray 2020	MacGillivray, M. K., Eng, J. J., Dean, E., & Sawatzky, B. J. (2020). Effects of Motor Skill-Based Training on Wheelchair Propulsion Biomechanics in Older Adults: A Randomized Controlled Trial. In Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2019.07.017	Archives of Physical Medicine and Rehabilitation	Prospective
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58	Zarei 2020	Zarei, H., Bervis, S., Piroozi, S., & Motealleh, A. (2020). Added Value of Gluteus Medius and Quadratus Lumborum Dry Needling in Improving Knee Pain and Function in Female Athletes With Patellofemoral Pain Syndrome: A Randomized Clinical Trial. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2019.07.009	Archives of Physical Medicine and Rehabilitation	Prospective
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96	Manca 2017	Manca A.; Cabboi MP.; Dragone D.; Ginatempo F.; Ortu E.; De Natale ER.; Mercante B.; Mureddu G.; Bua G.; Deriu F. Resistance Training for Muscle Weakness in Multiple Sclerosis: Direct Versus Contralateral Approach in Individuals With Ankle Dorsiflexors' Disparity in Strength. Archives of physical medicine and rehabilitation 07 2017;98(7):1348-1356.e1	Archives of Physical Medicine and Rehabilitation	Retrospective
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131	Wu 2017	Wu YT; Chang CY; Chou YC; Yeh CC; Li TY; Chu HY; Chen LC Ultrasound-Guided Pulsed Radiofrequency Stimulation of Posterior Tibial Nerve: A Potential	Archives of Physical Medicine and Rehabilitation	Retrospective

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134	Bonnevie 2018	Bonnevie T.; Gravier FE.; Debeaumont D.; Viacroze C.; Muir JF.; Cuvelier A.; Netchitaïlo M.; Roy AL.; Quieffin J.; Marques MH.; Médrinal C.; Dupuis J.; Tardif C. Home-based Neuromuscular Electrical Stimulation as an Add-on to Pulmonary Rehabilitation Does Not Provide Further Benefits in Patients With Chronic Obstructive Pulmonary Disease: A Multicenter Randomized Trial. Archives of physical medicine and rehabilitation 08 2018;99(8):1462-1470	Archives of Physical Medicine and Rehabilitation	Retrospective
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142	Chang 2015	Chang YJ.; Chou CC.; Huang WT.; Lu CS.; Wong AM.; Hsu MJ. Cycling regimen induces spinal circuitry plasticity and improves leg muscle coordination in individuals with	Archives of Physical Medicine and Rehabilitation	No registration

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144	Danks 2016	Danks KA.; Pohlig R.; Reisman DS. Combining Fast-Walking Training and a Step Activity Monitoring Program to Improve Daily Walking Activity After Stroke: A Preliminary Study. Archives of physical medicine and rehabilitation 09 2016;97(9 Suppl):S185-93	Archives of Physical Medicine and Rehabilitation	No registration
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147	Hsieh 2019	Hsieh HC. Use of a Gaming Platform for Balance Training After a Stroke: A Randomized Trial. Archives of physical medicine and rehabilitation 04 2019;100(4):591-597	Archives of Physical Medicine and Rehabilitation	No registration
148	Jaywant 2016	Jaywant A.; Ellis TD.; Roy S.; Lin CC.; Neargarder S.; Cronin-Golomb A. Randomized Controlled Trial of a Home-Based Action Observation Intervention to Improve Walking in Parkinson Disease. Archives of physical medicine and rehabilitation 05 2016;97(5):665-73	Archives of Physical Medicine and Rehabilitation	No registration

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150	Kim 2017	Kim GJ.; Hinojosa J.; Rao AK.; Batavia M.; O'Dell MW. Randomized Trial on the Effects of Attentional Focus on Motor Training of the Upper Extremity Using Robotics With Individuals After Chronic Stroke. Archives of physical medicine and rehabilitation 10 2017;98(10):1924-1931	Archives of Physical Medicine and Rehabilitation	No registration
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152	Ni 2016	Ni M.; Signorile JF.; Mooney K.; Balachandran A.; Potiaumpai M.; Luca C.; Moore JG.; Kuenze CM.; Eltoukhy M.; Perry AC. Comparative Effect of Power Training and High-Speed Yoga on Motor Function in Older Patients With Parkinson Disease. Archives of physical medicine and rehabilitation Mar 2016;97(3):345-354.e15	Archives of Physical Medicine and Rehabilitation	No registration
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160	Tollár 2018	Tollár J.; Nagy F.; Kovács N.; Hortobágyi T. A High-Intensity Multicomponent Agility Intervention	Archives of Physical Medicine and	No registration

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165	Yin 2017	Yin M.; Chen N.; Huang Q.; Marla AS.; Ma J.; Ye J.; Mo W. New and Accurate Predictive Model for the Efficacy of Extracorporeal Shock Wave Therapy in Managing Patients With Chronic Plantar Fasciitis. Archives of physical medicine and rehabilitation 12 2017;98(12):2371-2377	Archives of Physical Medicine and Rehabilitation	No registration
166	Zhang 2016	Zhang M.; Tao T.; Zhang ZB.; Zhu X.; Fan WG.; Pu	Archives of Physical	No

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171	Shin 2016	Shin JH.; Kim MY.; Lee JY.; Jeon YJ.; Kim S.; Lee S.; Seo B.; Choi Y. Effects of virtual reality-based rehabilitation on distal upper extremity function and health-related quality of life: a single-blinded, randomized controlled trial. Journal of neuroengineering and rehabilitation Feb 2016;13():17	Journal of Neuro-Engineering and Rehabilitation	Prospective
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176	Calabrò 2019	Calabrò RS.; Naro A.; Filoni S.; Pullia M.; Billeri L.; Tomasello P.; Portaro S.; Di Lorenzo G.; Tomaino C.; Bramanti P. Walking to your right music: a randomized controlled trial on the novel use of treadmill plus music in Parkinson's disease. Journal of neuroengineering and rehabilitation 06 2019;16(1):68	Journal of Neuro-Engineering and Rehabilitation	Retrospective
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179	Lee 2015	Lee YY.; Lin KC.; Cheng HJ.; Wu CY.; Hsieh YW.; Chen CK. Effects of combining robot-assisted therapy with neuromuscular electrical stimulation on motor impairment, motor and daily function, and quality of life in patients with chronic stroke: a double-blinded randomized controlled trial. Journal of neuroengineering and rehabilitation Oct 2015;12():96	Journal of Neuro-Engineering and Rehabilitation	Retrospective
180	Matheve 2018	Matheve T.; Brumagne S.; Demoulin C.; Timmermans A. Sensor-based postural feedback is more effective than conventional feedback to improve lumbopelvic movement control in patients with chronic low back pain: a randomised controlled trial. Journal of neuroengineering and rehabilitation 09 2018;15(1):85	Journal of Neuro-Engineering and Rehabilitation	Retrospective
181	Morone 2016	Morone G.; Annicchiarico R.; Iosa M.; Federici A.; Paolucci S.; Cortés U.; Caltagirone C. Overground walking training with the i-Walker, a robotic servo-assistive device, enhances balance in patients with subacute stroke: a randomized controlled trial. Journal of neuroengineering and rehabilitation May 2016;13(1):47	Journal of Neuro-Engineering and Rehabilitation	Retrospective
182	Qian 2019	Qian Q.; Nam C.; Guo Z.; Huang Y.; Hu X.; Ng SC.; Zheng Y.; Poon W. Distal versus proximal - an investigation on different supportive strategies by robots for upper limb rehabilitation after stroke: a randomized controlled trial. Journal of neuroengineering and rehabilitation 06 2019;16(1):64	Journal of Neuro-Engineering and Rehabilitation	Retrospective
183	Shih 2016	Shih MC.; Wang RY.; Cheng SJ.; Yang YR. Effects of a balance-based exergaming intervention	Journal of Neuro-Engineering and	Retrospective

		using the Kinect sensor on posture stability in individuals with Parkinson's disease: a single-blinded randomized controlled trial. Journal of neuroengineering and rehabilitation Aug 2016;13(1):78	Rehabilitation	
184	Shimada 2017	Shimada H.; Ishii K.; Makizako H.; Ishiwata K.; Oda K.; Suzukawa M. Effects of exercise on brain activity during walking in older adults: a randomized controlled trial. Journal of neuroengineering and rehabilitation 05 2017;14(1):50	Journal of Neuro-Engineering and Rehabilitation	Retrospective
185	Yeung 2018	Yeung LF.; Ockenfeld C.; Pang MK.; Wai HW.; Soo OY.; Li SW.; Tong KY. Randomized controlled trial of robot-assisted gait training with dorsiflexion assistance on chronic stroke patients wearing ankle-foot-orthosis. Journal of neuroengineering and rehabilitation 06 2018;15(1):51	Journal of Neuro-Engineering and Rehabilitation	Retrospective
186	Kim 2019	Kim HY; Shin JH; Yang SP; Shin MA; Lee SH Robot-assisted gait training for balance and lower extremity function in patients with infratentorial stroke: a single-blinded randomized controlled trial. J Neuroeng Rehabil Jul 2019;16(1):99	Journal of Neuro-Engineering and Rehabilitation	Retrospective
187	Matheve 2020	Matheve T; Bogaerts K; Timmermans A Virtual reality distraction induces hypoalgesia in patients with chronic low back pain: a randomized controlled trial. J Neuroeng Rehabil Apr 2020;17(1):55	Journal of Neuro-Engineering and Rehabilitation	Retrospective
188	Warlop 2017	Warlop T.; Detrembleur C.; Buxes Lopez M.; Stoquart G.; Lejeune T.; Jeanjean A. Does Nordic Walking restore the temporal organization of gait variability in Parkinson's disease? Journal of neuroengineering and rehabilitation Feb 2017;14(1):17	Journal of Neuro-Engineering and Rehabilitation	Retrospective
189	Leal 2020	Leal AF; da Silva TD; Lopes PB; Bahadori S; de Araújo LV; da Costa MVB; de Moraes ÍAP; Marques RH; Crocetta TB; de Abreu LC; Monteiro CBM The use of a task through virtual reality in cerebral palsy using two different interaction devices (concrete and abstract) - a cross-sectional randomized study.	Journal of Neuro-Engineering and Rehabilitation	Retrospective

		J Neuroeng Rehabil Apr 2020;17(1):59		
190	Just 2020	Just F; Özen Ö; Tortora S; Klamroth-Marganska V; Riener R; Rauter G Human arm weight compensation in rehabilitation robotics: efficacy of three distinct methods. J Neuroeng Rehabil Feb 2020;17(1):13	Journal of Neuro-Engineering and Rehabilitation	Retrospective
191	Richards 2019	Richards JT; Selgrade BP; Qiao M; Plummer P; Wikstrom EA; Franz JR Time-dependent tuning of balance control and aftereffects following optical flow perturbation training in older adults. J Neuroeng Rehabil Jul 2019;16(1):81	Journal of Neuro-Engineering and Rehabilitation	Retrospective
192	Bigras 2019	Bigras C.; Kairy D.; Archambault PS. Augmented feedback for powered wheelchair training in a virtual environment. Journal of neuroengineering and rehabilitation 01 2019;16(1):12	Journal of Neuro-Engineering and Rehabilitation	No registration
193	Fransson 2020	Fransson PA; Nilsson MH; Niehorster DC; Nyström M; Rehncrona S; Tjernström F; Magnusson M; Johansson R; Patel M Exploring the effects of deep brain stimulation and vision on tremor in Parkinson's disease - benefits from objective methods. J Neuroeng Rehabil Apr 2020;17(1):56	Journal of Neuro-Engineering and Rehabilitation	No registration
194	Cunha 2017	Cunha RG.; Da-Silva PJ.; Dos Santos Couto Paz CC.; da Silva Ferreira AC.; Tierra-Criollo CJ. Influence of functional task-oriented mental practice on the gait of transtibial amputees: a randomized, clinical trial. Journal of neuroengineering and rehabilitation 04 2017;14(1):28	Journal of Neuro-Engineering and Rehabilitation	No registration
195	Faria 2016	Faria AL.; Andrade A.; Soares L.; I Badia SB. Benefits of virtual reality based cognitive rehabilitation through simulated activities of daily living: a randomized controlled trial with stroke patients. Journal of neuroengineering and rehabilitation 11 2016;13(1):96	Journal of Neuro-Engineering and Rehabilitation	No registration
196	Inukai 2018	Inukai Y.; Masaki M.; Otsuru N.; Saito K.; Miyaguchi	Journal of Neuro-	No

		S.; Kojima S.; Onishi H. Effect of noisy galvanic vestibular stimulation in community-dwelling elderly people: a randomised controlled trial. Journal of neuroengineering and rehabilitation 07 2018;15(1):63	Engineering and Rehabilitation	registration
197	McGibbon 2018	McGibbon CA.; Sexton A.; Jayaraman A.; Deems-Dluhy S.; Gryfe P.; Novak A.; Dutta T.; Fabara E.; Adans-Dester C.; Bonato P. Evaluation of the Keeogo exoskeleton for assisting ambulatory activities in people with multiple sclerosis: an open-label, randomized, cross-over trial. Journal of neuroengineering and rehabilitation 12 2018;15(1):117	Journal of Neuro-Engineering and Rehabilitation	No registration
198	Pedullà 2016	Pedullà L.; Brichetto G.; Tacchino A.; Vassallo C.; Zaratin P.; Battaglia MA.; Bonzano L.; Bove M. Adaptive vs. non-adaptive cognitive training by means of a personalized App: a randomized trial in people with multiple sclerosis. Journal of neuroengineering and rehabilitation Oct 2016;13(1):88	Journal of Neuro-Engineering and Rehabilitation	No registration
199	Resnik 2018	Resnik L.; Huang HH.; Winslow A.; Crouch DL.; Zhang F.; Wolk N. Evaluation of EMG pattern recognition for upper limb prosthesis control: a case study in comparison with direct myoelectric control. Journal of neuroengineering and rehabilitation 03 2018;15(1):23	Journal of Neuro-Engineering and Rehabilitation	No registration
200	de Klerk 2018	de Klerk R.; Lutjeboer T.; Vegter RJK.; van der Woude LHV. Practice-based skill acquisition of pushrim-activated power-assisted wheelchair propulsion versus regular handrim propulsion in novices. Journal of neuroengineering and rehabilitation 06 2018;15(1):56	Journal of Neuro-Engineering and Rehabilitation	No registration
201	Berger 2019	Berger A; Horst F; Steinberg F; Thomas F; Müller-Eising C; Schöllhorn WI; Doppelmayr M Increased gait variability during robot-assisted walking is accompanied by increased sensorimotor brain activity in healthy people. J Neuroeng Rehabil Dec 2019;16(1):161	Journal of Neuro-Engineering and Rehabilitation	No registration

202	Fernandes 2019	Fernandes SR; Pereira M; Salvador R; Miranda PC; de Carvalho M Cervical trans-spinal direct current stimulation: a modelling-experimental approach. J Neuroeng Rehabil Oct 2019;16(1):123	Journal of Neuro-Engineering and Rehabilitation	No registration
203	Juliano 2020	Juliano JM; Liew SL Transfer of motor skill between virtual reality viewed using a head-mounted display and conventional screen environments. J Neuroeng Rehabil Apr 2020;17(1):48	Journal of Neuro-Engineering and Rehabilitation	No registration
204	Pereira 2019	Pereira F; Bermúdez I Badia S; Ornelas R; S Cameirão M Impact of game mode in multi-user serious games for upper limb rehabilitation: a within-person randomized trial on engagement and social involvement. J Neuroeng Rehabil Aug 2019;16(1):109	Journal of Neuro-Engineering and Rehabilitation	No registration
205	De Keersmaecker 2020	De Keersmaecker E; Lefeber N; Serrien B; Jansen B; Rodriguez-Guerrero C; Niazi N; Kerckhofs E; Swinnen E The Effect of Optic Flow Speed on Active Participation During Robot-Assisted Treadmill Walking in Healthy Adults. IEEE Trans Neural Syst Rehabil Eng Jan 2020;28(1):221-227	IEEE Transactions on Neural Systems and Rehabilitation Engineering	Prospective
206	Bao 2019	Bao SC.; Wong WW.; Leung TWH.; Tong KY. Cortico-Muscular Coherence Modulated by High-Definition Transcranial Direct Current Stimulation in People With Chronic Stroke. IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in Medicine and Biology Society 02 2019;27(2):304-313	IEEE Transactions on Neural Systems and Rehabilitation Engineering	Retrospective
207	Kim 2015	Kim SY.; Yang L.; Park IJ.; Kim EJ.; JoshuaPark MS.; You SH.; Kim YH.; Ko HY.; Shin YI. Effects of Innovative WALKBOT Robotic-Assisted Locomotor Training on Balance and Gait Recovery in Hemiparetic Stroke: A Prospective, Randomized, Experimenter Blinded Case Control Study With a Four-Week Follow-Up. IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in	IEEE Transactions on Neural Systems and Rehabilitation Engineering	Retrospective

		Medicine and Biology Society Jul 2015;23(4):636-42		
208	Wei 2019	Wei WXJ.; Fong KNK.; Chung RCK.; Cheung HKY.; Chow ESL. "Remind-to-Move" for Promoting Upper Extremity Recovery Using Wearable Devices in Subacute Stroke: A Multi-Center Randomized Controlled Study. IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in Medicine and Biology Society 01 2019;27(1):51-59	IEEE Transactions on Neural Systems and Rehabilitation Engineering	Retrospective
209	Mazzoleni 2019	Mazzoleni S; Tran VD; Dario P; Posteraro F Effects of Transcranial Direct Current Stimulation (tDCS) Combined With Wrist Robot-Assisted Rehabilitation on Motor Recovery in Subacute Stroke Patients: A Randomized Controlled Trial. IEEE Trans Neural Syst Rehabil Eng Jul 2019;27(7):1458-1466	IEEE Transactions on Neural Systems and Rehabilitation Engineering	Retrospective
210	Wang 2019	Wang H; Xu G; Wang X; Sun C; Zhu B; Fan M; Jia J; Guo X; Sun L The Reorganization of Resting-State Brain Networks Associated With Motor Imagery Training in Chronic Stroke Patients. IEEE Trans Neural Syst Rehabil Eng Oct 2019;27(10):2237-2245	IEEE Transactions on Neural Systems and Rehabilitation Engineering	Retrospective
211	Mohammadi-Abdar 2016	Mohammadi-Abdar H.; Ridgel AL.; Discenzo FM.; Phillips RS.; Walter BL.; Loparo KA. Test and Validation of a Smart Exercise Bike for Motor Rehabilitation in Individuals With Parkinson's Disease. IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in Medicine and Biology Society 11 2016;24(11):1254-1264	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
212	Yeh 2018	Yeh SC.; Li YY.; Zhou C.; Chiu PH.; Chen JW. Effects of Virtual Reality and Augmented Reality on Induced Anxiety. IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in Medicine and Biology Society 07 2018;26(7):1345-1352	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
213	Heitkamp 2019	Heitkamp LN; Stimpson KH; Dean JC	IEEE Transactions on	No

		Application of a Novel Force-Field to Manipulate the Relationship Between Pelvis Motion and Step Width in Human Walking. IEEE Trans Neural Syst Rehabil Eng Oct 2019;27(10):2051-2058	Neural Systems and Rehabilitation Engineering	registration
214	Huang 2019	Huang TY; Pan LH; Yang WW; Huang LY; Sun PC; Chen CS Biomechanical Evaluation of Three-Dimensional Printed Dynamic Hand Device for Patients With Chronic Stroke. IEEE Trans Neural Syst Rehabil Eng Jun 2019;27(6):1246-1252	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
215	Van Dijk 2016	Van Dijk L; van der Sluis CK; van Dijk HW; Bongers RM Task-Oriented Gaming for Transfer to Prosthesis Use. IEEE Trans Neural Syst Rehabil Eng Dec 2016;24(12):1384-1394	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
216	Yao 2017	Yao L; Sheng X; Zhang D; Jiang N; Mrachacz-Kersting N; Zhu X; Farina D A Stimulus-Independent Hybrid BCI Based on Motor Imagery and Somatosensory Attentional Orientation. IEEE Trans Neural Syst Rehabil Eng Sep 2017;25(9):1674-1682	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
217	Yoo 2019	Yoo D; Kim DH; Seo KH; Lee BC The Effects of Technology-Assisted Ankle Rehabilitation on Balance Control in Stroke Survivors. IEEE Trans Neural Syst Rehabil Eng Sep 2019;27(9):1817-1823	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
218	Yoo 2018	Yoo D.; Son Y.; Kim DH.; Seo KH.; Lee BC. Technology-Assisted Ankle Rehabilitation Improves Balance and Gait Performance in Stroke Survivors: A Randomized Controlled Study With 1-Month Follow-Up. IEEE transactions on neural systems and rehabilitation engineering : a publication of the IEEE Engineering in Medicine and Biology Society 12 2018;26(12):2315-2323	IEEE Transactions on Neural Systems and Rehabilitation Engineering	No registration
219	Almuklass 2018	Almuklass AM.; Davis L.; Hamilton LD.; Hebert JR.; Alvarez E.; Enoka RM. Pulse Width Does Not Influence the Gains Achieved	Neurorehabilitation and Neural Repair	Prospective

		With Neuromuscular Electrical Stimulation in People With Multiple Sclerosis: Double-Blind, Randomized Trial. Neurorehabilitation and neural repair 01 2018;32(1):84-93		
220	Barker 2017	Barker RN.; Hayward KS.; Carson RG.; Lloyd D.; Brauer SG. SMART Arm Training With Outcome-Triggered Electrical Stimulation in Subacute Stroke Survivors With Severe Arm Disability: A Randomized Controlled Trial. Neurorehabilitation and neural repair Dec 2017;31(12):1005-1016	Neurorehabilitation and Neural Repair	Prospective
221	Beck 2018	Beck EN.; Intzandt BN.; Almeida QJ. Can Dual Task Walking Improve in Parkinson's Disease After External Focus of Attention Exercise? A Single Blind Randomized Controlled Trial. Neurorehabilitation and neural repair 01 2018;32(1):18-33	Neurorehabilitation and Neural Repair	Prospective
222	Dorsch 2015	Dorsch AK.; Thomas S.; Xu X.; Kaiser W.; Dobkin BH.; . SIRRACT: An International Randomized Clinical Trial of Activity Feedback During Inpatient Stroke Rehabilitation Enabled by Wireless Sensing. Neurorehabilitation and neural repair Jun 2015;29(5):407-15	Neurorehabilitation and Neural Repair	Prospective
223	Ghaziani 2018	Ghaziani E.; Couppé C.; Siersma V.; Søndergaard M.; Christensen H.; Magnusson SP. Electrical Somatosensory Stimulation in Early Rehabilitation of Arm Paresis After Stroke: A Randomized Controlled Trial. Neurorehabilitation and neural repair 10 2018;32(10):899-912	Neurorehabilitation and Neural Repair	Prospective
224	Handelzalts 2019	Handelzalts S.; Kenner-Furman M.; Gray G.; Soroker N.; Shani G.; Melzer I. Effects of Perturbation-Based Balance Training in Subacute Persons With Stroke: A Randomized Controlled Trial. Neurorehabilitation and neural repair 03 2019;33(3):213-224	Neurorehabilitation and Neural Repair	Prospective

225	Koopman 2016	Koopman FS.; Voorn EL.; Beelen A.; Bleijenberg G.; de Visser M.; Brehm MA.; Nollet F. No Reduction of Severe Fatigue in Patients With Postpolio Syndrome by Exercise Therapy or Cognitive Behavioral Therapy: Results of an RCT. Neurorehabilitation and neural repair 06 2016;30(5):402-10	Neurorehabilitation and Neural Repair	Prospective
226	Kwakkel 2016	Kwakkel G.; Winters C.; van Wegen EE.; Nijland RH.; van Kuijk AA.; Visser-Meily A.; de Groot J.; de Vlugt E.; Arendzen JH.; Geurts AC.; Meskers CG.; . Effects of Unilateral Upper Limb Training in Two Distinct Prognostic Groups Early After Stroke: The EXPLICIT-Stroke Randomized Clinical Trial. Neurorehabilitation and neural repair 10 2016;30(9):804-16	Neurorehabilitation and Neural Repair	Prospective
227	Lefeber 2018	Lefeber N.; De Keersmaecker E.; Henderix S.; Michielsen M.; Kerckhofs E.; Swinnen E. Physiological Responses and Perceived Exertion During Robot-Assisted and Body Weight-Supported Gait After Stroke. Neurorehabilitation and neural repair 12 2018;32(12):1043-1054	Neurorehabilitation and Neural Repair	Prospective
228	McEwen 2015	McEwen S.; Polatajko H.; Baum C.; Rios J.; Cirone D.; Doherty M.; Wolf T. Combined Cognitive-Strategy and Task-Specific Training Improve Transfer to Untrained Activities in Subacute Stroke: An Exploratory Randomized Controlled Trial. Neurorehabilitation and neural repair Jul 2015;29(6):526-36	Neurorehabilitation and Neural Repair	Prospective
229	Morris 2015	Morris ME.; Menz HB.; McGinley JL.; Watts JJ.; Huxham FE.; Murphy AT.; Danoudis ME.; Iansek R. A Randomized Controlled Trial to Reduce Falls in People With Parkinson's Disease. Neurorehabilitation and neural repair Sep 2015;29(8):777-85	Neurorehabilitation and Neural Repair	Prospective
230	Ownsworth 2017	Ownsworth T.; Fleming J.; Tate R.; Beadle E.; Griffin J.; Kendall M.; Schmidt J.; Lane-Brown A.; Chevignard M.; Shum DHK. Do People With Severe Traumatic Brain Injury	Neurorehabilitation and Neural Repair	Prospective

		Benefit From Making Errors? A Randomized Controlled Trial of Error-Based and Errorless Learning. Neurorehabilitation and neural repair Dec 2017;31(12):1072-1082		
231	Paul 2018	Paul SS.; Schaefer SY.; Olivier GN.; Walter CS.; Lohse KR.; Dibble LE. Dopamine Replacement Medication Does Not Influence Implicit Learning of a Stepping Task in People With Parkinson's Disease. Neurorehabilitation and neural repair 12 2018;32(12):1031-1042	Neurorehabilitation and Neural Repair	Prospective
232	Pomeroy 2016	Pomeroy VM.; Rowe P.; Clark A.; Walker A.; Kerr A.; Chandler E.; Barber M.; Baron JC.; . A Randomized Controlled Evaluation of the Efficacy of an Ankle-Foot Cast on Walking Recovery Early After Stroke: SWIFT Cast Trial. Neurorehabilitation and neural repair Jan 2016;30(1):40-8	Neurorehabilitation and Neural Repair	Prospective
233	Savadi Oskouie 2017	Savadi Oskouie D.; Sharifipour E.; Sadeghi Bazargani H.; Hashemilar M.; Nikanfar M.; Ghazanfari Amlashi S.; Abbaszade Z.; Sadeghihokmabadi E.; Rikhtegar R.; Golzari SEJ. Efficacy of Citalopram on Acute Ischemic Stroke Outcome: A Randomized Clinical Trial. Neurorehabilitation and neural repair Jul 2017;31(7):638-647	Neurorehabilitation and Neural Repair	Prospective
234	Turgut 2018	Turgut N.; Möller L.; Dengler K.; Steinberg K.; Sprenger A.; Eling P.; Kastrup A.; Hildebrandt H. Adaptive Cueing Treatment of Neglect in Stroke Patients Leads to Improvements in Activities of Daily Living: A Randomized Controlled, Crossover Trial. Neurorehabilitation and neural repair 11 2018;32(11):988-998	Neurorehabilitation and Neural Repair	Prospective
235	Tyson 2015	Tyson S.; Wilkinson J.; Thomas N.; Selles R.; McCabe C.; Tyrrell P.; Vail A. Phase II Pragmatic Randomized Controlled Trial of Patient-Led Therapies (Mirror Therapy and Lower-Limb Exercises) During Inpatient Stroke Rehabilitation. Neurorehabilitation and neural repair Oct	Neurorehabilitation and Neural Repair	Prospective

		2015;29(9):818-26		
236	Van Groenestijn 2019	Van Groenestijn AC.; Schröder CD.; van Eijk RPA.; Veldink JH.; Kruitwagen-van Reenen ET.; Groothuis JT.; Grupstra HF.; Tepper M.; van Vliet RO.; Visser-Meily JMA.; van den Berg LH. Aerobic Exercise Therapy in Ambulatory Patients With ALS: A Randomized Controlled Trial. Neurorehabilitation and neural repair 02 2019;33(2):153-164	Neurorehabilitation and Neural Repair	Prospective
237	Vasant 2016	Vasant DH.; Michou E.; O'Leary N.; Vail A.; Mistry S.; Hamdy S.; . Pharyngeal Electrical Stimulation in Dysphagia Poststroke: A Prospective, Randomized Single-Blinded Interventional Study. Neurorehabilitation and neural repair 10 2016;30(9):866-75	Neurorehabilitation and Neural Repair	Prospective
238	Wilson 2016	Wilson RD.; Page SJ.; Delahanty M.; Knutson JS.; Gunzler DD.; Sheffler LR.; Chae J. Upper-Limb Recovery After Stroke: A Randomized Controlled Trial Comparing EMG-Triggered, Cyclic, and Sensory Electrical Stimulation. Neurorehabilitation and neural repair 11 2016;30(10):978-987	Neurorehabilitation and Neural Repair	Prospective
239	Wolf 2015	Wolf SL.; Sahu K.; Bay RC.; Buchanan S.; Reiss A.; Linder S.; Rosenfeldt A.; Alberts J. The HAAPI (Home Arm Assistance Progression Initiative) Trial: A Novel Robotics Delivery Approach in Stroke Rehabilitation. Neurorehabilitation and neural repair ;29(10):958-68	Neurorehabilitation and Neural Repair	Prospective
240	Pinto 2019	Bonin Pinto C; Morales-Quezada L; de Toledo Piza PV; Zeng D; Saleh Vélez FG; Ferreira IS; Lucena PH; Duarte D; Lopes F; El-Hagrassy MM; Rizzo LV; Camargo EC; Lin DJ; Mazwi N; Wang QM; Black-Schaffer R; Fregni F Combining Fluoxetine and rTMS in Poststroke Motor Recovery: A Placebo-Controlled Double-Blind Randomized Phase 2 Clinical Trial. Neurorehabil Neural Repair Aug 2019;33(8):643-655	Neurorehabilitation and Neural Repair	Prospective
241	Conroy 2019	Conroy SS; Wittenberg GF; Krebs HI; Zhan M; Bever CT; Whitall J	Neurorehabilitation and Neural Repair	Prospective

		Robot-Assisted Arm Training in Chronic Stroke: Addition of Transition-to-Task Practice. Neurorehabil Neural Repair Sep 2019;33(9):751-761		
242	Hammond 2020	Hammond AE; Pitz M; Steinfeld K; Lambert P; Shay B An Exploratory Randomized Trial of Physical Therapy for the Treatment of Chemotherapy-Induced Peripheral Neuropathy. Neurorehabil Neural Repair Mar 2020;34(3):235-246	Neurorehabilitation and Neural Repair	Prospective
243	Han 2020	Han K; Chapman SB; Krawczyk DC Cognitive Training Reorganizes Network Modularity in Traumatic Brain Injury. Neurorehabil Neural Repair Jan 2020;34(1):26-38	Neurorehabilitation and Neural Repair	Prospective
244	Kuo 2018	Kuo HC; Zewdie E; Ciechanski P; Damji O; Kirton A Intervention-Induced Motor Cortex Plasticity in Hemiparetic Children With Perinatal Stroke. Neurorehabil Neural Repair Nov 2018;32(11):941-952	Neurorehabilitation and Neural Repair	Prospective
245	Lotter 2020	Lotter JK; Henderson CE; Plawecki A; Holthus ME; Lucas EH; Ardestani MM; Schmit BD; Hornby TG Task-Specific Versus Impairment-Based Training on Locomotor Performance in Individuals With Chronic Spinal Cord Injury: A Randomized Crossover Study. Neurorehabil Neural Repair Jun 2020;():1545968320927384	Neurorehabilitation and Neural Repair	Prospective
246	Wallace 2020	Wallace AC; Talelli P; Crook L; Austin D; Farrell R; Hoad D; O'Keeffe AG; Marsden JF; Fitzpatrick R; Greenwood R; Rothwell JC; Werring DJ Exploratory Randomized Double-Blind Placebo-Controlled Trial of Botulinum Therapy on Grasp Release After Stroke (PrOMBiS). Neurorehabil Neural Repair Jan 2020;34(1):51-60	Neurorehabilitation and Neural Repair	Prospective
247	Yen 2020	Yen HC; Jeng JS; Chen WS; Pan GS; Chuang Pt Bs WY; Lee YY; Teng T Early Mobilization of Mild-Moderate Intracerebral Hemorrhage Patients in a Stroke Center: A Randomized Controlled Trial. Neurorehabil Neural Repair Jan 2020;34(1):72-81	Neurorehabilitation and Neural Repair	Prospective
248	Foster 2017	Foster ER.; McDaniel MA.; Rendell PG. Improving Prospective Memory in Persons With	Neurorehabilitation and Neural Repair	Retrospective

		Parkinson Disease: A Randomized Controlled Trial. Neurorehabilitation and neural repair May 2017;31(5):451-461		
249	Bleyenheuft 2015	Bleyenheuft Y.; Arnould C.; Brandao MB.; Bleyenheuft C.; Gordon AM. Hand and Arm Bimanual Intensive Therapy Including Lower Extremity (HABIT-ILE) in Children With Unilateral Spastic Cerebral Palsy: A Randomized Trial. Neurorehabilitation and neural repair Aug 2015;29(7):645-57	Neurorehabilitation and Neural Repair	Retrospective
250	Chiaravalloti 2016	Chiaravalloti ND.; Sandry J.; Moore NB.; DeLuca J. An RCT to Treat Learning Impairment in Traumatic Brain Injury: The TBI-MEM Trial. Neurorehabilitation and neural repair 07 2016;30(6):539-50	Neurorehabilitation and Neural Repair	Retrospective
251	Conradsson 2015	Conradsson D.; Löfgren N.; Nero H.; Hagströmer M.; Ståhle A.; Lökk J.; Franzén E. The Effects of Highly Challenging Balance Training in Elderly With Parkinson's Disease: A Randomized Controlled Trial. Neurorehabilitation and neural repair Oct 2015;29(9):827-36	Neurorehabilitation and Neural Repair	Retrospective
252	DePaul 2015	DePaul VG.; Wishart LR.; Richardson J.; Thabane L.; Ma J.; Lee TD. Varied overground walking training versus body-weight-supported treadmill training in adults within 1 year of stroke: a randomized controlled trial. Neurorehabilitation and neural repair May 2015;29(4):329-40	Neurorehabilitation and Neural Repair	Retrospective
253	Hamoudi 2018	Hamoudi M.; Schambra HM.; Fritsch B.; Schoechlin-Marx A.; Weiller C.; Cohen LG.; Reis J. Transcranial Direct Current Stimulation Enhances Motor Skill Learning but Not Generalization in Chronic Stroke. Neurorehabilitation and neural repair ;32(4-5):295-308	Neurorehabilitation and Neural Repair	Retrospective
254	Harmsen 2015	Harmsen WJ.; Bussmann JB.; Selles RW.; Hurkmans HL.; Ribbers GM. A Mirror Therapy-Based Action Observation Protocol to Improve Motor Learning After Stroke.	Neurorehabilitation and Neural Repair	Retrospective

		Neurorehabilitation and neural repair Jul 2015;29(6):509-16		
255	Haruyama 2017	Haruyama K.; Kawakami M.; Otsuka T. Effect of Core Stability Training on Trunk Function, Standing Balance, and Mobility in Stroke Patients. Neurorehabilitation and neural repair 03 2017;31(3):240-249	Neurorehabilitation and Neural Repair	Retrospective
256	Hornby 2016	Hornby TG.; Holleran CL.; Hennessy PW.; Leddy AL.; Connolly M.; Camardo J.; Woodward J.; Mahtani G.; Lovell L.; Roth EJ. Variable Intensive Early Walking Poststroke (VIEWS): A Randomized Controlled Trial. Neurorehabilitation and neural repair 06 2016;30(5):440-50	Neurorehabilitation and Neural Repair	Retrospective
257	Khedr 2019	Khedr EM.; Salama RH.; Abdel Hameed M.; Abo Elfetoh N.; Seif P. Therapeutic Role of Transcranial Direct Current Stimulation in Alzheimer Disease Patients: Double-Blind, Placebo-Controlled Clinical Trial. Neurorehabilitation and neural repair 05 2019;33(5):384-394	Neurorehabilitation and Neural Repair	Retrospective
258	Levy 2016	Levy RM.; Harvey RL.; Kissela BM.; Winstein CJ.; Lutsep HL.; Parrish TB.; Cramer SC.; Venkatesan L. Epidural Electrical Stimulation for Stroke Rehabilitation: Results of the Prospective, Multicenter, Randomized, Single-Blinded Everest Trial. Neurorehabilitation and neural repair Feb 2016;30(2):107-19	Neurorehabilitation and Neural Repair	Retrospective
259	Mark 2018	Mark VW.; Taub E.; Uswatte G.; Morris DM.; Cutter GR.; Adams TL.; Bowman MH.; McKay S. Phase II Randomized Controlled Trial of Constraint-Induced Movement Therapy in Multiple Sclerosis. Part 1: Effects on Real-World Function. Neurorehabilitation and neural repair 03 2018;32(3):223-232	Neurorehabilitation and Neural Repair	Retrospective
260	Mugler 2019	Mugler EM.; Tomic G.; Singh A.; Hameed S.; Lindberg EW.; Gaide J.; Alqadi M.; Robinson E.; Dalzotto K.; Limoli C.; Jacobson T.; Lee J.; Slutzky MW. Myoelectric Computer Interface Training for	Neurorehabilitation and Neural Repair	Retrospective

		Reducing Co-Activation and Enhancing Arm Movement in Chronic Stroke Survivors: A Randomized Trial. Neurorehabilitation and neural repair 04 2019;33(4):284-295		
261	Sungkarat 2018	Sungkarat S.; Boripuntakul S.; Kumfu S.; Lord SR.; Chattipakorn N. Tai Chi Improves Cognition and Plasma BDNF in Older Adults With Mild Cognitive Impairment: A Randomized Controlled Trial. Neurorehabilitation and neural repair 02 2018;32(2):142-149	Neurorehabilitation and Neural Repair	Retrospective
262	Thrane 2015	Thrane G.; Askim T.; Stock R.; Indredavik B.; Gjone R.; Erichsen A.; Anke A. Efficacy of Constraint-Induced Movement Therapy in Early Stroke Rehabilitation: A Randomized Controlled Multisite Trial. Neurorehabilitation and neural repair Jul 2015;29(6):517-25	Neurorehabilitation and Neural Repair	Retrospective
263	Woldag 2017	Woldag H.; Voigt N.; Bley M.; Hummelsheim H. Constraint-Induced Aphasia Therapy in the Acute Stage: What Is the Key Factor for Efficacy? A Randomized Controlled Study. Neurorehabilitation and neural repair 01 2017;31(1):72-80	Neurorehabilitation and Neural Repair	Retrospective
264	Zondervan 2015	Zondervan DK.; Augsburger R.; Bodenhoefer B.; Friedman N.; Reinkensmeyer DJ.; Cramer SC. Machine-Based, Self-guided Home Therapy for Individuals With Severe Arm Impairment After Stroke: A Randomized Controlled Trial. Neurorehabilitation and neural repair Jun 2015;29(5):395-406	Neurorehabilitation and Neural Repair	Retrospective
265	Revill 2020	Revill KP; Haut MW; Belagaje SR; Nahab F; Drake D; Buetefisch CM Hebbian-Type Primary Motor Cortex Stimulation: A Potential Treatment of Impaired Hand Function in Chronic Stroke Patients. Neurorehabil Neural Repair Feb 2020;34(2):159-171	Neurorehabilitation and Neural Repair	Retrospective
266	Sandhu 2019	Sandhu MS; Gray E; Kocherginsky M; Jayaraman A; Mitchell GS; Rymer WZ	Neurorehabilitation and Neural Repair	Retrospective

		Prednisolone Pretreatment Enhances Intermittent Hypoxia-Induced Plasticity in Persons With Chronic Incomplete Spinal Cord Injury. Neurorehabil Neural Repair Nov 2019;33(11):911-921		
267	Surana 2019	Surana BK; Ferre CL; Dew AP; Brandao M; Gordon AM; Moreau NG Effectiveness of Lower-Extremity Functional Training (LIFT) in Young Children With Unilateral Spastic Cerebral Palsy: A Randomized Controlled Trial. Neurorehabil Neural Repair Oct 2019;33(10):862-872	Neurorehabilitation and Neural Repair	Retrospective
268	Wang 2020	Wang X; Wang H; Xiong X; Sun C; Zhu B; Xu Y; Fan M; Tong S; Sun L; Guo X Motor Imagery Training After Stroke Increases Slow-5 Oscillations and Functional Connectivity in the Ipsilesional Inferior Parietal Lobule. Neurorehabil Neural Repair Apr 2020;34(4):321-332	Neurorehabilitation and Neural Repair	Retrospective
269	Ackerley 2016	Ackerley SJ.; Byblow WD.; Barber PA.; MacDonald H.; McIntyre-Robinson A.; Stinear CM. Primed Physical Therapy Enhances Recovery of Upper Limb Function in Chronic Stroke Patients. Neurorehabilitation and neural repair May 2016;30(4):339-48	Neurorehabilitation and Neural Repair	No registration
270	Damiano 2017	Damiano DL.; Stanley CJ.; Ohlrich L.; Alter KE. Task-Specific and Functional Effects of Speed-Focused Elliptical or Motor-Assisted Cycle Training in Children With Bilateral Cerebral Palsy: Randomized Clinical Trial. Neurorehabilitation and neural repair Aug 2017;31(8):736-745	Neurorehabilitation and Neural Repair	No registration
271	Ding 2019	Ding L.; Wang X.; Chen S.; Wang H.; Tian J.; Rong J.; Shao P.; Tong S.; Guo X.; Jia J. Camera-Based Mirror Visual Input for Priming Promotes Motor Recovery, Daily Function, and Brain Network Segregation in Subacute Stroke Patients. Neurorehabilitation and neural repair 04 2019;33(4):307-318	Neurorehabilitation and Neural Repair	No registration
272	Hu 2015	Hu XL.; Tong RK.; Ho NS.; Xue JJ.; Rong W.; Li LS. Wrist Rehabilitation Assisted by an Electromyography-Driven Neuromuscular Electrical Stimulation Robot After Stroke.	Neurorehabilitation and Neural Repair	No registration

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273	Hubbard 2015	Hubbard IJ.; Carey LM.; Budd TW.; Levi C.; McElduff P.; Hudson S.; Bateman G.; Parsons MW. A Randomized Controlled Trial of the Effect of Early Upper-Limb Training on Stroke Recovery and Brain Activation. Neurorehabilitation and neural repair Sep 2015;29(8):703-13	Neurorehabilitation and Neural Repair	No registration
274	Choudhury 2020	Choudhury S; Singh R; Shobhana A; Sen D; Anand SS; Shubham S; Gangopadhyay S; Baker MR; Kumar H; Baker SN A Novel Wearable Device for Motor Recovery of Hand Function in Chronic Stroke Survivors. Neurorehabil Neural Repair May 2020;():1545968320926162	Neurorehabilitation and Neural Repair	No registration
275	Liao 2015	Liao YY.; Yang YR.; Cheng SJ.; Wu YR.; Fuh JL.; Wang RY. Virtual Reality-Based Training to Improve Obstacle-Crossing Performance and Dynamic Balance in Patients With Parkinson's Disease. Neurorehabilitation and neural repair Aug 2015;29(7):658-67	Neurorehabilitation and Neural Repair	No registration
276	Mansfield 2015	Mansfield A.; Wong JS.; Bryce J.; Brunton K.; Inness EL.; Knorr S.; Jones S.; Taati B.; McIlroy WE. Use of Accelerometer-Based Feedback of Walking Activity for Appraising Progress With Walking-Related Goals in Inpatient Stroke Rehabilitation: A Randomized Controlled Trial. Neurorehabilitation and neural repair Oct 2015;29(9):847-57	Neurorehabilitation and Neural Repair	No registration
277	Nepveu 2017	Nepveu JF.; Thiel A.; Tang A.; Fung J.; Lundbye-Jensen J.; Boyd LA.; Roig M. A Single Bout of High-Intensity Interval Training Improves Motor Skill Retention in Individuals With Stroke. Neurorehabilitation and neural repair Aug 2017;31(8):726-735	Neurorehabilitation and Neural Repair	No registration
278	Ploughman 2019	Ploughman M.; Eskes GA.; Kelly LP.; Kirkland MC.; Devasahayam AJ.; Wallack EM.; Abraha B.; Hasan	Neurorehabilitation and Neural Repair	No registration

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280	Ten Brink 2017	Ten Brink AF.; Visser-Meily JMA.; Schut MJ.; Kouwenhoven M.; Eijsackers ALH.; Nijboer TCW. Prism Adaptation in Rehabilitation? No Additional Effects of Prism Adaptation on Neglect Recovery in the Subacute Phase Poststroke: A Randomized Controlled Trial. Neurorehabilitation and neural repair Dec 2017;31(12):1017-1028	Neurorehabilitation and Neural Repair	No registration
281	Alcântara 2018	Alcântara CC; Charalambous CC; Morton SM; Russo TL; Reisman DS Different Error Size During Locomotor Adaptation Affects Transfer to Overground Walking Poststroke. Neurorehabil Neural Repair Dec 2018;32(12):1020-1030	Neurorehabilitation and Neural Repair	No registration
282	Daly 2019	Daly JJ; McCabe JP; Holcomb J; Monkiewicz M; Gansen J; Pundik S Long-Dose Intensive Therapy Is Necessary for Strong, Clinically Significant, Upper Limb Functional Gains and Retained Gains in Severe/Moderate Chronic Stroke. Neurorehabil Neural Repair Jul 2019;33(7):523-537	Neurorehabilitation and Neural Repair	No registration
283	Doost 2019	Doost MY; Orban de Xivry JJ; Herman B; Vanthournhout L; Riga A; Bihin B; Jamart J; Laloux P; Raymackers JM; Vandermeeren Y Learning a Bimanual Cooperative Skill in Chronic	Neurorehabilitation and Neural Repair	No registration

		Stroke Under Noninvasive Brain Stimulation: A Randomized Controlled Trial. Neurorehabil Neural Repair Jun 2019;33(6):486-498		
284	Khedr 2019	Khedr, E. M., Mohamed, K. O., Soliman, R. K., Hassan, A. M. M., & Rothwell, J. C. (2019). The Effect of High-Frequency Repetitive Transcranial Magnetic Stimulation on Advancing Parkinson's Disease With Dysphagia: Double Blind Randomized Clinical Trial. Neurorehabilitation and Neural Repair. https://doi.org/10.1177/1545968319847968	Neurorehabilitation and Neural Repair	No registration
285	Shekhawat 2016	Shekhawat GS.; Sundram F.; Bikson M.; Truong D.; De Ridder D.; Stinear CM.; Welch D.; Searchfield GD. Intensity, Duration, and Location of High-Definition Transcranial Direct Current Stimulation for Tinnitus Relief. Neurorehabilitation and neural repair May 2016;30(4):349-59	Neurorehabilitation and Neural Repair	No registration
286	Pingue 2018	Pingue V; Priori A; Malovini A; Pistarini C Dual Transcranial Direct Current Stimulation for Poststroke Dysphagia: A Randomized Controlled Trial. Neurorehabil Neural Repair Jun 2018;32(6-7):635-644	Neurorehabilitation and Neural Repair	No registration
287	Stuart 2019	Stuart M; Dromerick AW; Macko R; Benvenuti F; Beamer B; Sorkin J; Chard S; Weinrich M Adaptive Physical Activity for Stroke: An Early-Stage Randomized Controlled Trial in the United States. Neurorehabil Neural Repair Aug 2019;33(8):668-680	Neurorehabilitation and Neural Repair	No registration
288	Gracey 2017	Gracey F.; Fish JE.; Greenfield E.; Bateman A.; Malley D.; Hardy G.; Ingham J.; Evans JJ.; Manly T. A Randomized Controlled Trial of Assisted Intention Monitoring for the Rehabilitation of Executive Impairments Following Acquired Brain Injury. Neurorehabilitation and neural repair 04 2017;31(4):323-333	Neurorehabilitation and Neural Repair	No registration
289	Albornoz-Cabello 2017	Albornoz-Cabello M.; Maya-Martín J.; Domínguez-Maldonado G.; Espejo-Antúnez L.; Heredia-Rizo AM. Effect of interferential current therapy on pain perception and disability level in subjects with chronic low back pain: a randomized controlled trial.	Clinical Rehabilitation	Prospective

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290	Amris 2019	Amris K.; Bülow CV.; Christensen R.; Bandak E.; Rasmussen MU.; Danneskiold-Samsøe B.; Wæhrens EE. The benefit of adding a physiotherapy or occupational therapy intervention programme to a standardized group-based interdisciplinary rehabilitation programme for patients with chronic widespread pain: a randomized active-controlled non-blinded trial. Clinical rehabilitation Aug 2019;33(8):1367-1381	Clinical Rehabilitation	Prospective
291	Atkins 2019	Atkins A.; Cannell J.; Barr C. Pedometers alone do not increase mobility in inpatient rehabilitation: a randomized controlled trial. Clinical rehabilitation Aug 2019;33(8):1382-1390	Clinical Rehabilitation	Prospective
292	Baque 2017	Baque E.; Barber L.; Sakzewski L.; Boyd RN. Randomized controlled trial of web-based multimodal therapy for children with acquired brain injury to improve gross motor capacity and performance. Clinical rehabilitation Jun 2017;31(6):722-732	Clinical Rehabilitation	Prospective
293	Cannell 2018	Cannell J.; Jovic E.; Rathjen A.; Lane K.; Tyson AM.; Callisaya ML.; Smith ST.; Ahuja KD.; Bird ML. The efficacy of interactive, motion capture-based rehabilitation on functional outcomes in an inpatient stroke population: a randomized controlled trial. Clinical rehabilitation Feb 2018;32(2):191-200	Clinical Rehabilitation	Prospective
294	Clark 2017	Clark IN.; Baker FA.; Peiris CL.; Shoebridge G.; Taylor NF. Participant-selected music and physical activity in older adults following cardiac rehabilitation: a randomized controlled trial. Clinical rehabilitation Mar 2017;31(3):329-339	Clinical Rehabilitation	Prospective
295	Cruz-Díaz 2018	Cruz-Díaz D.; Romeu M.; Velasco-González C.; Martínez-Amat A.; Hita-Contreras F. The effectiveness of 12 weeks of Pilates intervention on disability, pain and kinesiophobia in patients with chronic low back pain: a randomized controlled trial. Clinical rehabilitation Sep 2018;32(9):1249-1257	Clinical Rehabilitation	Prospective
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297	DeGroef 2017	De Groef A.; Van Kampen M.; Vervloesem N.; De Geyter S.; Christiaens MR.; Neven P.; Vos L.; De Vrieze T.; Geraerts I.; Devoogdt N. Myofascial techniques have no additional beneficial effects to a standard physical therapy programme for upper limb pain after breast cancer surgery: a randomized controlled trial. Clinical rehabilitation Dec 2017;31(12):1625-1635	Clinical Rehabilitation	Prospective
298	DeGroef 2018	De Groef A.; Van Kampen M.; Vervloesem N.; Dieltjens E.; Christiaens MR.; Neven P.; Vos L.; De Vrieze T.; Geraerts I.; Devoogdt N. Effect of myofascial techniques for treatment of persistent arm pain after breast cancer treatment: randomized controlled trial. Clinical rehabilitation Apr 2018;32(4):451-461	Clinical Rehabilitation	Prospective
299	Domingues 2019	Domingues L.; Pimentel-Santos FM.; Cruz EB.; Sousa AC.; Santos A.; Cordovil A.; Correia A.; Torres LS.; Silva A.; Branco PS.; Branco JC. Is a combined programme of manual therapy and exercise more effective than usual care in patients with non-specific chronic neck pain? A randomized controlled trial. Clinical rehabilitation Dec 2019;33(12):1908-1918	Clinical Rehabilitation	Prospective
300	Emmerson 2017	Emmerson KB.; Harding KE.; Taylor NF. Home exercise programmes supported by video and automated reminders compared with standard paper-based home exercise programmes in patients with stroke: a randomized controlled trial. Clinical rehabilitation Aug 2017;31(8):1068-1077	Clinical Rehabilitation	Prospective
301	Faux 2015	Faux SG.; Kohler F.; Mozer R.; Klein LA.; Courtenay S.; D'Amours SK.; Chapman J.; Estell J. The ROARI project - Road Accident Acute Rehabilitation Initiative: a randomised clinical trial of two targeted early interventions for road-related trauma. Clinical rehabilitation Jul 2015;29(7):639-52	Clinical Rehabilitation	Prospective

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303	Hanada 2019	Hanada M.; Soyama A.; Hidaka M.; Nagura H.; Oikawa M.; Tsuji A.; Kasawara KT.; Mathur S.; Reid WD.; Takatsuki M.; Eguchi S.; Kozu R. Effects of quadriceps muscle neuromuscular electrical stimulation in living donor liver transplant recipients: phase-II single-blinded randomized controlled trial. Clinical rehabilitation May 2019;33(5):875-884	Clinical Rehabilitation	Prospective
304	Helminen 2015	Helminen EE.; Sinikallio SH.; Valjakka AL.; Väisänen-Rouvali RH.; Arokoski JP. Effectiveness of a cognitive-behavioural group intervention for knee osteoarthritis pain: a randomized controlled trial. Clinical rehabilitation Sep 2015;29(9):868-81	Clinical Rehabilitation	Prospective
305	Jiménez Del Barrio 2018	Jiménez Del Barrio S.; Estébanez de Miguel E.; Bueno Gracia E.; Haddad Garay M.; Tricás Moreno JM.; Hidalgo García C. Effects of diacutaneous fibrolysis in patients with mild to moderate symptomatic carpal tunnel syndrome: a randomized controlled trial. Clinical rehabilitation Dec 2018;32(12):1645-1655	Clinical Rehabilitation	Prospective
306	Kleffelgaard 2019	Kleffelgaard I.; Soberg HL.; Tamber AL.; Bruusgaard KA.; Pripp AH.; Sandhaug M.; Langhammer B. The effects of vestibular rehabilitation on dizziness and balance problems in patients after traumatic brain injury: a randomized controlled trial. Clinical rehabilitation Jan 2019;33(1):74-84	Clinical Rehabilitation	Prospective
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308	Leung 2019	Leung J.; King C.; Fereday S.	Clinical Rehabilitation	Prospective

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309	Lisón 2018	Lisón JF.; Ortega-Santana B.; Antón-Nogués Á.; González-Requena P.; Vera-Hervás C.; Doménech-Fernández J.; Sánchez-Zuriaga D.; Salvador-Coloma P. Effects and underlying mechanisms of unstable shoes on chronic low back pain: a randomized controlled trial. Clinical rehabilitation May 2018;32(5):654-662	Clinical Rehabilitation	Prospective
310	López-de-Uralde-Villanueva 2018	López-de-Uralde-Villanueva I.; Candelas-Fernández P.; de-Diego-Cano B.; Mínguez-Calzada O.; Del Corral T. The effectiveness of combining inspiratory muscle training with manual therapy and a therapeutic exercise program on maximum inspiratory pressure in adults with asthma: a randomized clinical trial. Clinical rehabilitation Jun 2018;32(6):752-765	Clinical Rehabilitation	Prospective
311	López-López 2019	López-López L.; Torres-Sánchez I.; Rodríguez-Torres J.; Cabrera-Martos I.; Ortiz-Rubio A.; Valenza MC. Does adding an integrated physical therapy and neuromuscular electrical stimulation therapy to standard rehabilitation improve functional outcome in elderly patients with pneumonia? A randomised controlled trial. Clinical rehabilitation Nov 2019;33(11):1757-1766	Clinical Rehabilitation	Prospective
312	Macaré van Maurik 2015	Macaré van Maurik JF.; ter Horst B.; van Hal M.; Kon M.; Peters EJ. Effect of surgical decompression of nerves in the lower extremity in patients with painful diabetic polyneuropathy on stability: a randomized controlled trial. Clinical rehabilitation Oct 2015;29(10):994-1001	Clinical Rehabilitation	Prospective
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314	Milne 2018	Milne SC.; Corben LA.; Roberts M.; Murphy A.; Tai G.; Georgiou-Karistianis N.; Yiu EM.; Delatycki MB. Can rehabilitation improve the health and well-being in Friedreich's ataxia: a randomized controlled trial? Clinical rehabilitation May 2018;32(5):630-643	Clinical Rehabilitation	Prospective
315	Nikamp 2017	Nikamp CD.; Buurke JH.; van der Palen J.; Hermens HJ.; Rietman JS. Six-month effects of early or delayed provision of an ankle-foot orthosis in patients with (sub)acute stroke: a randomized controlled trial. Clinical rehabilitation Dec 2017;31(12):1616-1624	Clinical Rehabilitation	Prospective
316	Nooijen 2017	Nooijen CF.; Stam HJ.; Sluis T.; Valent L.; Twisk J.; van den Berg-Emons RJ. A behavioral intervention promoting physical activity in people with subacute spinal cord injury: secondary effects on health, social participation and quality of life. Clinical rehabilitation Jun 2017;31(6):772-780	Clinical Rehabilitation	Prospective
317	O'Halloran 2016	O'Halloran PD.; Shields N.; Blackstock F.; Wintle E.; Taylor NF. Motivational interviewing increases physical activity and self-efficacy in people living in the community after hip fracture: a randomized controlled trial. Clinical rehabilitation Nov 2016;30(11):1108-1119	Clinical Rehabilitation	Prospective
318	Piovesana 2017	Piovesana A.; Ross S.; Lloyd O.; Whittingham K.; Ziviani J.; Ware RS.; McKinlay L.; Boyd RN. A randomised controlled trial of a web-based multi-modal therapy program to improve executive functioning in children and adolescents with acquired brain injury. Clinical rehabilitation Oct 2017;31(10):1351-1363	Clinical Rehabilitation	Prospective
319	Reina-Bueno 2019	Reina-Bueno M.; Vázquez-Bautista MDC.; Pérez-García S.; Rosende-Bautista C.; Sáez-Díaz A.; Munuera-Martínez PV. Effectiveness of custom-made foot orthoses in patients with rheumatoid arthritis: a randomized controlled trial. Clinical rehabilitation Apr 2019;33(4):661-669	Clinical Rehabilitation	Prospective

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321	Saquetto 2018	Saquetto MB.; de Santana Bispo A.; da Silva Barreto C.; Gonçalves KA.; Queiroz RS.; da Silva CM.; Gomes Neto M. Addition of an educational programme for primary caregivers to rehabilitation improves self-care and mobility in children with cerebral palsy: a randomized controlled trial. Clinical rehabilitation Jul 2018;32(7):878-887	Clinical Rehabilitation	Prospective
322	Sarmento 2017	Sarmento LA.; Pinto JS.; da Silva AP.; Cabral CM.; Chiavegato LD. Effect of conventional physical therapy and Pilates in functionality, respiratory muscle strength and ability to exercise in hospitalized chronic renal patients: a randomized controlled trial. Clinical rehabilitation Apr 2017;31(4):508-520	Clinical Rehabilitation	Prospective
323	Sebio García 2017	Sebio García R.; Yáñez-Brage MI.; Giménez Moolhuyzen E.; Salorio Riobo M.; Lista Paz A.; Borro Mate JM. Preoperative exercise training prevents functional decline after lung resection surgery: a randomized, single-blind controlled trial. Clinical rehabilitation Aug 2017;31(8):1057-1067	Clinical Rehabilitation	Prospective
324	Selhorst 2018	Selhorst M.; Rice W.; Jackowski M.; Degenhart T.; Coffman S. A sequential cognitive and physical approach (SCOPA) for patellofemoral pain: a randomized controlled trial in adolescent patients. Clinical rehabilitation Dec 2018;32(12):1624-1635	Clinical Rehabilitation	Prospective
325	Silva 2018	Silva CMDSE.; Gomes Neto M.; Saquetto MB.; Conceição CSD.; Souza-Machado A. Effects of upper limb resistance exercise on aerobic capacity, muscle strength, and quality of life in COPD patients: a randomized controlled trial.	Clinical Rehabilitation	Prospective

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326	Song 2018	Song J.; Paul SS.; Caetano MJD.; Smith S.; Dibble LE.; Love R.; Schoene D.; Menant JC.; Sherrington C.; Lord SR.; Canning CG.; Allen NE. Home-based step training using videogame technology in people with Parkinson's disease: a single-blinded randomised controlled trial. Clinical rehabilitation Mar 2018;32(3):299-311	Clinical Rehabilitation	Prospective
327	Taglietti 2018	Taglietti M.; Facci LM.; Trelha CS.; de Melo FC.; da Silva DW.; Sawczuk G.; Ruivo TM.; de Souza TB.; Sforza C.; Cardoso JR. Effectiveness of aquatic exercises compared to patient-education on health status in individuals with knee osteoarthritis: a randomized controlled trial. Clinical rehabilitation Jun 2018;32(6):766-776	Clinical Rehabilitation	Prospective
328	Wolny 2019	Wolny T.; Linek P. Is manual therapy based on neurodynamic techniques effective in the treatment of carpal tunnel syndrome? A randomized controlled trial. Clinical rehabilitation Mar 2019;33(3):408-417	Clinical Rehabilitation	Prospective
329	Blasco 2020	Blasco JM; Acosta-Ballester Y; Martínez-Garrido I; García-Molina P; Igual-Camacho C; Roig-Casasús S The effects of preoperative balance training on balance and functional outcome after total knee replacement: a randomized controlled trial. Clin Rehabil Feb 2020;34(2):182-193	Clinical Rehabilitation	Prospective
330	Bragstad 2020	Bragstad LK; Hjelle EG; Zucknick M; Sveen U; Thommessen B; Bronken BA; Martinsen R; Kitzmüller G; Mangset M; Kvigne KJ; Hilari K; Lightbody CE; Kirkevold M The effects of a dialogue-based intervention to promote psychosocial well-being after stroke: a randomized controlled trial. Clin Rehabil Jun 2020;():269215520929737	Clinical Rehabilitation	Prospective
331	Brissart 2020	Brissart H; Omorou AY; Forthoffer N; Berger E; Moreau T; De Seze J; Morele E; Debouverie M Memory improvement in multiple sclerosis after an extensive cognitive rehabilitation program in groups with a multicenter double-blind randomized trial. Clin Rehabil Jun 2020;34(6):754-763	Clinical Rehabilitation	Prospective

332	Cabrera-Martos 2020	Cabrera-Martos I; Jiménez-Martín AT; López-López L; Rodríguez-Torres J; Ortiz-Rubio A; Valenza MC Effects of a core stabilization training program on balance ability in persons with Parkinson's disease: a randomized controlled trial. Clin Rehabil Jun 2020;34(6):764-772	Clinical Rehabilitation	Prospective
333	Costa 2019	Costa, A. R. A., de Almeida Silva, H. J., Mendes, A. A. M. T., Scattone Silva, R., de Almeida Lins, C. A., & de Souza, M. C. (2020). Effects of insoles adapted in flip-flop sandals in people with plantar fasciopathy: a randomized, double-blind clinical, controlled study. Clinical Rehabilitation. https://doi.org/10.1177/0269215519893104	Clinical Rehabilitation	Prospective
334	Daher 2020	Daher A; Carel RS; Tzipi K; Esther H; Dar G The effectiveness of an aerobic exercise training on patients with neck pain during a short- and long-term follow-up: a prospective double-blind randomized controlled trial. Clin Rehabil May 2020;34(5):617-629	Clinical Rehabilitation	Prospective
335	Donoso-Úbeda 2020	Donoso-Úbeda E; Meroño-Gallut J; López-Pina JA; Cuesta-Barriuso R Effect of manual therapy in patients with hemophilia and ankle arthropathy: a randomized clinical trial. Clin Rehabil Jan 2020;34(1):111-119	Clinical Rehabilitation	Prospective
336	Gómez-Hernández 2020	Gómez-Hernández M; Gallego-Izquierdo T; Martínez-Merinero P; Pecos-Martín D; Ferragut-García A; Hita-Contreras F; Martínez-Amat A; Montañez-Aguilera FJ; Achalandabaso Ochoa A Benefits of adding stretching to a moderate-intensity aerobic exercise programme in women with fibromyalgia: a randomized controlled trial. Clin Rehabil Feb 2020;34(2):242-251	Clinical Rehabilitation	Prospective
337	Heydenreich 2020	Heydenreich, M., Puta, C., Gabriel, H. H. W., Dietze, A., Wright, P., & Zermann, D. H. (2020). Does trunk muscle training with an oscillating rod improve urinary incontinence after radical prostatectomy? A prospective randomized controlled trial. Clinical Rehabilitation. https://doi.org/10.1177/0269215519893096	Clinical Rehabilitation	Prospective

338	Li 2020	Li, I., Bui, T., Phan, H. T., Llado, A., King, C., & Scrivener, K. (2020). App-based supplemental exercise in rehabilitation, adherence, and effect on outcomes: a randomized controlled trial. Clinical Rehabilitation. https://doi.org/10.1177/0269215520928119	Clinical Rehabilitation	Prospective
339	Lincoln 2020	Lincoln NB; Bradshaw LE; Constantinescu CS; Day F; Drummond AE; Fitzsimmons D; Harris S; Montgomery AA; das Nair R Cognitive rehabilitation for attention and memory in people with multiple sclerosis: a randomized controlled trial (CRAMMS). Clin Rehabil Feb 2020;34(2):229-241	Clinical Rehabilitation	Prospective
340	Lipardo 2020	Lipardo DS; Tsang WW Effects of combined physical and cognitive training on fall prevention and risk reduction in older persons with mild cognitive impairment: a randomized controlled study. Clin Rehabil Jun 2020;34(6):773-782	Clinical Rehabilitation	Prospective
341	Matarán-Peñarrocha 2020	Matarán-Peñarrocha GA; Lara Palomo IC; Antequera Soler E; Gil-Martínez E; Fernández-Sánchez M; Aguilar-Ferrándiz ME; Castro-Sánchez AM Comparison of efficacy of a supervised versus non-supervised physical therapy exercise program on the pain, functionality and quality of life of patients with non-specific chronic low-back pain: a randomized controlled trial. Clin Rehabil Jun 2020;():269215520927076	Clinical Rehabilitation	Prospective
342	Mayo 2020	Mayo NE; Mate KK; Reid R; Duquette P; Lapierre Y; Barclay R; Bayley M; Bartlett S; Andersen R Participation in and outcomes from a 12-month tailored exercise programme for people with multiple sclerosis (MSTEP©): a randomized trial.	Clinical Rehabilitation	Prospective
343	Nikamp 2017	Nikamp CD; Buurke JH; van der Palen J; Hermens HJ; Rietman JS Early or delayed provision of an ankle-foot orthosis in patients with acute and subacute stroke: a randomized controlled trial. Clin Rehabil Jun 2017;31(6):798-808	Clinical Rehabilitation	Prospective

344	Pohl 2020	Pohl P; Wressle E; Lundin F; Enthoven P; Dizdar N Group-based music intervention in Parkinson's disease - findings from a mixed-methods study. Clin Rehabil Apr 2020;34(4):533-544	Clinical Rehabilitation	Prospective
345	Schmidt 2020	Schmidt AM; Schiøttz-Christensen B; Foster NE; Laurberg TB; Maribo T The effect of an integrated multidisciplinary rehabilitation programme alternating inpatient interventions with home-based activities for patients with chronic low back pain: a randomized controlled trial. Clin Rehabil Mar 2020;34(3):382-393	Clinical Rehabilitation	Prospective
346	Turunen 2020	Turunen KM; Aaltonen-Määttä L; Törmäkangas T; Rantalainen T; Portegijs E; Keikkala S; Kinnunen ML; Finni T; Sipilä S; Nikander R Effects of an individually targeted multicomponent counseling and home-based rehabilitation program on physical activity and mobility in community-dwelling older people after discharge from hospital: a randomized controlled trial. Clin Rehabil Apr 2020;34(4):491-503	Clinical Rehabilitation	Prospective
347	Wang 2020	Wang J; Xie Y; Wang L; Lei L; Liao P; Wang S; Gao Y; Chen Y; Xu F; Zhang C Hip abductor strength-based exercise therapy in treating women with moderate-to-severe knee osteoarthritis: a randomized controlled trial. Clin Rehabil Feb 2020;34(2):160-169	Clinical Rehabilitation	Prospective
348	Wiseman 2020	Wiseman J; Ware RS; Simons M; McPhail S; Kimble R; Dotta A; Tyack Z Effectiveness of topical silicone gel and pressure garment therapy for burn scar prevention and management in children: a randomized controlled trial. Clin Rehabil Jan 2020;34(1):120-131	Clinical Rehabilitation	Prospective
349	Xia 2020	Xia N; Reinhardt JD; Liu S; Fu J; Ren C; Wang H; Li J Effects of the introduction of objective criteria for referral and discharge in physical therapy for ischemic stroke in China: a randomized controlled trial. Clin Rehabil Mar 2020;34(3):345-356	Clinical Rehabilitation	Prospective

350	Lockwood 2019	Lockwood KJ.; Harding KE.; Boyd JN.; Taylor NF. Predischarge home visits after hip fracture: a randomized controlled trial. Clinical rehabilitation Apr 2019;33(4):681-692	Clinical Rehabilitation	Prospective
351	Zheng 2020	Zheng Y; Liu G; Yu L; Wang Y; Fang Y; Shen Y; Huang X; Qiao L; Yang J; Zhang Y; Hua Z Effects of a 3D-printed orthosis compared to a low-temperature thermoplastic plate orthosis on wrist flexor spasticity in chronic hemiparetic stroke patients: a randomized controlled trial. Clin Rehabil Feb 2020;34(2):194-204	Clinical Rehabilitation	Prospective
352	Kleynen 2019	Kleynen M.; Jie LJ.; Theunissen K.; Rasquin SM.; Masters RS.; Meijer K.; Beurskens AJ.; Braun SM. The immediate influence of implicit motor learning strategies on spatiotemporal gait parameters in stroke patients: a randomized within-subjects design. Clinical rehabilitation Apr 2019;33(4):619-630	Clinical Rehabilitation	Prospective
353	Karner 2019	Karner S.; Stenner H.; Spate M.; Behrens J.; Krakow K. Effects of a robot intervention on visuospatial hemineglect in postacute stroke patients: a randomized controlled trial. Clinical rehabilitation Dec 2019;33(12):1940-1948	Clinical Rehabilitation	Prospective
354	Zheng 2020	Zheng G; Zheng Y; Xiong Z; Ye B Effect of Baduanjin exercise on cognitive function in patients with post-stroke cognitive impairment: a randomized controlled trial. Clin Rehabil Jun 2020;():269215520930256	Clinical Rehabilitation	Prospective
355	Abolfazli 2019	Abolfazli M.; Lajevardi L.; Mirzaei L.; Abdorazaghi HA.; Azad A.; Taghizadeh G. The effect of early intervention of mirror visual feedback on pain, disability and motor function following hand reconstructive surgery: a randomized clinical trial. Clinical rehabilitation Mar 2019;33(3):494-503	Clinical Rehabilitation	Retrospective
356	Forestieri 2018	Forestieri P.; Bolzan DW.; Santos VB.; Moreira RSL.; de Almeida DR.; Trimer R.; de Souza Brito F.; Borghi-Silva A.; de Camargo Carvalho AC.; Arena R.; Gomes WJ.; Guizilini S.	Clinical Rehabilitation	Retrospective

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358	Asadollahi 2018	Asadollahi M.; Ramezani M.; Khanmoradi Z.; Karimialavijeh E. The efficacy comparison of citalopram, fluoxetine, and placebo on motor recovery after ischemic stroke: a double-blind placebo-controlled randomized controlled trial. Clinical rehabilitation Aug 2018;32(8):1069-1075	Clinical Rehabilitation	Retrospective
359	Adie 2017	Adie K.; Schofield C.; Berrow M.; Wingham J.; Humfryes J.; Pritchard C.; James M.; Allison R. Does the use of Nintendo Wii SportsTM improve arm function? Trial of WiiTM in Stroke: a randomized controlled trial and economics analysis. Clinical rehabilitation Feb 2017;31(2):173-185	Clinical Rehabilitation	Retrospective
360	Afrasiabifar 2018	Afrasiabifar A.; Karami F.; Najafi Doulatabad S. Comparing the effect of Cawthorne-Cooksey and Frenkel exercises on balance in patients with multiple sclerosis: a randomized controlled trial. Clinical rehabilitation Jan 2018;32(1):57-65	Clinical Rehabilitation	Retrospective
361	Akinci 2018	Akinci B.; Yeldan I.; Satman I.; Dirican A.; Ozdincler AR. The effects of Internet-based exercise compared with supervised group exercise in people with type 2 diabetes: a randomized controlled study. Clinical rehabilitation Jun 2018;32(6):799-810	Clinical Rehabilitation	Retrospective
362	Albornoz-Cabello 2019	Albornoz-Cabello M.; Pérez-Mármol JM.; Barrios Quinta CJ.; Matarán-Peñarrocha GA.; Castro-Sánchez AM.; de la Cruz Olivares B. Effect of adding interferential current stimulation to exercise on outcomes in primary care patients with	Clinical Rehabilitation	Retrospective

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363	Akbaba 2018	Analay Akbaba Y.; Kaya Mutlu E.; Altun S.; Celik D. Does the patients' expectations on kinesiotape affect the outcomes of patients with a rotator cuff tear? A randomized controlled clinical trial. Clinical rehabilitation Nov 2018;32(11):1509-1519	Clinical Rehabilitation	Retrospective
364	Antoniotti 2019	Antoniotti P.; Veronelli L.; Caronni A.; Monti A.; Aristidou E.; Montesano M.; Corbo M. No evidence of effectiveness of mirror therapy early after stroke: an assessor-blinded randomized controlled trial. Clinical rehabilitation May 2019;33(5):885-893	Clinical Rehabilitation	Retrospective
365	Barbalho 2019	Barbalho M.; Rocha AC.; Seus TL.; Raiol R.; Del Vecchio FB.; Coswig VS. Addition of blood flow restriction to passive mobilization reduces the rate of muscle wasting in elderly patients in the intensive care unit: a within-patient randomized trial. Clinical rehabilitation Feb 2019;33(2):233-240	Clinical Rehabilitation	Retrospective
366	Bertilsson 2016	Bertilsson AS.; Eriksson G.; Ekstam L.; Tham K.; Andersson M.; von Koch L.; Johansson U. A cluster randomized controlled trial of a client-centred, activities of daily living intervention for people with stroke: one year follow-up of caregivers. Clinical rehabilitation Aug 2016;30(8):765-75	Clinical Rehabilitation	Retrospective
367	Birinci 2019	Birinci T.; Razak Ozdincler A.; Altun S.; Kural C. A structured exercise programme combined with proprioceptive neuromuscular facilitation stretching or static stretching in posttraumatic stiffness of the elbow: a randomized controlled trial. Clinical rehabilitation Feb 2019;33(2):241-252	Clinical Rehabilitation	Retrospective
368	Bittencourt 2017	Bittencourt HS.; Cruz CG.; David BC.; Rodrigues E.; Abade CM.; Junior RA.; Carvalho VO.; Dos Reis FBF.; Gomes Neto M. Addition of non-invasive ventilatory support to combined aerobic and resistance training improves dyspnea and quality of life in heart failure patients: a randomized controlled trial. Clinical rehabilitation 11 2017;31(11):1508-1515	Clinical Rehabilitation	Retrospective

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370	Boidin 2019	Boidin M.; Gayda M.; Henri C.; Hayami D.; Trachsel LD.; Besnier F.; Lalongé J.; Juneau M.; Nigam A. Effects of interval training on risk markers for arrhythmic death: a randomized controlled trial. Clinical rehabilitation Aug 2019;33(8):1320-1330	Clinical Rehabilitation	Retrospective
371	Cabrera-Martos 2019	Cabrera-Martos I.; Ortiz-Rubio A.; Torres-Sánchez I.; Rodríguez-Torres J.; López-López L.; Valenza MC. A randomized controlled study of whether setting specific goals improves the effectiveness of therapy in people with Parkinson's disease. Clinical rehabilitation Mar 2019;33(3):465-472	Clinical Rehabilitation	Retrospective
372	Cacchio 2019	Cacchio A.; Di Carlo G.; Vincenza C.; De Blasis E. Effectiveness and safety of a mixture of diosmin, coumarin and arbutin (Linfadren®) in addition to conventional treatment in the management of patients with post-trauma/surgery persistent hand edema: a randomized controlled trial. Clinical rehabilitation 05 2019;33(5):904-912	Clinical Rehabilitation	Retrospective
373	Carlisi 2019	Carlisi E.; Cecini M.; Di Natali G.; Manzoni F.; Tinelli C.; Lisi C. Focused extracorporeal shock wave therapy for greater trochanteric pain syndrome with gluteal tendinopathy: a randomized controlled trial. Clinical rehabilitation Apr 2019;33(4):670-680	Clinical Rehabilitation	Retrospective
374	Chan 2018	Chan WN.; Tsang WW. The effect of Tai Chi training on the dual-tasking performance of stroke survivors: a randomized controlled trial. Clinical rehabilitation Aug 2018;32(8):1076-1085	Clinical Rehabilitation	Retrospective
375	Choi 2019	Choi Y.; Nam J.; Yang D.; Jung W.; Lee HR.; Kim SH. Effect of smartphone application-supported self-	Clinical Rehabilitation	Retrospective

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376	Christmas 2018	Christmas PM.; Sackley C.; Feltham MG.; Cummins C. A randomized controlled trial to compare two methods of constraint-induced movement therapy to improve functional ability in the affected upper limb in pre-school children with hemiplegic cerebral palsy: CATCH TRIAL. Clinical rehabilitation Jul 2018;32(7):909-918	Clinical Rehabilitation	Retrospective
377	Conesa-Segura 2019	Conesa-Segura E.; Reyes-Dominguez SB.; Ríos-Díaz J.; Ruiz-Pacheco MÁ.; Palazón-Carpe C.; Sánchez-Solís M. Prolonged slow expiration technique improves recovery from acute bronchiolitis in infants: FIBARRIX randomized controlled trial. Clinical rehabilitation Mar 2019;33(3):504-515	Clinical Rehabilitation	Retrospective
378	de Oliveira 2019	de Oliveira BFA.; Carvalho PRC.; de Souza Holanda AS.; Dos Santos RISB.; da Silva FAX.; Barros GWP.; de Albuquerque EC.; Dantas AT.; Cavalcanti NG.; Ranzolin A.; Duarte ALBP.; Marques CDL. Pilates method in the treatment of patients with Chikungunya fever: a randomized controlled trial. Clinical rehabilitation Oct 2019;33(10):1614-1624	Clinical Rehabilitation	Retrospective
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380	Do 2017	Do KH.; Chun MH.; Paik NJ.; Park YG.; Lee SU.; Kim MW.; Kim DK. Safety and efficacy of letibotulinumtoxinA(BOTULAX®) in treatment of post stroke upper limb spasticity: a randomized, double blind, multi-center, phase III clinical trial. Clinical rehabilitation Sep 2017;31(9):1179-1188	Clinical Rehabilitation	Retrospective
381	Döpp 2015	Döpp CM.; Graff MJ.; Teerenstra S.; Olde Rikkert MG.; Nijhuis-van der Sanden MW.; Vernooij-Dassen	Clinical Rehabilitation	Retrospective

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382	Erdinç-Gündüz 2019	Erdinç Gündüz N.; Erdem D.; Kızıl R.; Solmaz D.; Önen F.; Ellidokuz H.; Gülbahar S. Is dry heat treatment (fluidotherapy) effective in improving hand function in patients with rheumatoid arthritis? A randomized controlled trial. Clinical rehabilitation Mar 2019;33(3):485-493	Clinical Rehabilitation	Retrospective
383	Faulkner 2015	Faulkner J.; McGonigal G.; Woolley B.; Stoner L.; Wong L.; Lambrick D. A randomized controlled trial to assess the psychosocial effects of early exercise engagement in patients diagnosed with transient ischaemic attack and mild, non-disabling stroke. Clinical rehabilitation Aug 2015;29(8):783-94	Clinical Rehabilitation	Retrospective
384	Feng 2018	Feng Q.; Wang M.; Zhang Y.; Zhou Y. The effect of a corrective functional exercise program on postural thoracic kyphosis in teenagers: a randomized controlled trial. Clinical rehabilitation Jan 2018;32(1):48-56	Clinical Rehabilitation	Retrospective
385	Fujimaki 2017	Fujimaki Y.; Tsunoda K.; Kobayashi R.; Tonghyo C.; Tanaka F.; Kuroda H.; Numata T.; Ishii T.; Kuroda R.; Masuda S.; Hashimoto S.; Misawa H.; Shindo N.; Mori T.; Mori H.; Uchiyama N.; Kamei Y.; Tanaka M.; Hamaya H.; Funatsuki S.; Usui S.; Ito I.; Hamada K.; Shindo A.; Tokumaru Y.; Morita Y.; Ueha R.; Nito T.; Kikuta S.; Sekimoto S.; Kondo K.; Sakamoto T.; Itoh K.; Yamasoba T.; Matsumoto S.; . Independent exercise for glottal incompetence to improve vocal problems and prevent aspiration pneumonia in the elderly: a randomized controlled trial. Clinical rehabilitation Aug 2017;31(8):1049-1056	Clinical Rehabilitation	Retrospective
386	Guillén-Solà 2017	Guillén-Solà A.; Messagi Sartor M.; Bofill Soler N.; Duarte E.; Barrera MC.; Marco E. Respiratory muscle strength training and neuromuscular electrical stimulation in subacute dysphagic stroke patients: a randomized controlled	Clinical Rehabilitation	Retrospective

		trial. Clinical rehabilitation Jun 2017;31(6):761-771		
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388	Jørgensen 2017	Jørgensen PB.; Bogh SB.; Kierkegaard S.; Sørensen H.; Odgaard A.; Søballe K.; Mechlenburg I. The efficacy of early initiated, supervised, progressive resistance training compared to unsupervised, home-based exercise after unicompartmental knee arthroplasty: a single-blinded randomized controlled trial. Clinical rehabilitation Jan 2017;31(1):61-70	Clinical Rehabilitation	Retrospective
389	Kadı 2019	Kadı MR.; Hepgüler S.; Atamaz FC.; Dede E.; Aydoğdu S.; Aktuglu K.; Ozkayın N.; Ozturk C. Is interferential current effective in the management of pain, range of motion, and edema following total knee arthroplasty surgery? A randomized double-blind controlled trial. Clinical rehabilitation Jun 2019;33(6):1027-1034	Clinical Rehabilitation	Retrospective
390	Kal 2019	Kal E.; Houdijk H.; van der Kamp J.; Verhoef M.; Prosée R.; Groet E.; Winters M.; van Bennekom C.; Scherder E. Are the effects of internal focus instructions different from external focus instructions given during balance training in stroke patients? A double-blind randomized controlled trial. Clinical rehabilitation Feb 2019;33(2):207-221	Clinical Rehabilitation	Retrospective
391	Kanai 2018	Kanai M.; Izawa KP.; Kobayashi M.; Onishi A.; Kubo H.; Nozoe M.; Mase K.; Shimada S. Effect of accelerometer-based feedback on physical activity in hospitalized patients with ischemic stroke: a randomized controlled trial. Clinical rehabilitation Aug 2018;32(8):1047-1056	Clinical Rehabilitation	Retrospective
392	Khan 2019	Khan F.; Rathore C.; Kate M.; Joy J.; Zachariah G.; Vincent PC.; Varma RP.; Radhakrishnan K. The comparative efficacy of theta burst stimulation or	Clinical Rehabilitation	Retrospective

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394	Knox 2018	Knox M.; Stewart A.; Richards CL. Six hours of task-oriented training optimizes walking competency post stroke: a randomized controlled trial in the public health-care system of South Africa. Clinical rehabilitation Aug 2018;32(8):1057-1068	Clinical Rehabilitation	Retrospective
395	Kuptniratsaikul 2019	Kuptniratsaikul V.; Kittichaikarn C.; Suntornpiyapan P.; Kovintaset K.; Inthibal S. Is four-week underwater treadmill exercise regimen compared to home exercise efficacious for pain relief and functional improvement in obese patients with knee osteoarthritis? A randomized controlled trial. Clinical rehabilitation Jan 2019;33(1):85-93	Clinical Rehabilitation	Retrospective
396	Langoni 2019	Langoni CDS.; Resende TL.; Barcellos AB.; Cecchele B.; da Rosa JN.; Knob MS.; Silva TDN.; Diogo TS.; da Silva IG.; Schwanke CHA. The effect of group exercises on balance, mobility, and depressive symptoms in older adults with mild cognitive impairment: a randomized controlled trial. Clinical rehabilitation Mar 2019;33(3):439-449	Clinical Rehabilitation	Retrospective
397	Lauche 2016	Lauche R.; Schuth M.; Schwickert M.; Lüdtke R.; Musial F.; Michalsen A.; Dobos G.; Choi KE. Efficacy of the Alexander Technique in treating chronic non-specific neck pain: a randomized controlled trial. Clinical rehabilitation Mar 2016;30(3):247-58	Clinical Rehabilitation	Retrospective
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399	Lindhardt 2019	Lindhardt T.; Loevgreen SM.; Bang B.; Bigum C.; Klausen TW. A targeted assessment and intervention at the time of discharge reduced the risk of readmissions for short-term hospitalized older patients: a randomized controlled study. Clinical rehabilitation Sep 2019;33(9):1431-1444	Clinical Rehabilitation	Retrospective
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405	Mayo 2015	Mayo NE.; Anderson S.; Barclay R.; Cameron JI.; Desrosiers J.; Eng JJ.; Huijbregts M.; Kagan A.; MacKay-Lyons M.; Moriello C.; Richards CL.; Salbach NM.; Scott SC.; Teasell R.; Bayley M. Getting on with the rest of your life following stroke: a randomized trial of a complex intervention aimed at enhancing life participation post stroke. Clinical rehabilitation Dec 2015;29(12):1198-211	Clinical Rehabilitation	Retrospective
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407	Mitrovic 2017	Mitrovic D.; Davidovic M.; Erceg P.; Marinkovic J. The effectiveness of supplementary arm and upper body exercises following total hip arthroplasty for osteoarthritis in the elderly: a randomized controlled trial. Clinical rehabilitation Jul 2017;31(7):881-890	Clinical Rehabilitation	Retrospective
408	Monticone 2018	Monticone M.; Ambrosini E.; Brunati R.; Capone A.; Pagliari G.; Secci C.; Zatti G.; Ferrante S. How balance task-specific training contributes to improving physical function in older subjects undergoing rehabilitation following hip fracture: a randomized controlled trial. Clinical rehabilitation Mar 2018;32(3):340-351	Clinical Rehabilitation	Retrospective
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410	Mosalanejad 2018	Mosalanejad F.; Afrasiabifar A.; Zoladl M. Investigating the combined effect of pelvic floor muscle exercise and mindfulness on sexual function in women with multiple sclerosis: a randomized controlled trial.	Clinical Rehabilitation	Retrospective

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413	Park 2018	Park JH.; Park JH. Does cognition-specific computer training have better clinical outcomes than non-specific computer training? A single-blind, randomized controlled trial. Clinical rehabilitation Feb 2018;32(2):213-222	Clinical Rehabilitation	Retrospective
414	Pehlivan 2018	Pehlivan E.; Mutluay F.; Balcı A.; Kılıç L. The effects of inspiratory muscle training on exercise capacity, dyspnea and respiratory functions in lung transplantation candidates: a randomized controlled trial. Clinical rehabilitation Oct 2018;32(10):1328-1339	Clinical Rehabilitation	Retrospective
415	Pujol-Blaya 2019	Pujol-Blaya V.; Salinas-Huertas S.; Catasús ML.; Pascual T.; Belmonte R. Effectiveness of a precast adjustable compression system compared to multilayered compression bandages in the treatment of breast cancer-related lymphoedema: a randomized, single-blind clinical trial. Clinical rehabilitation Apr 2019;33(4):631-641	Clinical Rehabilitation	Retrospective
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418	Ronzi 2017	Ronzi Y.; Roche-Leboucher G.; Bègue C.; Dubus V.; Bontoux L.; Roquelaure Y.; Richard I.; Petit A. Efficiency of three treatment strategies on occupational and quality of life impairments for chronic low back pain patients: is the multidisciplinary approach the key feature to success? Clinical rehabilitation Oct 2017;31(10):1364-1373	Clinical Rehabilitation	Retrospective
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420	Rostami 2017	Rostami HR.; Akbarfahimi M.; Hassani Mehraban A.; Akbarinia AR.; Samani S. Occupation-based intervention versus rote exercise in modified constraint-induced movement therapy for patients with median and ulnar nerve injuries: a randomized controlled trial. Clinical rehabilitation Aug 2017;31(8):1087-1097	Clinical Rehabilitation	Retrospective
421	Sangtong 2019	Sangtong K.; Chupinijrobkob C.; Putthakumnerd W.; Kuptniratsaikul V. Does adding transcutaneous electrical nerve stimulation to therapeutic ultrasound affect pain or function in people with osteoarthritis of the knee? A randomized controlled trial. Clinical rehabilitation Jul 2019;33(7):1197-1205	Clinical Rehabilitation	Retrospective
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431	Xu 2017	Xu Q.; Guo F.; Salem HMA.; Chen H.; Huang X. Effects of mirror therapy combined with neuromuscular electrical stimulation on motor recovery of lower limbs and walking ability of patients with stroke: a randomized controlled study. Clinical rehabilitation Dec 2017;31(12):1583-1591	Clinical Rehabilitation	Retrospective
432	Yang 2019	Yang JW.; Shi GX.; Zhang S.; Tu JF.; Wang LQ.; Yan CQ.; Lin LL.; Liu BZ.; Wang J.; Sun SF.; Yang BF.; Wu LY.; Tan C.; Chen S.; Zhang ZJ.; Fisher M.; Liu CZ. Effectiveness of acupuncture for vascular cognitive impairment no dementia: a randomized controlled trial. Clinical rehabilitation Apr 2019;33(4):642-652	Clinical Rehabilitation	Retrospective
433	Yang 2017	Yang NY.; Fong KN.; Li-Tsang CW.; Zhou D. Effects of repetitive transcranial magnetic stimulation combined with sensory cueing on unilateral neglect in subacute patients with right hemispheric stroke: a randomized controlled study. Clinical rehabilitation Sep 2017;31(9):1154-1163	Clinical Rehabilitation	Retrospective
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435	Yoshida 2019	Yoshida I.; Hirao K.; Kobayashi R. The effect on subjective quality of life of occupational therapy based on adjusting the challenge-skill balance: a randomized controlled trial. Clinical rehabilitation Nov 2019;33(11):1732-1746	Clinical Rehabilitation	Retrospective
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438	Abdel-Aal 2020	Abdel-Aal NM; Elgohary HM; Soliman ES; Waked IS Effects of kinesiotaping and exercise program on patients with obesity-induced coccydynia: a randomized, double-blinded, sham-controlled clinical trial. Clin Rehabil Apr 2020;34(4):471-479	Clinical Rehabilitation	Retrospective
439	Ahrary 2020	Ahrary Z; Khosravan S; Alami A; Najafi Nesheli M The effects of a supportive-educational intervention on women with type 2 diabetes and diabetic peripheral neuropathy: a randomized controlled trial. Clin Rehabil Jun 2020;34(6):794-802	Clinical Rehabilitation	Retrospective
440	Alfredo 2020	Alfredo PP; Junior WS; Casarotto RA Efficacy of continuous and pulsed therapeutic ultrasound combined with exercises for knee osteoarthritis: a randomized controlled trial. Clin Rehabil Apr 2020;34(4):480-490	Clinical Rehabilitation	Retrospective
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464	Bang 2015	Bang DH.; Shin WS.; Choi SJ. The effects of modified constraint-induced movement therapy combined with trunk restraint in subacute stroke: a double-blinded randomized controlled trial. Clinical rehabilitation Jun 2015;29(6):561-9	Clinical Rehabilitation	No registration
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554	Beckwée 2017	Beckwée D.; Vaes P.; Raeymaeckers S.; Shahabpour M.; Scheerlinck T.; Bautmans I. Exercise in knee osteoarthritis: do treatment outcomes relate to bone marrow lesions? A randomized trial. Disability and rehabilitation 09 2017;39(18):1847-1855	Disability and Rehabilitation	No registration
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601	O'Neil 2018	O'Neill B.; Best C.; O'Neill L.; Ramos SDS.; Gillespie A. Efficacy of a Micro-Prompting Technology in Reducing Support Needed by People With Severe Acquired Brain Injury in Activities of Daily Living: A Randomized Control Trial. The Journal of head trauma rehabilitation ;33(5):E33-E41	Journal of Head Trauma Rehabilitation	No registration
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642	Aboulafia-Brakha 2016	Aboulafia-Brakha T.; Ptak R. Effects of group psychotherapy on anger management following acquired brain injury. Brain injury 2016;30(9):1121-30	Brain Injury	No registration
643	Brown 2015	Brown AW.; Moessner AM.; Bergquist TF.; Kendall KS.; Diehl NN.; Mandrekar J. A randomized practical behavioural trial of curriculum-based advocacy training for individuals	Brain Injury	No registration

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669	Nick 2016	Nick N.; Petramfar P.; Ghodsbin F.; Keshavarzi S.; Jahanbin I. The Effect of Yoga on Balance and Fear of Falling in Older Adults. PM & R : the journal of injury, function, and rehabilitation Feb 2016;8(2):145-51	PM & R	Retrospective
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676	Mateos-Toset 2016	Mateos-Toset S.; Cabrera-Martos I.; Torres-Sánchez I.; Ortiz-Rubio A.; González-Jiménez E.; Valenza MC. Effects of a Single Hand-Exercise Session on Manual Dexterity and Strength in Persons with Parkinson Disease: A Randomized Controlled Trial. PM & R : the journal of injury, function, and rehabilitation Feb 2016;8(2):115-22	PM & R	No registration
677	Moriarty 2016	Moriarty H.; Winter L.; Robinson K.; Piersol CV.; Vause-Earland T.; Iacovone DB.; Newhart B.; True G.; Fishman D.; Hodgson N.; Gitlin LN. A Randomized Controlled Trial to Evaluate the Veterans' In-home Program for Military Veterans With Traumatic Brain Injury and Their Families: Report on Impact for Family Members. PM & R : the journal of injury, function, and rehabilitation 06 2016;8(6):495-509	PM & R	No registration
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771	Espí-López 2017	Espí-López GV.; Serra-Añó P.; Vicent-Ferrando J.; Sánchez-Moreno-Giner M.; Arias-Buría JL.; Cleland J.; Fernández-de-Las-Peñas C. Effectiveness of Inclusion of Dry Needling in a Multimodal Therapy Program for Patellofemoral Pain: A Randomized Parallel-Group Trial. The Journal of orthopaedic and sports physical therapy Jun 2017;47(6):392-401	JOSPT	Retrospective
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786	Bakhshi 2015	Bakhshi S.; Batra A.; Biswas B.; Dhawan D.; Paul R.; Sreenivas V. Aprepitant as an add-on therapy in children receiving highly emetogenic chemotherapy: a randomized, double-blind, placebo-controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2015;23(11):3229-37	Supportive Care in Cancer	Prospective
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793	Furukawa 2015	Furukawa N.; Kanayama S.; Tanase Y.; Ito F. Palonosetron in combination with 1-day versus 3-day dexamethasone to prevent nausea and vomiting in patients receiving paclitaxel and carboplatin. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2015;23(11):3317-22	Supportive Care in Cancer	Prospective
794	Furzer 2016	Furzer BJ.; Ackland TR.; Wallman KE.; Petterson AS.; Gordon SM.; Wright KE.; Joske DJ.	Supportive Care in Cancer	Prospective

		A randomised controlled trial comparing the effects of a 12-week supervised exercise versus usual care on outcomes in haematological cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1697-707		
795	Herrstedt 2019	Herrstedt J.; Summers Y.; Jordan K.; von Pawel J.; Jakobsen AH.; Ewertz M.; Chan S.; Naik JD.; Karthaus M.; Dubey S.; Davis R.; Fox GM. Amisulpride prevents nausea and vomiting associated with highly emetogenic chemotherapy: a randomised, double-blind, placebo-controlled, dose-ranging trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2019;27(7):2699-2705	Supportive Care in Cancer	Prospective
796	Hwang 2016	Hwang IG.; Kang JH.; Oh SY.; Lee S.; Kim SH.; Song KH.; Son C.; Park MJ.; Kang MH.; Kim HG.; Lee J.; Park YS.; Sun JM.; Kim HJ.; Kim CK.; Yi SY.; Jang JS.; Park K.; Kim HJ. Phase II trial of epidermal growth factor ointment for patients with Erlotinib-related skin effects. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2016;24(1):301-309	Supportive Care in Cancer	Prospective
797	Iwase 2016	Iwase S.; Kawaguchi T.; Yotsumoto D.; Doi T.; Miyara K.; Odagiri H.; Kitamura K.; Ariyoshi K.; Miyaji T.; Ishiki H.; Inoue K.; Tsutsumi C.; Sagara Y.; Yamaguchi T. Efficacy and safety of an amino acid jelly containing coenzyme Q10 and L-carnitine in controlling fatigue in breast cancer patients receiving chemotherapy: a multi-institutional, randomized, exploratory trial (JORTC-CAM01). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):637-646	Supportive Care in Cancer	Prospective
798	Kim 2017	Kim JE.; Jang JS.; Kim JW.; Sung YL.; Cho CH.; Lee MA.; Kim DJ.; Ahn MJ.; Lee KY.; Sym SJ.; Lim MC.; Jung H.; Cho EK.; Min KW. Efficacy and safety of aprepitant for the prevention of chemotherapy-induced nausea and vomiting during the first cycle of moderately emetogenic chemotherapy in	Supportive Care in Cancer	Prospective

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799	Kirshner 2018	Kirshner JJ.; McDonald MC.; Kruter F.; Guinigundo AS.; Vanni L.; Maxwell CL.; Reiner M.; Upchurch TE.; Garcia J.; Morrow PK. NOLAN: a randomized, phase 2 study to estimate the effect of prophylactic naproxen or loratadine vs no prophylactic treatment on bone pain in patients with early-stage breast cancer receiving chemotherapy and pegfilgrastim. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2018;26(4):1323-1334	Supportive Care in Cancer	Prospective
800	Komen 2016	Komen MM.; Breed WP.; Smorenburg CH.; van der Ploeg T.; Goey SH.; van der Hoeven JJ.; Nortier JW.; van den Hurk CJ. Results of 20- versus 45-min post-infusion scalp cooling time in the prevention of docetaxel-induced alopecia. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 06 2016;24(6):2735-41	Supportive Care in Cancer	Prospective
801	Kouchaki 2018	Kouchaki B.; Janbabai G.; Alipour A.; Ala S.; Borhani S.; Salehifar E. Randomized double-blind clinical trial of combined treatment with megestrol acetate plus celecoxib versus megestrol acetate alone in cachexia-anorexia syndrome induced by GI cancers. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2018;26(7):2479-2489	Supportive Care in Cancer	Prospective
802	Lund 2020	Lund L.; Ross L.; Petersen MA.; Sengelov L.; Groenvold M. Improving information to caregivers of cancer patients: the Herlev Hospital Empowerment of Relatives through More and Earlier information Supply (HERMES) randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2020;28(2):939-950	Supportive Care in Cancer	Prospective

803	Luo 2019	Luo Z.; Wang L.; Sikorskii A.; Wyatt G. Healthcare service utilization and work-related productivity in reflexology intervention for advanced breast cancer women. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2019;27(8):2837-2847	Supportive Care in Cancer	Prospective
804	Rodin 2020	Rodin G.; Malfitano C.; Rydall A.; Schimmer A.; Marmar CM.; Mah K.; Lo C.; Nissim R.; Zimmermann C. Emotion And Symptom-focused Engagement (EASE): a randomized phase II trial of an integrated psychological and palliative care intervention for patients with acute leukemia. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2020;28(1):163-176	Supportive Care in Cancer	Prospective
805	Shacham Shmueli 2019	Shacham Shmueli E.; Geva R.; Yarom N.; Hubert A.; Keynan R.; Kedem TH.; Eini M.; Tamarkin D.; Shirvan M. Topical doxycycline foam 4% for prophylactic management of epidermal growth factor receptor inhibitor skin toxicity: an exploratory phase 2, randomized, double-blind clinical study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2019;27(8):3027-3033	Supportive Care in Cancer	Prospective
806	Shaw 2016	Shaw JM.; Young JM.; Butow PN.; Badgery-Parker T.; Durcinoska I.; Harrison JD.; Davidson PM.; Martin D.; Sandroussi C.; Hollands M.; Joseph D.; Das A.; Lam V.; Johnston E.; Solomon MJ. Improving psychosocial outcomes for caregivers of people with poor prognosis gastrointestinal cancers: a randomized controlled trial (Family Connect). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):585-595	Supportive Care in Cancer	Prospective
807	Takeuchi 2019	Takeuchi Y.; Arai Y.; Sone M.; Sugawara S.; Aramaki T.; Sato R.; Kichikawa K.; Tanaka T.; Morishita H.; Ito T.; Yamakado K.; Baba Y.; Kobayashi T. Evaluation of stent placement for vena cava syndrome:	Supportive Care in Cancer	Prospective

		phase II trial and phase III randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2019;27(3):1081-1088		
808	Thamlikitkul 2017	Thamlikitkul L.; Srimuninnimit V.; Akewanlop C.; Ithimakin S.; Techawathanawanna S.; Korphaisarn K.; Chantharasamee J.; Danchaivijitr P.; Soparattanapaisarn N. Efficacy of ginger for prophylaxis of chemotherapy-induced nausea and vomiting in breast cancer patients receiving adriamycin-cyclophosphamide regimen: a randomized, double-blind, placebo-controlled, crossover study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 02 2017;25(2):459-464	Supportive Care in Cancer	Prospective
809	Turner 2019	Turner J.; Yates P.; Kenny L.; Gordon LG.; Burmeister B.; Hughes BGM.; McCarthy AL.; Perry C.; Chan RJ.; Paviour A.; Skerman H.; Batstone M.; Mackenzie L. The ENHANCES study: a randomised controlled trial of a nurse-led survivorship intervention for patients treated for head and neck cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Dec 2019;27(12):4627-4637	Supportive Care in Cancer	Prospective
810	Armbruster 2020	Armbruster, S. D., Fellman, B. M., Jhingran, A., Eifel, P. J., Klopp, A. H., Coleman, R. L., … Frumovitz, M. (2020). A phase III study of transdermal granisetron versus oral ondansetron for women with gynecologic cancers receiving pelvic chemoradiation. Supportive Care in Cancer. https://doi.org/10.1007/s00520-020-05484-z	Supportive Care in Cancer	Prospective
811	Barton 2020	Barton DL; Atherton PJ; Satele DV; Qin R; Dakhil S; Pipe T; Hobday T; Fee-Schroeder K; Loprinzi CL A randomized phase II trial evaluating two non-pharmacologic interventions in cancer survivors for the treatment of sleep-wake disturbances: NCCTG N07C4 (Alliance). Support Care Cancer Apr 2020;():	Supportive Care in Cancer	Prospective
812	De Groef 2017	De Groef A.; Van Kampen M.; Verlvoesem N.;	Supportive Care in	Prospective

		Dieltjens E.; Vos L.; De Vrieze T.; Christiaens MR.; Neven P.; Geraerts I.; Devoogdt N. Effect of myofascial techniques for treatment of upper limb dysfunctions in breast cancer survivors: randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 07 2017;25(7):2119-2127	Cancer	
813	Peoples 2019	Peoples AR.; Culakova E.; Heckler CE.; Shayne M.; O'Connor TL.; Kirshner JJ.; Bushunow PW.; Morrow GR.; Roscoe JA. Positive effects of acupressure bands combined with relaxation music/instructions on patients most at risk for chemotherapy-induced nausea. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Dec 2019;27(12):4597-4605	Supportive Care in Cancer	Prospective
814	Beatty 2019	Beatty L; Kemp E; Coll JR; Turner J; Butow P; Milne D; Yates P; Lambert S; Wootten A; Yip D; Koczwara B Finding My Way: results of a multicentre RCT evaluating a web-based self-guided psychosocial intervention for newly diagnosed cancer survivors. Support Care Cancer Jul 2019;27(7):2533-2544	Supportive Care in Cancer	Prospective
815	Cathcart-Rake 2020	Cathcart-Rake E; Novotny P; Leon-Ferre R; Le-Rademacher J; Storrick EM; Adjei AA; Terstriep S; Glaser R; Giuliano A; Mitchell WR; Page S; Austin C; Deming RL; Ferreira MA; Lafky JM; Birrell SN; Loprinzi CL A randomized, double-blind, placebo-controlled trial of testosterone for treatment of postmenopausal women with aromatase inhibitor-induced arthralgias: Alliance study A221102. Support Care Cancer May 2020;():	Supportive Care in Cancer	Prospective
816	FeyzioğluÖ 2020	Feyzioğlu, Ö., Dinçer, S., Akan, A., & Algun, Z. C. (2020). Is Xbox 360 Kinect-based virtual reality training as effective as standard physiotherapy in patients undergoing breast cancer surgery? Supportive Care in Cancer. https://doi.org/10.1007/s00520-019-05287-x	Supportive Care in Cancer	Prospective
817	Hamaguchi 2019	Hamaguchi R; Tsuchiya T; Miyata G; Sato T;	Supportive Care in	Prospective

		Takahashi K; Miura K; Oshio H; Ohori H; Ariyoshi K; Oyamada S; Iwase S Efficacy of oral administration of cystine and theanine in colorectal cancer patients undergoing capecitabine-based adjuvant chemotherapy after surgery: a multi-institutional, randomized, double-blinded, placebo-controlled, phase II trial (JORTC-CAM03).	Cancer	
818	Hawley 2020	Hawley P; MacKenzie H; Gobbo M PEG vs. sennosides for opioid-induced constipation in cancer care. Support Care Cancer Apr 2020;28(4):1775-1782	Supportive Care in Cancer	Prospective
819	Nuchit 2020	Nuchit S; Lam-Ubol A; Paemuang W; Talungchit S; Chokchaitam O; Mungkung OO; Pongcharoen T; Trachootham D Alleviation of dry mouth by saliva substitutes improved swallowing ability and clinical nutritional status of post-radiotherapy head and neck cancer patients: a randomized controlled trial. Support Care Cancer Jun 2020;28(6):2817-2828	Supportive Care in Cancer	Prospective
820	Ridner 2020	Ridner, S. H., Dietrich, M. S., Deng, J., Ettema, S. L., & Murphy, B. (2020). Advanced pneumatic compression for treatment of lymphedema of the head and neck: a randomized wait-list controlled trial. Supportive Care in Cancer. https://doi.org/10.1007/s00520-020-05540-8	Supportive Care in Cancer	Prospective
821	Tan 2020	Tan, B. K., Chua, S. S., Chen, L. C., Chang, K. M., Balashanker, S., & Bee, P. C. (2020). Efficacy of a medication management service in improving adherence to tyrosine kinase inhibitors and clinical outcomes of patients with chronic myeloid leukaemia: a randomised controlled trial. Supportive Care in Cancer. https://doi.org/10.1007/s00520-019-05133-0	Supportive Care in Cancer	Prospective
822	Uthaipaisanwong 2019	Uthaipaisanwong A; Oranratanaphan S; Musigavong N Effects of ginger adjunct to the standard prophylaxis on reducing carboplatin and paclitaxel-induced nausea vomiting: a randomized controlled study. Support Care Cancer Dec 2019;():	Supportive Care in Cancer	Prospective
823	Bargı 2016	Bargı G.; Güçlü MB.; Arıbaş Z.; Akı ŞZ.; Sucak GT. Inspiratory muscle training in allogeneic	Supportive Care in Cancer	Retrospective

		hematopoietic stem cell transplantation recipients: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):647-659		
824	Beatty 2016	Beatty L.; Koczwara B.; Wade T. Evaluating the efficacy of a self-guided Web-based CBT intervention for reducing cancer-distress: a randomised controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1043-51	Supportive Care in Cancer	Retrospective
825	Dóro 2017	Dóro CA; Neto JZ; Cunha R; Dóro MP Music therapy improves the mood of patients undergoing hematopoietic stem cells transplantation (controlled randomized study). Support Care Cancer Mar 2017;25(3):1013-1018	Supportive Care in Cancer	Retrospective
826	Foster 2016	Foster C.; Grimmett C.; May CM.; Ewings S.; Myall M.; Hulme C.; Smith PW.; Powers C.; Calman L.; Armes J.; Breckons M.; Corner J.; Fenlon D.; Batehup L.; Lennan E.; R May C.; Morris C.; Neylon A.; Ream E.; Turner L.; Yardley L.; Richardson A. A web-based intervention (RESTORE) to support self-management of cancer-related fatigue following primary cancer treatment: a multi-centre proof of concept randomised controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 06 2016;24(6):2445-53	Supportive Care in Cancer	Retrospective
827	Gokal 2016	Gokal K.; Wallis D.; Ahmed S.; Boiangiu I.; Kancherla K.; Munir F. Effects of a self-managed home-based walking intervention on psychosocial health outcomes for breast cancer patients receiving chemotherapy: a randomised controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1139-66	Supportive Care in Cancer	Retrospective
828	Gunn 2020	Gunn GB.; Mendoza TR.; Garden AS.; Wang XS.; Shi Q.; Morrison WH.; Frank SJ.; Phan J.; Fuller CD.; Chambers MS.; Hanna EY.; Lu C.; Rosenthal DI.;	Supportive Care in Cancer	Retrospective

		Cleeland CS. Minocycline for symptom reduction during radiation therapy for head and neck cancer: a randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2020;28(1):261-269		
829	Harorani 2020	Harorani M.; Noruzi Zamenjani M.; Golitaleb M.; Davodabady F.; Zahedi S.; Jadidi A.; Rezaei M. Effects of relaxation on self-esteem of patients with cancer: a randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2020;28(1):405-411	Supportive Care in Cancer	Retrospective
830	Heudel 2019	Heudel PE.; Van Praagh-Doreau I.; Duvert B.; Cauvin I.; Hardy-Bessard AC.; Jacquin JP.; Stefani L.; Vincent L.; Dramais D.; Guastalla JP.; Blanc E.; Belleville A.; Lavergne E.; Pérol D. Does a homeopathic medicine reduce hot flushes induced by adjuvant endocrine therapy in localized breast cancer patients? A multicenter randomized placebo-controlled phase III trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2019;27(5):1879-1889	Supportive Care in Cancer	Retrospective
831	Keshavarzi 2019	Keshavarzi Z.; Janghorban R.; Alipour S.; Tahmasebi S.; Jokar A. The effect of vitamin D and E vaginal suppositories on tamoxifen-induced vaginal atrophy in women with breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2019;27(4):1325-1334	Supportive Care in Cancer	Retrospective
832	Kim 2015	Kim JE.; Hong YS.; Lee JL.; Kim KP.; Park SJ.; Sym SJ.; Shin DB.; Lee J.; Park YS.; Ahn JS.; Kim TW. A randomized study of the efficacy and safety of transdermal granisetron in the control of nausea and vomiting induced by moderately emetogenic chemotherapy in Korean patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2015;23(6):1769-77	Supportive Care in Cancer	Retrospective

833	Lambertini 2016	Lambertini M.; Bruzzi P.; Poggio F.; Pastorino S.; Gardin G.; Clavarezza M.; Bighin C.; Pronzato P.; Del Mastro L. Pegfilgrastim administration after 24 or 72 or 96 h to allow dose-dense anthracycline- and taxane-based chemotherapy in breast cancer patients: a single-center experience within the GIM2 randomized phase III trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1285-94	Supportive Care in Cancer	Retrospective
834	Lee 2016	Lee KH.; Kim JY.; Lee MH.; Han HS.; Lim JH.; Park KU.; Park IH.; Cho EK.; Yoon SY.; Kim JH.; Choi IS.; Park JH.; Choi YJ.; Kim HJ.; Jung KH.; Kim SY.; Oh DY.; Im SA. A randomized, multicenter, phase II/III study to determine the optimal dose and to evaluate the efficacy and safety of pegteograstim (GCPGC) on chemotherapy-induced neutropenia compared to pegfilgrastim in breast cancer patients: KCSG PC10-09. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1709-17	Supportive Care in Cancer	Retrospective
835	Li 2018	Li J.; Li X.; Tong X.; Liu J.; Huang B.; Chen M.; Kuang L.; Zhou Z.; Xu D. Investigation of the optimal duration of bed rest in the supine position to reduce complications after lumbar puncture combined with intrathecal chemotherapy: a multicenter prospective randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2018;26(9):2995-3002	Supportive Care in Cancer	Retrospective
836	Lindblad 2016	Lindblad K.; Bergkvist L.; Johansson AC. Evaluation of the treatment of chronic chemotherapy-induced peripheral neuropathy using long-wave diathermy and interferential currents: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 06 2016;24(6):2523-31	Supportive Care in Cancer	Retrospective

837	Noronha 2016	Noronha V.; Joshi A.; Marfatia S.; Patil V.; Juvekar S.; Arya S.; Banavali S.; Prabhash K. Health-related quality of life in patients with metastatic, relapsed, or inoperable squamous cell carcinoma of the head and neck in India. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1595-602	Supportive Care in Cancer	Retrospective
838	Park 2016	Park CL.; Cho D.; Salner AL.; Dornelas E. A randomized controlled trial of two mail-based lifestyle interventions for breast cancer survivors. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 07 2016;24(7):3037-46	Supportive Care in Cancer	Retrospective
839	Peoples 2016	Peoples AR.; Bushunow PW.; Garland SN.; Heckler CE.; Roscoe JA.; Peppone LL.; Dudgeon DJ.; Kirshner JJ.; Banerjee TK.; Hopkins JO.; Dakhil SR.; Flannery MA.; Morrow GR. Buspirone for management of dyspnea in cancer patients receiving chemotherapy: a randomized placebo-controlled URCC CCOP study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1339-47	Supportive Care in Cancer	Retrospective
840	Ponraj 2018	Ponraj M.; Dubashi B.; Harish BH.; Kayal S.; Cyriac SL.; Pattnaik J.; Ranjith K.; Pillai US.; Jadhav N.; Matta KK.; Singh J.; Jaffa E.; Prakash B. Cefepime vs. cefoperazone/sulbactam in combination with amikacin as empirical antibiotic therapy in febrile neutropenia. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2018;26(11):3899-3908	Supportive Care in Cancer	Retrospective
841	Rapoport 2015	Rapoport B.; Chua D.; Poma A.; Arora S.; Wang Y.; Fein LE. Study of rolapitant, a novel, long-acting, NK-1 receptor antagonist, for the prevention of chemotherapy-induced nausea and vomiting (CINV) due to highly emetogenic chemotherapy (HEC). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in	Supportive Care in Cancer	Retrospective

		Cancer Nov 2015;23(11):3281-8		
842	Rha 2020	Rha SY.; Nam JM.; Lee J. Development and evaluation of the Cancer Symptom Management System: Symptom Management Improves your LifE (SMILE)-a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2020;28(2):713-723	Supportive Care in Cancer	Retrospective
843	Scarpi 2019	Scarpi E.; Dall'Agata M.; Zagonel V.; Gamucci T.; Bertè R.; Sansoni E.; Amaducci E.; Broglia CM.; Alquati S.; Garetto F.; Schiavon S.; Quadrini S.; Orlandi E.; Casadei Gardini A.; Ruscelli S.; Ferrari D.; Pino MS.; Bortolussi R.; Negri F.; Stragliotto S.; Narducci F.; Valgiusti M.; Farolfi A.; Nanni O.; Rossi R.; Maltoni M.; . Systematic vs. on-demand early palliative care in gastric cancer patients: a randomized clinical trial assessing patient and healthcare service outcomes. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2019;27(7):2425-2434	Supportive Care in Cancer	Retrospective
844	Serra-Añó 2019	Serra-Añó P.; Inglés M.; Bou-Catalá C.; Iraola-Lliso A.; Espí-López GV. Effectiveness of myofascial release after breast cancer surgery in women undergoing conservative surgery and radiotherapy: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jul 2019;27(7):2633-2641	Supportive Care in Cancer	Retrospective
845	Zhao 2018	Zhao F.; Cella D.; Manola J.; DiPaola RS.; Wagner LI.; Haas NSB. Fatigue among patients with renal cell carcinoma receiving adjuvant sunitinib or sorafenib: patient-reported outcomes of ECOG-ACRIN E2805 trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2018;26(6):1889-1895	Supportive Care in Cancer	Retrospective
846	Singer 2018	Singer S.; Roick J.; Meixensberger J.; Schiefke F.; Briest S.; Dietz A.; Papsdorf K.; Mössner J.; Berg T.; Stolzenburg JU.; Niederwieser D.; Keller A.; Kersting	Supportive Care in Cancer	Retrospective

		A.; Danker H. The effects of multi-disciplinary psycho-social care on socio-economic problems in cancer patients: a cluster-randomized trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2018;26(6):1851-1859		
847	Smith 2019	Smith SK.; MacDermott K.; Amarasekara S.; Pan W.; Mayer D.; Hockenberry M. Reimagine: a randomized controlled trial of an online, symptom self-management curriculum among breast cancer survivors. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2019;27(5):1775-1781	Supportive Care in Cancer	Retrospective
848	Stuecher 2019	Stuecher K.; Bolling C.; Vogt L.; Niederer D.; Schmidt K.; Dignaß A.; Banzer W. Exercise improves functional capacity and lean body mass in patients with gastrointestinal cancer during chemotherapy: a single-blind RCT. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2019;27(6):2159-2169	Supportive Care in Cancer	Retrospective
849	Swisher 2015	Swisher AK.; Abraham J.; Bonner D.; Gilleland D.; Hobbs G.; Kurian S.; Yanosik MA.; Vona-Davis L. Exercise and dietary advice intervention for survivors of triple-negative breast cancer: effects on body fat, physical function, quality of life, and adipokine profile. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2015;23(10):2995-3003	Supportive Care in Cancer	Retrospective
850	Takayama 2016	Takayama K.; Katakami N.; Yokoyama T.; Atagi S.; Yoshimori K.; Kagamu H.; Saito H.; Takiguchi Y.; Aoe K.; Koyama A.; Komura N.; Eguchi K. Anamorelin (ONO-7643) in Japanese patients with non-small cell lung cancer and cachexia: results of a randomized phase 2 trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2016;24(8):3495-505	Supportive Care in Cancer	Retrospective

851	Thanthong 2017	Thanthong S.; Rojthamarat S.; Worasawate W.; Vichitvejpaisal P.; Nantajit D.; Ieumwananontachai N. Comparison of efficacy of meperidine and fentanyl in terms of pain management and quality of life in patients with cervical cancer receiving intracavitary brachytherapy: a double-blind, randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2017;25(8):2531-2537	Supportive Care in Cancer	Retrospective
852	Turcott 2018	Turcott JG.; Del Rocío Guillen Núñez M.; Flores-Estrada D.; Oñate-Ocaña LF.; Zatarain-Barrón ZL.; Barrón F.; Arrieta O. The effect of nabilone on appetite, nutritional status, and quality of life in lung cancer patients: a randomized, double-blind clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2018;26(9):3029-3038	Supportive Care in Cancer	Retrospective
853	Vanderbyl 2017	Vanderbyl BL.; Mayer MJ.; Nash C.; Tran AT.; Windholz T.; Swanson T.; Kasymjanova G.; Jagoe RT. A comparison of the effects of medical Qigong and standard exercise therapy on symptoms and quality of life in patients with advanced cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 06 2017;25(6):1749-1758	Supportive Care in Cancer	Retrospective
854	Winters-Stone 2018	Winters-Stone KM.; Moe EL.; Perry CK.; Medysky M.; Pommier R.; Vetto J.; Naik A. Enhancing an oncologist's recommendation to exercise to manage fatigue levels in breast cancer patients: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2018;26(3):905-912	Supportive Care in Cancer	Retrospective
855	Xiu 2020	Xiu D.; Fung YL.; Lau BH.; Wong DFK.; Chan CHY.; Ho RTH.; So TH.; Lam TC.; Lee VH.; Lee AWM.; Chow SF.; Lim FM.; Tsang MW.; Chan CLW.; Chow AYM. Comparing dyadic cognitive behavioral therapy (CBT)	Supportive Care in Cancer	Retrospective

		with dyadic integrative body-mind-spirit intervention (I-BMS) for Chinese family caregivers of lung cancer patients: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1523-1533		
856	Yang 2020	Yang SY.; Wang JD.; Chang JH. Occupational therapy to improve quality of life for colorectal cancer survivors: a randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2020;28(3):1503-1511	Supportive Care in Cancer	Retrospective
857	Yousef 2019	Yousef AA.; Alzeftawy AE. The efficacy of oral piroxicam fast-dissolving tablets versus sublingual fentanyl in incident breakthrough pain due to bone metastases: a double-blinded randomized study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2019;27(6):2171-2177	Supportive Care in Cancer	Retrospective
858	Aramaki 2019	Aramaki T; Arai Y; Takeuchi Y; Sone M; Sato R; Bekku E; Moriguchi M A randomized, controlled trial of the efficacy of percutaneous transesophageal gastro-tubing (PTEG) as palliative care for patients with malignant bowel obstruction: the JIVROSG0805 trial. Support Care Cancer Jun 2020;28(6):2563-2569	Supportive Care in Cancer	Retrospective
859	Barrera 2019	Barrera M; Hancock K; Atenafu E; Alexander S; Solomon A; Desjardins L; Shama W; Chung J; Mills D Quality of life in pediatric oncology patients, caregivers and siblings after psychosocial screening: a randomized controlled trial. Support Care Cancer Dec 2019;():	Supportive Care in Cancer	Retrospective
860	Santagnello 2020	Santagnello SB; Martins FM; de Oliveira Junior GN; de Freitas Rodrigues de Sousa J; Nomelini RS; Murta EFC; Orsatti FL Improvements in muscle strength, power, and size and self-reported fatigue as mediators of the effect of resistance exercise on physical performance breast cancer survivor women: a randomized controlled trial.	Supportive Care in Cancer	Retrospective

		Support Care Cancer Apr 2020;():		
861	Shigematsu 2020	Shigematsu H; Hirata T; Nishina M; Yasui D; Ozaki S Cryotherapy for the prevention of weekly paclitaxel-induced peripheral adverse events in breast cancer patients. Support Care Cancer Feb 2020;():	Supportive Care in Cancer	Retrospective
862	Berenson 2015	Berenson JR.; Yellin O.; Shamasunder HK.; Chen CS.; Charu V.; Woliver TB.; Sanani S.; Schlutz M.; Nassir Y.; Swift RA.; Andreu-Vieyra C.; Vescio R. A phase 3 trial of armodafinil for the treatment of cancer-related fatigue for patients with multiple myeloma. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2015;23(6):1503-12	Supportive Care in Cancer	No registration
863	Bradt 2015	Bradt J.; Potvin N.; Kesslick A.; Shim M.; Radl D.; Schriver E.; Gracely EJ.; Komarnicky-Kocher LT. The impact of music therapy versus music medicine on psychological outcomes and pain in cancer patients: a mixed methods study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2015;23(5):1261-71	Supportive Care in Cancer	No registration
864	Brotto 2016	Brotto L.; Brundage M.; Hoskins P.; Vergote I.; Cervantes A.; Casado HA.; Poveda A.; Eisenhauer E.; Tu D.; .; .; . Randomized study of sequential cisplatin-topotecan/carboplatin-paclitaxel versus carboplatin-paclitaxel: effects on quality of life. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1241-9	Supportive Care in Cancer	No registration
865	Cacchio 2019	Cacchio A.; Prencipe R.; Bertone M.; De Benedictis L.; Taglieri L.; D'Elia E.; Centoletti C.; Di Carlo G. Effectiveness and safety of a product containing diosmin, coumarin, and arbutin (Linfadren®) in addition to complex decongestive therapy on management of breast cancer-related lymphedema. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2019;27(4):1471-1480	Supportive Care in Cancer	No registration

866	Chan 2017	Chan A.; De Boer R.; Gan A.; Willsher P.; Martin R.; Zissiadis Y.; Miller K.; Bauwens A.; Hastrich D. Randomized phase II placebo-controlled study to evaluate the efficacy of topical pure emu oil for joint pain related to adjuvant aromatase inhibitor use in postmenopausal women with early breast cancer: JUST (Joints Under Study). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 12 2017;25(12):3785-3791	Supportive Care in Cancer	No registration
867	Chen 2018	Chen SC.; Huang BS.; Chung CY.; Lin CY.; Fan KH.; Chang JT.; Wu SC. Effects of a swallowing exercise education program on dysphagia-specific health-related quality of life in oral cavity cancer patients post-treatment: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2018;26(8):2919-2928	Supportive Care in Cancer	No registration
868	Chen 2020	Chen SC.; Yeh ML.; Chang HJ.; Lin MF. Music, heart rate variability, and symptom clusters: a comparative study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2020;28(1):351-360	Supportive Care in Cancer	No registration
869	Chitapanarux 2018	Chitapanarux I.; Tungkasamit T.; Petsuksiri J.; Kannarunimit D.; Katanyoo K.; Chakkabat C.; Setakornnukul J.; Wongsrita S.; Jirawatwarakul N.; Lertbusayanukul C.; Sripan P.; Traisathit P. Randomized control trial of benzydamine HCl versus sodium bicarbonate for prophylaxis of concurrent chemoradiation-induced oral mucositis. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2018;26(3):879-886	Supportive Care in Cancer	No registration
870	Cho 2016	Cho Y.; Do J.; Jung S.; Kwon O.; Jeon JY. Effects of a physical therapy program combined with manual lymphatic drainage on shoulder function, quality of life, lymphedema incidence, and pain in breast cancer patients with axillary web syndrome following axillary dissection.	Supportive Care in Cancer	No registration

		Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2016;24(5):2047-2057		
871	Ando 2015	Ando Y; Hayashi T; Ito K; Suzuki E; Mine N; Miyamoto A; Oya M; Matsuda H; Isaji A; Nakanishi T; Imaizumi K; Shibata T; Okada T; Sakurai K; Naito K; Uyama I; Kawada K; Takahashi H; Yamada S Comparison between 5-day aprepitant and single-dose fosaprepitant meglumine for preventing nausea and vomiting induced by cisplatin-based chemotherapy. Support Care Cancer Feb 2016;24(2):871-878	Supportive Care in Cancer	No registration
872	Chen 2017	Chen SC; Chou CC; Chang HJ; Lin MF Comparison of group vs self-directed music interventions to reduce chemotherapy-related distress and cognitive appraisal: an exploratory study. Support Care Cancer Feb 2018;26(2):461-469	Supportive Care in Cancer	No registration
873	Mihuta 2018	Mihuta ME; Green HJ The implementation of web-based cognitive rehabilitation in adult cancer survivors: examining participant engagement, attrition and treatment fidelity. Support Care Cancer Feb 2018;26(2):499-506	Supportive Care in Cancer	No registration
874	Browall 2017	Browall M; Brandberg Y; Nasic S; Rydberg P; Bergh J; Rydén A; Xie H; Eriksson I; Wengström Y A prospective exploration of symptom burden clusters in women with breast cancer during chemotherapy treatment. Support Care Cancer May 2017;25(5):1423-1429	Supportive Care in Cancer	No registration
875	Delgado-Guay 2016	Delgado-Guay MO.; Rodriguez-Nunez A.; De la Cruz V.; Frisbee-Hume S.; Williams J.; Wu J.; Liu D.; Fisch MJ.; Bruera E. Advanced cancer patients' reported wishes at the end of life: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 10 2016;24(10):4273-81	Supportive Care in Cancer	No registration
876	Dong 2019	Dong X.; Sun G.; Zhan J.; Liu F.; Ma S.; Li P.; Zhang C.; Zhang H.; Xing C.; Liu Y. Telephone-based reminiscence therapy for colorectal cancer patients undergoing postoperative	Supportive Care in Cancer	No registration

		chemotherapy complicated with depression: a three-arm randomised controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2019;27(8):2761-2769		
877	Ferreira 2016	Ferreira B.; da Motta Silveira FM.; de Orange FA. Low-level laser therapy prevents severe oral mucositis in patients submitted to hematopoietic stem cell transplantation: a randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1035-42	Supportive Care in Cancer	No registration
878	Fukushima 2017	Fukushima T.; Tsuji T.; Sano Y.; Miyata C.; Kamisako M.; Hohri H.; Yoshimura C.; Asakura M.; Okitsu T.; Muraoka K.; Liu M. Immediate effects of active exercise with compression therapy on lower-limb lymphedema. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 08 2017;25(8):2603-2610	Supportive Care in Cancer	No registration
879	Giron 2016	Giron PS.; Haddad CA.; Lopes de Almeida Rizzi SK.; Nazário AC.; Facina G. Effectiveness of acupuncture in rehabilitation of physical and functional disorders of women undergoing breast cancer surgery. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2016;24(6):2491-6	Supportive Care in Cancer	No registration
880	Hardy 2016	Hardy J.; Randall C.; Pinkerton E.; Flatley C.; Gibbons K.; Allan S. A randomised, double-blind controlled trial of intranasal midazolam for the palliation of dyspnoea in patients with life-limiting disease. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 07 2016;24(7):3069-76	Supportive Care in Cancer	No registration
881	Hendrix 2016	Hendrix CC.; Bailey DE.; Steinhauser KE.; Olsen MK.; Stechuchak KM.; Lowman SG.; Schwartz AJ.; Riedel RF.; Keefe FJ.; Porter LS.; Tulsky JA. Effects of enhanced caregiver training program on cancer caregiver's self-efficacy, preparedness, and	Supportive Care in Cancer	No registration

		psychological well-being. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2016;24(1):327-336		
882	Ho 2016	Ho RT.; Fong TC.; Lo PH.; Ho SM.; Lee PW.; Leung PP.; Spiegel D.; Chan CL. Randomized controlled trial of supportive-expressive group therapy and body-mind-spirit intervention for Chinese non-metastatic breast cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 12 2016;24(12):4929-4937	Supportive Care in Cancer	No registration
883	Jain 2018	Jain S.; Kapoor G.; Koneru S.; Vishwakarma G. A randomized, open-label non-inferiority study to compare palonosetron and ondansetron for prevention of acute chemotherapy-induced vomiting in children with cancer receiving moderate or high emetogenic chemotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2018;26(9):3091-3097	Supportive Care in Cancer	No registration
884	Jatoi 2017	Jatoi A.; Grudem ME.; Dockter TJ.; Block MS.; Villasboas JC.; Tan A.; Deering E.; Kasi PM.; Mansfield AS.; Botero JP.; Okuno SH.; Smith DR.; Fields AP. A proof-of-concept trial of protein kinase C iota inhibition with auranofin for the paclitaxel-induced acute pain syndrome. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 03 2017;25(3):833-838	Supportive Care in Cancer	No registration
885	Jatoi 2016	Jatoi A.; Qin R.; Satele D.; Dakhil S.; Kumar P.; Johnson DB.; Thomas SP.; Stella PJ.; Castillo J.; Li M.; Fernandez-Zapico M. "Enjoy glass of wine before eating:" a randomized trial to test the orexigenic effects of this advice in advanced cancer patients. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2016;24(9):3739-46	Supportive Care in Cancer	No registration
886	Jung 2017	Jung S.; Sehouli J.; Chekerov R.; Kluschke F.; Patzelt	Supportive Care in	No

		A.; Fuss H.; Knorr F.; Lademann J. Prevention of palmoplantar erythrodysesthesia in patients treated with pegylated liposomal doxorubicin (Caelyx®). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 11 2017;25(11):3545-3549	Cancer	registration
887	Karthaus 2015	Karthaus M.; Tibor C.; Lorusso V.; Singh-Arora R.; Filippov A.; Rizzi G.; Borroni ME.; Rossi G.; Grunberg SM. Efficacy and safety of oral palonosetron compared with IV palonosetron administered with dexamethasone for the prevention of chemotherapy-induced nausea and vomiting (CINV) in patients with solid tumors receiving cisplatin-based highly emetogenic chemothe Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2015;23(10):2917-23	Supportive Care in Cancer	No registration
888	Raftopoulos 2016	Raftopoulos H.; Laadem A.; Hesketh PJ.; Goldschmidt J.; Gabrail N.; Osborne C.; Ali M.; Sherman ML.; Wang D.; Glaspy JA.; Puccio-Pick M.; Zou J.; Crawford J. Sotatercept (ACE-011) for the treatment of chemotherapy-induced anemia in patients with metastatic breast cancer or advanced or metastatic solid tumors treated with platinum-based chemotherapeutic regimens: results from two phase 2 studies. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1517-25	Supportive Care in Cancer	No registration
889	Kim 2016	Kim H.; Park HC.; Yoon SM.; Kim TH.; Kim J.; Kang MK.; Jung J.; Kim SW.; Yea JW.; Park SH.; Park YS. Evaluation of quality of life using a tablet PC-based survey in cancer patients treated with radiotherapy: a multi-institutional prospective randomized crossover comparison of paper and tablet PC-based questionnaires (KROG 12-01). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 10 2016;24(10):4399-406	Supportive Care in Cancer	No registration

890	Kim 2019	Kim JY.; Lee MK.; Lee DH.; Kang DW.; Min JH.; Lee JW.; Chu SH.; Cho MS.; Kim NK.; Jeon JY. Effects of a 12-week home-based exercise program on quality of life, psychological health, and the level of physical activity in colorectal cancer survivors: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Aug 2019;27(8):2933-2940	Supportive Care in Cancer	No registration
891	KomenMMC 2019	Komen MMC.; van den Hurk CJG.; Nortier JWR.; van der Ploeg T.; Nieboer P.; van der Hoeven JJM.; Smorenburg CH. Prolonging the duration of post-infusion scalp cooling in the prevention of anthracycline-induced alopecia: a randomised trial in patients with breast cancer treated with adjuvant chemotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2019;27(5):1919-1925	Supportive Care in Cancer	No registration
892	Kosaka 2016	Kosaka Y.; Tanino H.; Sengoku N.; Minatani N.; Kikuchi M.; Nishimiya H.; Waraya M.; Katoh H.; Enomoto T.; Sato T.; Kuranami M.; Watanabe M. Phase II randomized, controlled trial of 1 day versus 3 days of dexamethasone combined with palonosetron and aprepitant to prevent nausea and vomiting in Japanese breast cancer patients receiving anthracycline-based chemotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2016;24(3):1405-11	Supportive Care in Cancer	No registration
893	La Marca 2019	La Marca L.; Maniscalco E.; Fabbiano F.; Verderame F.; Schimmenti A. Efficacy of Pennebaker's expressive writing intervention in reducing psychiatric symptoms among patients with first-time cancer diagnosis: a randomized clinical trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2019;27(5):1801-1809	Supportive Care in Cancer	No registration
894	Lin 2016	Lin HY.; Chen SC.; Peng HL.; Chen MK. Effects of a case management program on patients	Supportive Care in Cancer	No registration

		with oral precancerous lesions: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2016;24(1):275-284		
895	Lu 2019	Lu Q.; Dong L.; Wu IHC.; You J.; Huang J.; Hu Y. The impact of an expressive writing intervention on quality of life among Chinese breast cancer patients undergoing chemotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jan 2019;27(1):165-173	Supportive Care in Cancer	No registration
896	Marshall-McKenna 2016	Marshall-McKenna R.; Morrison A.; Stirling L.; Hutchison C.; Rice AM.; Hewitt C.; Paul L.; Rodger M.; Macpherson IR.; McCartney E. A randomised trial of the cool pad pillow topper versus standard care for sleep disturbance and hot flushes in women on endocrine therapy for breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Apr 2016;24(4):1821-9	Supportive Care in Cancer	No registration
897	Masuda 2015	Masuda N.; Tokuda Y.; Nakamura S.; Shimazaki R.; Ito Y.; Tamura K. Dose response of pegfilgrastim in Japanese breast cancer patients receiving six cycles of docetaxel, doxorubicin, and cyclophosphamide therapy: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2015;23(10):2891-8	Supportive Care in Cancer	No registration
898	Moukharskaya 2016	Moukharskaya J.; Abrams DM.; Ashikaga T.; Khan F.; Schwartz J.; Wilson K.; Verschraegen C.; Openshaw T.; Valentine J.; Eneman J.; Unger P.; Ades S. Randomized phase II study of loratadine for the prevention of bone pain caused by pegfilgrastim. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 07 2016;24(7):3085-93	Supportive Care in Cancer	No registration
899	Mukhopadhyay	Mukhopadhyay S.; Kwatra G.; Alice K P.; Badyal D.	Supportive Care in	No

	2017	Role of olanzapine in chemotherapy-induced nausea and vomiting on platinum-based chemotherapy patients: a randomized controlled study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 01 2017;25(1):145-154	Cancer	registration
900	Nakagaki 2017	Nakagaki M.; Barras M.; Curley C.; Butler JP.; Kennedy GA. A randomized trial of olanzapine versus palonosetron versus infused ondansetron for the treatment of breakthrough chemotherapy-induced nausea and vomiting in patients undergoing hematopoietic stem cell transplantation. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 02 2017;25(2):607-613	Supportive Care in Cancer	No registration
901	Ohashi 2018	Ohashi Y.; Shiba E.; Yamashita H.; Kurebayashi J.; Noguchi S.; Iwase H.; Yoshida M.; Fujimoto T. Comparison of quality of life between 2-year and 3-or-more-year administration of leuprorelin acetate every-3-months depot in combination with tamoxifen as adjuvant endocrine treatment in premenopausal patients with endocrine-responsive breast cancer: a r Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Mar 2018;26(3):933-945	Supportive Care in Cancer	No registration
902	Osann 2019	Osann K.; Wilford J.; Wenzel L.; Hsieh S.; Tucker JA.; Wahi A.; Monk BJ.; Nelson EL. Relationship between social support, quality of life, and Th2 cytokines in a biobehavioral cancer survivorship trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Sep 2019;27(9):3301-3310	Supportive Care in Cancer	No registration
903	Papastergiou 2018	Papastergiou D.; Kokaridas D.; Bonotis K.; Diggelidis N.; Patsiaouras A. Exercise, supportive group therapy, and mood profile of Greek cancer patients: intervention effect and related comparisons. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2018;26(10):3571-3578	Supportive Care in Cancer	No registration

904	Park 2017	Park KH.; Lee S.; Park JH.; Kang SY.; Kim HY.; Park IH.; Park YH.; Im YH.; Lee HJ.; Park S.; Lee SI.; Jung KH.; Kim YS.; Seo JH. A randomized, multi-center, open-label, phase III study of once-per-cycle DA-3031, a pegylated G-CSF, in comparison with daily filgrastim in patients receiving TAC chemotherapy for breast cancer. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 02 2017;25(2):505-511	Supportive Care in Cancer	No registration
905	Perez 2015	Perez D.; Sharples KJ.; Broom R.; Jeffery M.; Proctor J.; Hinder V.; Pollard S.; Edwards J.; Simpson A.; Scott J.; Benge S.; Krissansen G.; Geursen A.; Palmano K.; MacGibbon A.; Keefe D.; Findlay M. A randomised phase IIb trial to assess the efficacy of ReCharge ice cream in preventing chemotherapy-induced diarrhoea. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Nov 2015;23(11):3307-15	Supportive Care in Cancer	No registration
906	Piredda 2016	Piredda M.; Biagioli V.; Giannarelli D.; Incletoli D.; Grieco F.; Carassiti M.; De Marinis MG. Improving cancer patients' knowledge about totally implantable access port: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):833-841	Supportive Care in Cancer	No registration
907	Pyszora 2017	Pyszora A.; Budzyński J.; Wójcik A.; Prokop A.; Krajnik M. Physiotherapy programme reduces fatigue in patients with advanced cancer receiving palliative care: randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 09 2017;25(9):2899-2908	Supportive Care in Cancer	No registration
908	Rastogi 2017	Rastogi M.; Khurana R.; Revannasiddaiah S.; Jaiswal I.; Nanda SS.; Gupta P.; Chufal KS.; Bhatt ML. Role of benzydamine hydrochloride in the prevention of oral mucositis in head and neck cancer patients treated with radiotherapy (>50 Gy) with or without chemotherapy.	Supportive Care in Cancer	No registration

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909	Riese 2017	Riese C.; Weiß B.; Borges U.; Beylich A.; Dengler R.; Hermes-Moll K.; Welslau M.; Baumann W. Effectiveness of a standardized patient education program on therapy-related side effects and unplanned therapy interruptions in oral cancer therapy: a cluster-randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 11 2017;25(11):3475-3483	Supportive Care in Cancer	No registration
910	Samuel 2019	Samuel SR.; Maiya AG.; Fernandes DJ.; Guddattu V.; Saxena PUP.; Kurian JR.; Lin PJ.; Mustian KM. Effectiveness of exercise-based rehabilitation on functional capacity and quality of life in head and neck cancer patients receiving chemo-radiotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Oct 2019;27(10):3913-3920	Supportive Care in Cancer	No registration
911	Seol 2016	Seol YM.; Kim HJ.; Choi YJ.; Lee EM.; Kim YS.; Oh SY.; Koh SJ.; Baek JH.; Lee WS.; Joo YD.; Lee HG.; Yun EY.; Chung JS. Transdermal granisetron versus palonosetron for prevention of chemotherapy-induced nausea and vomiting following moderately emetogenic chemotherapy: a multicenter, randomized, open-label, cross-over, active-controlled, and phase IV study. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):945-952	Supportive Care in Cancer	No registration
912	Sussman 2018	Sussman J.; Bainbridge D.; Whelan TJ.; Brazil K.; Parpia S.; Wiernikowski J.; Schiff S.; Rodin G.; Sergeant M.; Howell D. Evaluation of a specialized oncology nursing supportive care intervention in newly diagnosed breast and colorectal cancer patients following surgery: a cluster randomized trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2018;26(5):1533-1541	Supportive Care in Cancer	No registration

913	Turner 2017	Turner J.; Kelly B.; Clarke D.; Yates P.; Aranda S.; Jolley D.; Forbes A.; Chambers S.; Hargraves M.; Mackenzie L. A tiered multidisciplinary approach to the psychosocial care of adult cancer patients integrated into routine care: the PROMPT study (a cluster-randomised controlled trial). Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 01 2017;25(1):17-26	Supportive Care in Cancer	No registration
914	Wang 2018	Wang C.; Song Z.; Li S.; Tai S. Extended nursing for the recovery of urinary functions and quality of life after robot-assisted laparoscopic radical prostatectomy: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer May 2018;26(5):1553-1560	Supportive Care in Cancer	No registration
915	Yagata 2016	Yagata H.; Ohtsu H.; Komoike Y.; Saji S.; Takei H.; Nakamura T.; Ohashi Y.; Iwase T.; Shimozuma K. Joint symptoms and health-related quality of life in postmenopausal women with breast cancer who completed 5 years of anastrozole. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Feb 2016;24(2):683-689	Supportive Care in Cancer	No registration
916	Yen 2019	Yen CJ.; Hung CH.; Kao CL.; Tsai WM.; Chan SH.; Cheng HC.; Jheng WT.; Lu YJ.; Tsai KL. Multimodal exercise ameliorates exercise responses and body composition in head and neck cancer patients receiving chemotherapy. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Dec 2019;27(12):4687-4695	Supportive Care in Cancer	No registration
917	Zhou 2019	Zhou ES.; Hall KT.; Michaud AL.; Blackmon JE.; Partridge AH.; Recklitis CJ. Open-label placebo reduces fatigue in cancer survivors: a randomized trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer Jun 2019;27(6):2179-2187	Supportive Care in Cancer	No registration

918	Zimmer 2018	Zimmer P.; Trebing S.; Timmers-Trebing U.; Schenk A.; Paust R.; Bloch W.; Rudolph R.; Streckmann F.; Baumann FT. Eight-week, multimodal exercise counteracts a progress of chemotherapy-induced peripheral neuropathy and improves balance and strength in metastasized colorectal cancer patients: a randomized controlled trial. Supportive care in cancer : official journal of the Multinational Association of Supportive Care in Cancer 02 2018;26(2):615-624	Supportive Care in Cancer	No registration
919	Aabom 2020	Aabom B; Laier G; Christensen PL; Karlsson T; Jensen MB; Hedal B Oral morphine drops for prompt relief of breathlessness in patients with advanced cancer-a randomized, double blinded, crossover trial of morphine sulfate oral drops vs. morphine hydrochloride drops with ethanol (red morphine drops). Support Care Cancer Jul 2020;28(7):3421-3428	Supportive Care in Cancer	No registration
920	Ithimakin 2020	Ithimakin, S., Theeratrakul, P., Laocharoenkiat, A., Nimmannit, A., Akewanlop, C., Soparattanapaisarn, N., … Danchaivijitr, P. (2020). Randomized, double-blind, placebo-controlled study of aprepitant versus two dosages of olanzapine with ondansetron plus dexamethasone for prevention of chemotherapy-induced nausea and vomiting in patients receiving high-emetogenic chemotherapy. Supportive Care in Cancer. https://doi.org/10.1007/s00520-020-05380-6	Supportive Care in Cancer	No registration
921	Kim 2020	Kim S; Ko YH; Song Y; Kang MJ; Lee H; Kim SH; Jeon JY; Cho YU; Yi G; Han J Pre-post analysis of a social capital-based exercise adherence intervention for breast cancer survivors with moderate fatigue: a randomized controlled trial. Support Care Cancer Feb 2020;():	Supportive Care in Cancer	No registration
922	Kindred 2019	Kindred MM; Pinto BM; Dunsiger SI Predictors of sedentary behavior among colorectal survivors. Support Care Cancer Jun 2019;27(6):2049-2056	Supportive Care in Cancer	No registration
923	Lalla 2020	Lalla RV; Solé S; Becerra S; Carvajal C; Bettoli P;	Supportive Care in	No

		Letelier H; Santini A; Vargas L; Cifuentes A; Larsen F; Jara N; Oyarzún J; Feinn R; Bustamante E; Martínez B; Rosenberg D; Galván T Efficacy and safety of Dentoxol® in the prevention of radiation-induced oral mucositis in head and neck cancer patients (ESDOM): a randomized, multicenter, double-blind, placebo-controlled, phase II trial. Support Care Cancer Apr 2020;(): 	Cancer	registration
924	Lally 2020	Lally RM; Kupzyk KA; Bellavia G; Hydeman J; Gallo S; Helgeson VS; Erwin D; Mills AC; Brown JK CaringGuidance™ after breast cancer diagnosis eHealth psychoeducational intervention to reduce early post-diagnosis distress. Support Care Cancer May 2020;28(5):2163-2174 	Supportive Care in Cancer	No registration
925	Lu 2020	Lu Y; Zhu X; Ma Q; Wang J; Jiang P; Teng S; Zhou L; Wu D; Wang H Oral cryotherapy for oral mucositis management in patients receiving allogeneic hematopoietic stem cell transplantation: a prospective randomized study. Support Care Cancer Apr 2020;28(4):1747-1754 	Supportive Care in Cancer	No registration
926	Murphy 2020	Murphy P; Levine A; Lerma T; Young S; Hwang J; Goldsby R A portable survivorship care plan: a tool that helps educate and improve knowledge in childhood cancer survivors. Support Care Cancer Apr 2020;(): 	Supportive Care in Cancer	No registration
927	Patel 2020	Patel MP; Woodring S; Randazzo DM; Friedman HS; Desjardins A; Healy P; Herndon JE 2nd; McSherry F; Lipp ES; Miller E; Peters KB; Affronti ML Randomized open-label phase II trial of 5-day aprepitant plus ondansetron compared to ondansetron alone in the prevention of chemotherapy-induced nausea-vomiting (CINV) in glioma patients receiving adjuvant temozolomide. Support Care Cancer May 2020;28(5):2229-2238 	Supportive Care in Cancer	No registration
928	Pillay 2020	Pillay B; Moon D; Meyer D; Crowe H; Mann S; Howard N; Wootten A; Frydenberg M Exploring the impact of providing men with information about potential prostate cancer treatment options prior to receiving biopsy results. Support Care Cancer Feb 2020;28(2):507-514 	Supportive Care in Cancer	No registration

929	Wolf 2020	Ryan Wolf J; Gewandter JS; Bautista J; Heckler CE; Strasser J; Dyk P; Anderson T; Gross H; Speer T; Dolohanty L; Bylund K; Pentland AP; Morrow GR Utility of topical agents for radiation dermatitis and pain: a randomized clinical trial. Support Care Cancer Jul 2020;28(7):3303-3311	Supportive Care in Cancer	No registration
930	Toija 2019	Toija AS; Kettunen TH; Leidenius MHK; Vainiola THK; Roine RPA Effectiveness of peer support on health-related quality of life in recently diagnosed breast cancer patients: a randomized controlled trial. Support Care Cancer Jan 2019;27(1):123-130	Supportive Care in Cancer	No registration
931	Zetzl 2020	Zetzl T; Mann D; Gruner S; Schuler M; Jentschke E; Neuderth S; Roch C; van Oorschot B Question prompts to empower cancer patients: results of a randomized controlled trial. Support Care Cancer Jun 2020;28(6):2571-2579	Supportive Care in Cancer	No registration
932	Allen 2016	Allen KD.; Bongiorni D.; Bosworth HB.; Coffman CJ.; Datta SK.; Edelman D.; Hall KS.; Lindquist JH.; Oddone EZ.; Hoenig H. Group Versus Individual Physical Therapy for Veterans With Knee Osteoarthritis: Randomized Clinical Trial. Physical therapy May 2016;96(5):597-608	Physical Therapy	Prospective
933	Arntzen 2019	Arntzen EC.; Straume BK.; Odeh F.; Feys P.; Zanaboni P.; Normann B. Group-Based Individualized Comprehensive Core Stability Intervention Improves Balance in Persons With Multiple Sclerosis: A Randomized Controlled Trial. Physical therapy 08 2019;99(8):1027-1038	Physical Therapy	Prospective
934	Avendaño-Coy 2019	Avendaño-Coy J.; Bravo-Esteban E.; Ferri-Morales A.; Martínez-de la Cruz R.; Gómez-Soriano J. Does Frequency Modulation of Transcutaneous Electrical Nerve Stimulation Affect Habituation and Mechanical Hypoalgesia? A Randomized, Double-Blind, Sham-Controlled Crossover Trial. Physical therapy 07 2019;99(7):924-932	Physical Therapy	Prospective
935	Azevedo 2018	Azevedo DC.; Ferreira PH.; Santos HO.; Oliveira DR.;	Physical Therapy	Prospective

		de Souza JVL.; Costa LOP. Movement System Impairment-Based Classification Treatment Versus General Exercises for Chronic Low Back Pain: Randomized Controlled Trial. Physical therapy 01 2018;98(1):28-39		
936	Clerici 2019	Clerici I.; Maestri R.; Bonetti F.; Ortelli P.; Volpe D.; Ferrazzoli D.; Frazzitta G. Land Plus Aquatic Therapy Versus Land-Based Rehabilitation Alone for the Treatment of Freezing of Gait in Parkinson Disease: A Randomized Controlled Trial. Physical therapy 05 2019;99(5):591-600	Physical Therapy	Prospective
937	Fox 2016	Fox EE.; Hough AD.; Creanor S.; Gear M.; Freeman JA. Effects of Pilates-Based Core Stability Training in Ambulant People With Multiple Sclerosis: Multicenter, Assessor-Blinded, Randomized Controlled Trial. Physical therapy Aug 2016;96(8):1170-8	Physical Therapy	Prospective
938	Mueller 2018	Mueller MJ.; Sorensen CJ.; McGill JB.; Clark BR.; Lang CE.; Chen L.; Bohnert KL.; Hastings MK. Effect of a Shoulder Movement Intervention on Joint Mobility, Pain, and Disability in People With Diabetes: A Randomized Controlled Trial. Physical therapy 09 2018;98(9):745-753	Physical Therapy	Prospective
939	Pillastrini 2016	Pillastrini P.; de Lima E Sá Resende F.; Banchelli F.; Burioli A.; Di Ciaccio E.; Guccione AA.; Villafañe JH.; Vanti C. Effectiveness of Global Postural Re-education in Patients With Chronic Nonspecific Neck Pain: Randomized Controlled Trial. Physical therapy Sep 2016;96(9):1408-16	Physical Therapy	Prospective
940	Van den Dolder 2015	van den Dolder PA.; Ferreira PH.; Refshauge KM. Effectiveness of Soft Tissue Massage for Nonspecific Shoulder Pain: Randomized Controlled Trial. Physical therapy Nov 2015;95(11):1467-77	Physical Therapy	Prospective
941	Vanti 2019	Vanti C.; Banchelli F.; Marino C.; Puccetti A.; Guccione AA.; Pillastrini P. Effectiveness of a "Spring Pillow" Versus Education in Chronic Nonspecific Neck Pain: A Randomized	Physical Therapy	Prospective

		Controlled Trial. Physical therapy 09 2019;99(9):1177-1188		
942	Zadro 2019	Zadro JR.; Shirley D.; Simic M.; Mousavi SJ.; Ceprnja D.; Maka K.; Sung J.; Ferreira P. Video-Game-Based Exercises for Older People With Chronic Low Back Pain: A Randomized Controlledtable Trial (GAMEBACK). Physical therapy 01 2019;99(1):14-27	Physical Therapy	Prospective
943	Franco 2020	Franco MR; Sherrington C; Tiedemann A; Pereira LS; Perracini MR; Faria CSG; Negrão-Filho RF; Pinto RZ; Pastre CM Effect of Senior Dance (DanSE) on Fall Risk Factors in Older Adults: A Randomized Controlled Trial. Phys Ther Apr 2020;100(4):600-608	Physical Therapy	Prospective
944	Hansen 2020	Hansen A; Pedersen CB; Jarden JO; Beier D; Minet LR; Søgaard K Effectiveness of Physical Therapy- and Occupational Therapy-Based Rehabilitation in People Who Have Glioma and Are Undergoing Active Anticancer Treatment: Single-Blind, Randomized Controlled Trial. Phys Ther Mar 2020;100(3):564-574	Physical Therapy	Prospective
945	Hernández-Guillén 2020	Hernández-Guillén D; Blasco JM A Randomized Controlled Trial Assessing the Evolution of the Weight-Bearing Ankle Dorsiflexion Range of Motion Over 6 Sessions of Talus Mobilizations in Older Adults. Phys Ther Apr 2020;100(4):645-652	Physical Therapy	Prospective
946	Lurie 2020	Lurie JD; Zagaria AB; Ellis L; Pidgeon D; Gill-Body KM; Burke C; Armbrust K; Cass S; Spratt KF; McDonough CM Surface Perturbation Training to Prevent Falls in Older Adults: A Highly Pragmatic, Randomized Controlled Trial. Phys Ther Jan 2020;():	Physical Therapy	Prospective
947	Øberg 2020	Øberg GK; Girolami GL; Campbell SK; Ustad T; Heuch I; Jacobsen BK; Kaaresen PI; Aulie VS; Jørgensen L Effects of a Parent-Administered Exercise Program in the Neonatal Intensive Care Unit: Dose Does Matter-A	Physical Therapy	Prospective

		Randomized Controlled Trial. Phys Ther May 2020;100(5):860-869		
948	Vitacca 2020	Vitacca M; Paneroni M; Zampogna E; Visca D; Carlucci A; Cirio S; Banfi P; Pappacoda G; Trianni L; Brogneri A; Belli S; Paracchini E; Aliani M; Spinelli V; Gigliotti F; Lanini B; Lazzeri M; Clini EM; Malovini A; Ambrosino N High-Flow Oxygen Therapy During Exercise Training in Patients With Chronic Obstructive Pulmonary Disease and Chronic Hypoxemia: A Multicenter Randomized Controlled Trial. Phys Ther Apr 2020;():	Physical Therapy	Prospective
949	Polak 2017	Polak A.; Kloth LC.; Blaszczak E.; Taradaj J.; Nawrat-Szoltysik A.; Ickowicz T.; Hordynska E.; Franek A.; Kucio C. The Efficacy of Pressure Ulcer Treatment With Cathodal and Cathodal-Anodal High-Voltage Monophasic Pulsed Current: A Prospective, Randomized, Controlled Clinical Trial. Physical therapy Aug 2017;97(8):777-789	Physical Therapy	Prospective
950	Christiansen 2016	Christiansen DH.; Frost P.; Falla D.; Haahr JP.; Frich LH.; Andrea LC.; Svendsen SW. Effectiveness of Standardized Physical Therapy Exercises for Patients With Difficulty Returning to Usual Activities After Decompression Surgery for Subacromial Impingement Syndrome: Randomized Controlled Trial. Physical therapy Jun 2016;96(6):787-96	Physical Therapy	Retrospective
951	Harbourne 2019	Harbourne RT.; Berger SE. Embodied Cognition in Practice: Exploring Effects of a Motor-Based Problem-Solving Intervention. Physical therapy 06 2019;99(6):786-796	Physical Therapy	Retrospective
952	Kloek 2018	Kloek CJJ.; Bossen D.; Spreeuwenberg PM.; Dekker J.; de Bakker DH.; Veenhof C. Effectiveness of a Blended Physical Therapist Intervention in People With Hip Osteoarthritis, Knee Osteoarthritis, or Both: A Cluster-Randomized Controlled Trial. Physical therapy 07 2018;98(7):560-570	Physical Therapy	Retrospective
953	Lotzke 2019	Lotzke H.; Brisby H.; Gutke A.; Hägg O.; Jakobsson	Physical Therapy	Retrospective

		M.; Smeets R.; Lundberg M. A Person-Centered Prehabilitation Program Based on Cognitive-Behavioral Physical Therapy for Patients Scheduled for Lumbar Fusion Surgery: A Randomized Controlled Trial. Physical therapy 08 2019;99(8):1069-1088		
954	Malfliet 2018	Malfliet A.; Kregel J.; Meeus M.; Roussel N.; Danneels L.; Cagnie B.; Dolphens M.; Nijs J. Blended-Learning Pain Neuroscience Education for People With Chronic Spinal Pain: Randomized Controlled Multicenter Trial. Physical therapy 05 2018;98(5):357-368	Physical Therapy	Retrospective
955	Tomar 2019	Tomar GS.; Singh GP.; Bithal P.; Upadhyay AD.; Chaturvedi A. Comparison of Effects of Manual and Mechanical Airway Clearance Techniques on Intracranial Pressure in Patients With Severe Traumatic Brain Injury on a Ventilator: Randomized, Crossover Trial. Physical therapy 04 2019;99(4):388-395	Physical Therapy	Retrospective
956	Øberg 2020	Øberg GK, Girolami GL, Campbell SK, et al. Effects of a Parent-Administered Exercise Program in the Neonatal Intensive Care Unit: Dose Does Matter-A Randomized Controlled Trial. [Published online ahead of print January 16, 2020]. Phys Ther. 2020. DOI: 10. Phys Ther Apr 2020;100(4):741	Physical Therapy	Retrospective
957	Yu 2017	Yu YT.; Hsieh WS.; Hsu CH.; Lin YJ.; Lin CH.; Hsieh S.; Lu L.; Cherng RJ.; Chang YJ.; Fan PC.; Yao NJ.; Chen WJ.; Jeng SF. Family-centered Care Improved Neonatal Medical and Neurobehavioral Outcomes in Preterm Infants: Randomized Controlled Trial. Physical therapy Dec 2017;97(12):1158-1168	Physical Therapy	Retrospective
958	Bongers 2016	Bongers CC.; Eijsvogels TM.; van Nes IJ.; Hopman MT.; Thijssen DH. Effects of Cooling During Exercise on Thermoregulatory Responses of Men With Paraplegia. Physical therapy May 2016;96(5):650-8	Physical Therapy	No registration
959	Kolobe 2019	Kolobe THA.; Fagg AH. Robot Reinforcement and Error-Based Movement Learning in Infants With and Without Cerebral Palsy.	Physical Therapy	No registration

		Physical therapy 06 2019;99(6):677-688		
960	Langer 2015	Langer D.; Charususin N.; Jácome C.; Hoffman M.; McConnell A.; Decramer M.; Gosselink R. Efficacy of a Novel Method for Inspiratory Muscle Training in People With Chronic Obstructive Pulmonary Disease. Physical therapy Sep 2015;95(9):1264-73	Physical Therapy	No registration
961	Miyamoto 2016	Miyamoto GC.; Moura KF.; Franco YR.; Oliveira NT.; Amaral DD.; Branco AN.; Silva ML.; Lin C.; Cabral CM. Effectiveness and Cost-Effectiveness of Different Weekly Frequencies of Pilates for Chronic Low Back Pain: Randomized Controlled Trial. Physical therapy Mar 2016;96(3):382-9	Physical Therapy	No registration
962	Rinne 2016	Rinne M.; Garam S.; Häkkinen A.; Ylinen J.; Kukkonen-Harjula K.; Nikander R. Therapeutic Exercise Training to Reduce Chronic Headache in Working Women: Design of a Randomized Controlled Trial. Physical therapy May 2016;96(5):631-40	Physical Therapy	No registration
963	Lakke 2015	Lakke SE; Soer R; Krijnen WP; van der Schans CP; Reneman MF; Geertzen JH Influence of Physical Therapists' Kinesiophobic Beliefs on Lifting Capacity in Healthy Adults. Phys Ther Sep 2015;95(9):1224-33	Physical Therapy	No registration
964	Fuchs 2019	Fuchs D; Kearns DM; Fuchs LS; Elleman AM; Gilbert JK; Patton S; Peng P; Compton DL Using Moderator Analysis to Identify the First-Grade Children Who Benefit More and Less from a Reading Comprehension Program: A Step Toward Aptitude-by-Treatment Interaction. Except Child Jan 2019;85(2):229-247	Exceptional Children	No registration
965	Fuchs 2019	Fuchs LS; Fuchs D; Gilbert JK Does the Severity of Students' Pre-Intervention Math Deficits Affect Responsiveness to Generally Effective First-Grade Intervention? Except Child Jan 2019;85(2):147-162	Exceptional Children	No registration
966	Hudson 2017	Hudson RF; Sanders EA; Greenway R; Xie S; Smith M; Gasamis C; Martini J; Schwartz I; Hackett J	Exceptional Children	No registration

		Effects of Emergent Literacy Interventions for Preschoolers With Autism Spectrum Disorder. Except Child Oct 2017;84(1):55-75		
967	Powell 2015	Powell SR; Fuchs LS; Cirino PT; Fuchs D; Compton DL; Changas PC Effects of a Multitier Support System on Calculation, Word Problem, and Prealgebraic Performance Among At-Risk Learners. Except Child Jul 2015;81(4):443-470	Exceptional Children	No registration
968	Powell 2017	Powell SR; Cirino PT; Malone AS Child-Level Predictors of Responsiveness to Evidence-Based Mathematics Intervention. Except Child Jul 2017;83(4):359-377	Exceptional Children	No registration

Appendix E: Standard Rehabilitation Exercises (SRE)

5 Stretching Exercises:

1) Pendulum: (2 sets of 10 repetitions, performed 5 to 6 times per week)

Instructions:

• Lean forward and place one hand on a counter or table for support. Let your other arm hang freely at your side. • Gently swing your arm forward and back. Repeat the exercise moving your arm side-to-side and repeat again in a circular motion. • Repeat the entire sequence with the other arm. • Do not round your back or lock your knees.

2) Crossover Arm Stretch (4 sets of 30-second hold per side, performed 5 to 6 times per week)

Instructions:

• Relax your shoulders and gently pull one arm across your chest as far as possible, holding at your upper arm. • Hold the stretch for 30 seconds and then relax for 30 seconds. • Repeat with the other arm. • Do not pull or put pressure on your elbow.

3) Passive Internal Rotation (4 sets of 30-second hold per side, performed 5 to 6 times per week)

Instructions:

• Hold a stick behind your back with one hand, and lightly grasp the other end of the stick with your other hand. • Pull the stick horizontally so that your shoulder is passively stretched to the point of feeling a pull without pain. • Hold for 30 seconds and then relax for 30 seconds. • Repeat on the other side. • Do not lean over or twist to side while pulling the stick.

4) Passive External Rotation (4 sets of 30-second hold per side, performed 5 to 6 times per week)

Instructions:

• Grasp the stick with one hand and cup the other end of the stick with the other hand. • Keep the elbow of the shoulder you are stretching against the side of your body and push the stick horizontally to the point of feeling a pull without pain. • Hold for 30 seconds and then relax for 30 seconds. • Repeat on the other side. • Keep your hips facing forward and do not twist.

5) Sleeper Stretch (4 sets of 30-second hold per side, performed 7 times per week)

Instructions:

• Lie on your side on a firm, flat surface with the affected shoulder under you and your arm bent. You can place your head on a pillow for comfort, if needed. • Use your unaffected arm to push your other arm down. Stop pressing down when you feel a stretch in the back of your affected shoulder. • Hold this position for 30 seconds, then relax your arm for 30 seconds. • Do not bend your wrist or press down on your wrist.

4 Strengthening Exercises:

1) Standing Row (3 sets of 8 repetitions, performed 3 times per week)

Instructions:

• Make a 3-foot-long loop with the elastic band and tie the ends together. Attach the loop to a doorknob or other stable object. • Stand holding the band with your elbow bent and at your side, as shown in the start position. • Keep your arm close to your side and slowly pull

your elbow straight back. • Slowly return to the start position and repeat. • Squeeze your shoulder blades together as you pull.

2) External Rotation With Arm Abducted 90°(3 sets of 8 repetitions, performed 3 times per week)

Instructions:

• Make a 3-foot-long loop with the elastic band and tie the ends together. Attach the loop to a doorknob or other stable object. • Stand holding the band with your elbow bent 90° and raised to shoulder-height, as shown in the start position. • Keeping your shoulder and elbow level, slowly raise your hand until it is in line with your head. • Slowly return to the start position and repeat. • Make sure your elbow stays in line with your shoulder.

3) Internal Rotation (3 sets of 8 repetitions, performed 3 times per week)

Instructions:

• Make a 3-foot-long loop with the elastic band and tie the ends together. Attach the loop to a doorknob or other stable object. • Stand holding the band with your elbow bent and at your side, as shown in the start position. • Keep your elbow close to your side and bring your arm across your body. • Slowly return to the start position and repeat. • Keep your elbow pressed into your side.

4) External Rotation (3 sets of 8 repetitions, performed 3 times per week)

Instructions:

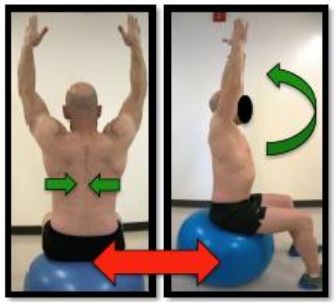
• Make a 3-foot-long loop with the elastic band and tie the ends together. Attach the loop to a doorknob or other stable object. • Stand holding the band with your elbow bent and at

your side, as shown in the start position. • Keeping your elbow close to your side, slowly rotate your arm outward. • Slowly return to the start position and repeat. •Squeeze your shoulder blades together when you pull your elbow back.

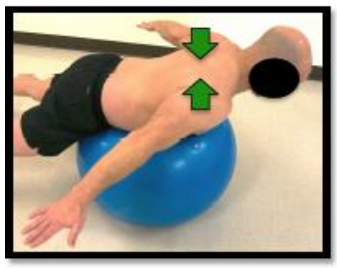
Appendix F – Firefighter-specific Rehabilitation Exercises (Fire-RE)

Station 1: Postural and Scapulothoracic control.

1.1 Maintain the position for 10 seconds (1 set).



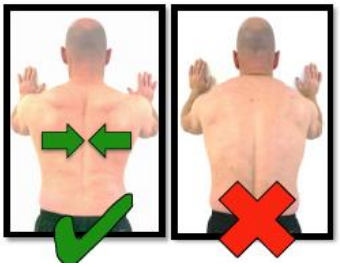
1.2 Perform 1 set of 15 repetitions.



1.3 Maintain the position for 10-15 seconds (1 set).

1.4 Perform (external rotation) 1 set of 15 repetition (1-10 Lbs. dumbbell)

Station 2: Weight bearing.



2.1 Maintain the position for 30 seconds (3 set).

2.2 Maintain the position for 30 seconds (3 set).

2.3 Maintain the position for 30 seconds (3 set).

2.4 Maintain the position for 30 seconds (3 set).

2.5 Maintain the position for 30 seconds (3 set).

Station 3: Neuromuscular re-education of the rotator cuff complex.

3.1 Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).

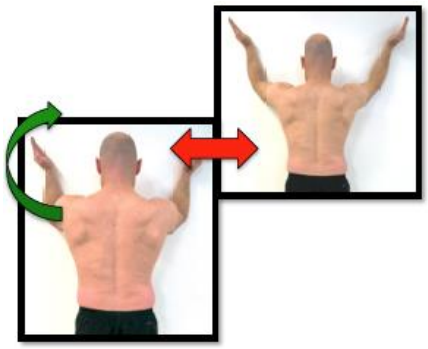
3.2 Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).

3.3 Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).

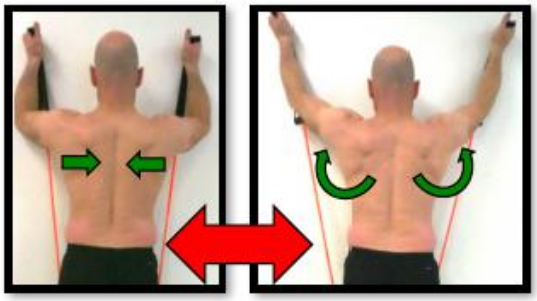
3.4 Perform 5 repetitions on each side. Maintain the position for 10 seconds (2 sets).

3.5 Perform 2 sets of 15 repetitions, slow return, on each side.

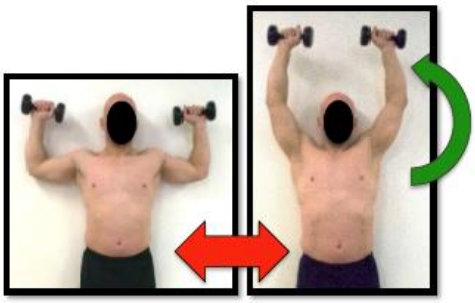
Station 4: Neuromuscular reeducation of serratus anterior.



4.1 Perform 2 sets of 15 repetitions.

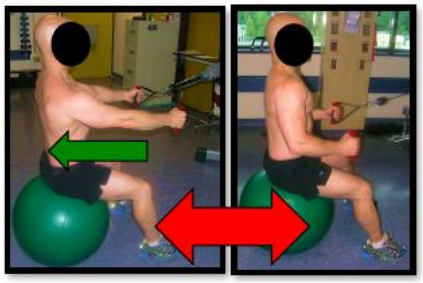


4.2 Perform 2 sets of 15 repetitions.



4.3 Perform 2 sets of 15 repetitions.

Station 5: Neuromuscular reeducation of Trapezius



5.1 Pull backs: close to the body. Perform 2 sets of 15 repetitions.

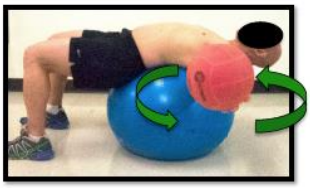
5.2 Pull backs: the arms at 90 degrees Perform 2 sets of 15 repetitions.

Station 6: Proprioception and motor control

6.1 Perform 3 sets of 20 repetitions (small circles).

6.2 Perform 3 sets of 20 repetitions (figure 8).

6.3 Perform 3 sets of 20 repetitions (small circles).



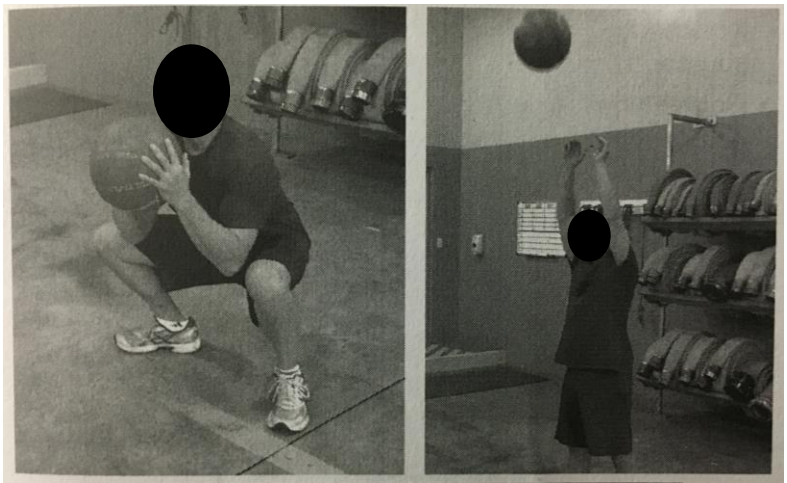
6.4 Perform 3 sets of 20 repetitions (small circles).

6.5 Perform 3 sets of 20 repetitions (small circles).

Station 7: Firefighting Push Activities:

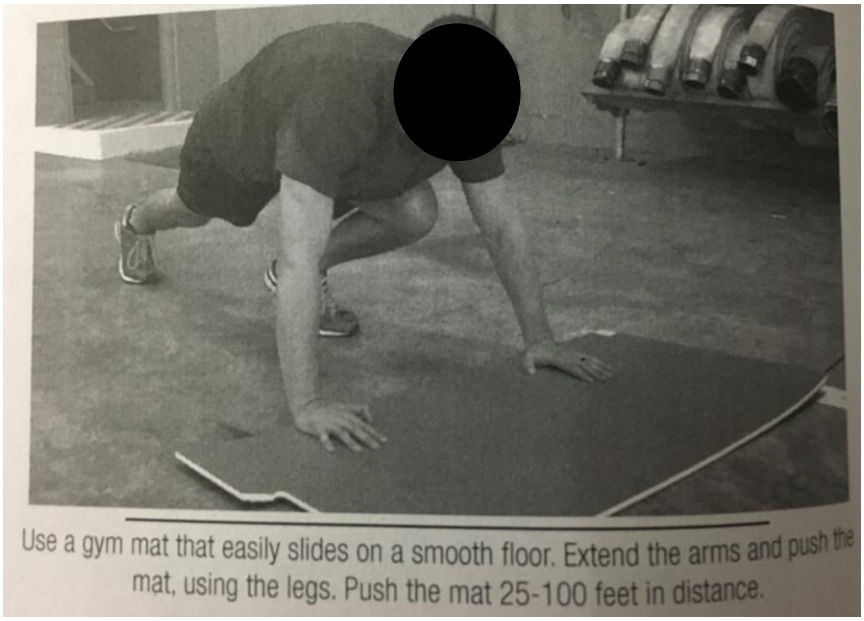
Place butt of ladder against building. Going rung by rung, raise the ladder until it is vertical. Reverse the process to lower the ladder to the ground.

7.1 Ladder raise and lower (3 sets 12-20 repetitions)



While holding medicine ball in center of chest, lower the body into a squat position. Explode upwards and simultaneously throw the medicine ball overhead. Let the medicine ball fall to the ground.

7.2 Medicine ball throw (squat) (3 sets 12-20 repetitions)



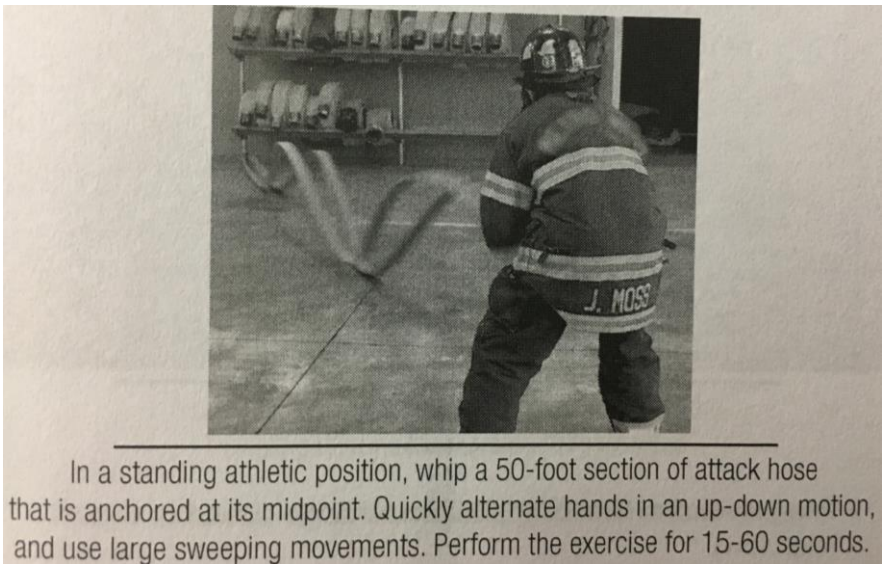
Use a gym mat that easily slides on a smooth floor. Extend the arms and push the mat, using the legs. Push the mat 25-100 feet in distance.

7.3 Sled push with gym mat (3 sets for 10 – 30 meters)

Station 8: Firefighting Pull Activities:

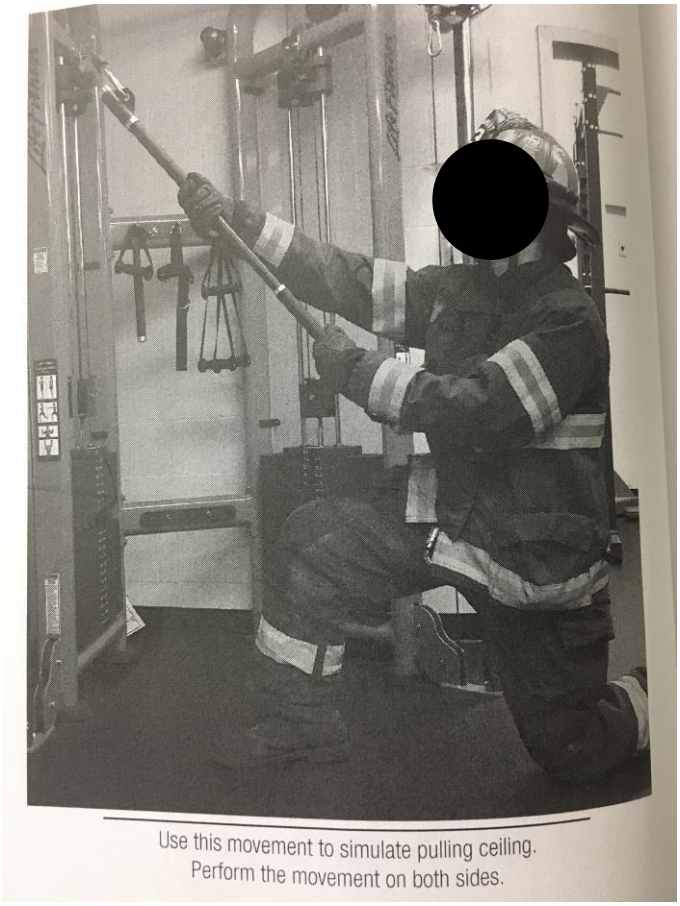
From a kneeling position, pull a charged attack hose (hand-over-hand). Reset the hose and switch sides.

8.1 Charged attack hose pull (3 sets 15-60 seconds)



In a standing athletic position, whip a 50-foot section of attack hose that is anchored at its midpoint. Quickly alternate hands in an up-down motion, and use large sweeping movements. Perform the exercise for 15-60 seconds.

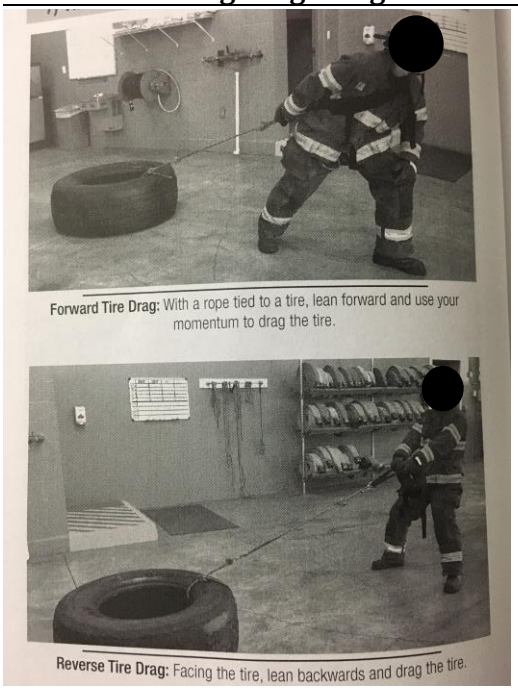
8.2 Battle hose (3 sets 15-60 seconds)



Use this movement to simulate pulling ceiling.
Perform the movement on both sides.

8.3 Kneeling lateral cable pull (3 sets 12-20 repetitions)

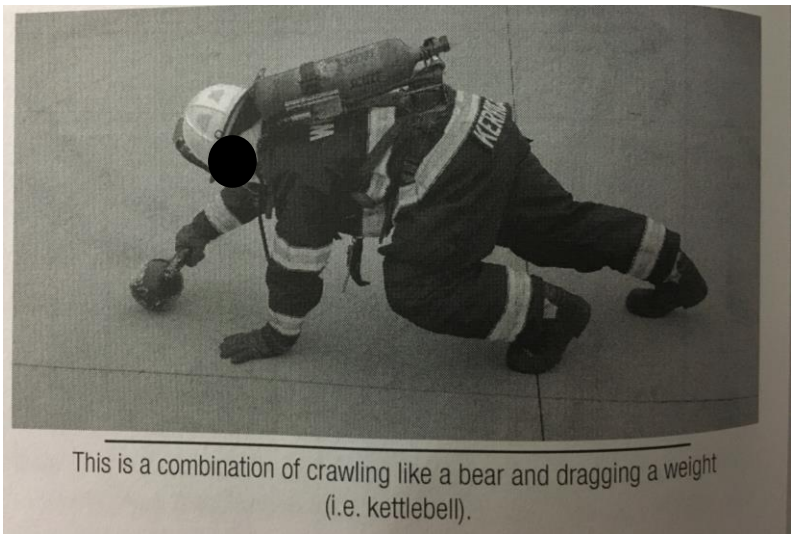
Station 9: Firefighting Drag Activities:



Forward Tire Drag: With a rope tied to a tire, lean forward and use your momentum to drag the tire.

Reverse Tire Drag: Facing the tire, lean backwards and drag the tire.

9.1 Tire Drag (3 sets for 10 – 30 meters)



This is a combination of crawling like a bear and dragging a weight (i.e. kettlebell).

9.2 Bear crawl and drag (3 sets for 5 – 20 meters – 5-20 lbs wight)

Curriculum Vitae

Name: Goris Nazari

Post-secondary Education and Degrees:
McMaster University
School of Rehabilitation Science
Hamilton Ontario, Canada
2014 – 2016 M.Sc.

Western University
School of Physical Therapy
London, Ontario, Canada
2016 – 2020 Ph.D.

Honours and Awards:
Western Graduate Research Scholarship
School of Physical Therapy Western University
London, ON Canada
$ 101,624 for four year
2016 – 2020

Transdisciplinary Bone & Joint Training Award
Bone and Joint Institute, Western University
London, ON Canada
$ 26,667 for two years
2018-2020

Canadian Institutes of Health Research Post-Doctoral Fellowship Award.
Institution: Queen's University
$ 135,000 for three years
2020-2023

Centre of Research Expertise for the Prevention of Musculoskeletal Disorders (CRE-MSD) Seed Grant.
Department of Kinesiology, Faculty of Applied Health Sciences, University of Waterloo. Waterloo, ON Canada
$ 7,400 for one year
Principle Investigator
2019 – 2021 (extended)

Operating Grant: Knowledge Synthesis: COVID-19 in Mental Health & Substance Use.
Title: The effectiveness of virtual interventions targeting mental

health in people with chronic musculoskeletal pain: A Systematic Review and Network Meta-Analysis
$ 50,000 for six months
Co- Principle Investigator
2020

Related Work Experience
Research Coordinator
Hand and Upper Limb Center (HULC)
2017-2020

Peer-reviewed Publications: (*30 as the first author; 13 as the second author*)

45. **Goris Nazari**, Pavlos Bobos. Steve Lu, Stephanie Rischel, Pedro Almedia, Joy Macdermid (2020). Psychometric Properties of Patient-Specific Functional Scale in Patients with Spine Pathology. A Systematic Review and Meta-analysis. Physiotherapy Canada. Accepted.

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41. **Goris Nazari**, Steve Lu, Joy C MacDermid, Aziza Aziz, Nicole Stokes, Samantha Hiller, Alex Kim, Kiarash Akhavan (2019). Psychometric Properties of Performance-based Functional Tests in Patients with Shoulder pathologies. A Systematic Review. Archives of Physical Medicine and Rehabilitation. https://doi.org/10.1016/j.apmr.2019.11.011.

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