Systematic review of freatments for whipfash. Recommends early activity in acute whipfash, radofrequency microtomy, cognitive behavioural therapy with other physical therapy interventions, and coordination exercise in control whipfash. Abstract Author. Seferialis A. Rosentifed M. Gunnarsson R. Journal European Spin J. Biblio 13,387-397 Year Published. 2004 Category. Whipfash Reviews Abstract Title: Clinical Review: Whipfash Injury Summary. Thorough review of epidemiology, pathology, symptoms and litigation issue. Studies show that about a quarter will continue to have persistent pain. Abstract Author: Barnsley L. Lord S. Bogduk N. Journal Pain Biblio 58,283-307 Year Published. 1994 Category. Whipfash: Reviews Abstract Title: Appears met validity criteria, these showed a weak to moderate positive effect for exercise, advice, manual therapy, and pulsed electromagnetic therapy. Quality of all papers very poor. Abstract Author: Magee DJ, Oborn-Barrett E, Turner S, Fenning N: Journal: Physiotherapy Canada Biblio 111-130 Year Published. 2000 Category. Whipfash: Reviews Abstract Title: Whipfash: Reviews Abstract Title: Whipfash: Reviews Abstract Title: Spin Commission of the Commission of the Commission about the seff-limiting frevourable prognosis summary: an other papers and pulsed electromagnetic therapy. Quality of all papers very poor. Abstract Title: Spin Commission of the Commission about the seff-limiting frevourable prognosis summary: a not born out by the literature. In fact about 33% of whipfash patients have persistent pain several years later. STUDY DESIGN: The two publications of the Quebec Task Force on Whipfash-Associated Disorders were evaluated by the authors of his report for methodologic error and bias. OBJECTIVES: To determine whether the conclusions and recommendations of the Quebec Task Force on Whipfash-Associated Disorders Readering physical Planet and significant conclusions and recommendations of the Quebec Task Force on Whipfash-Associated Disorders Readering physical	Abstract Title:	A review of treatment interventions in whiplash-associated disorders
Biblio 13.87-397		Systematic review of treatments for whiplash. Recommends early activity in acute whiplash;, radiofrequency neurotomy, cognitive behavioural therapy with other physical therapy interventions, and coordination exercise
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	Abstract Author:	Freeman MD, Croft AC, Rossignol AM
Biblio: May 1;23(9):1043-9	Journal:	Spine
	Biblio:	May 1;23(9):1043-9

Year Published:	1998
Category:	Whiplash: Reviews
Abstract Title:	The efficacy of conservative treatment in patients with whiplash injury: a systematic review of clinical trials.
Summary:	11 studies met inclusion criteria all of poor methodology, only 3 were considered to have acceptable validity. Active treatment shows benefit long-term, whereas 'rest makes rusty'.
Abstract Content:	STUDY DESIGN: A systematic review of the literature. OBJECTIVES: To assess the efficacy of conservative treatment in patients with whiplash injuries. SUMMARY OF BACKGROUND DATA: Many treatments are available for patients with whiplash injury, but there continues to be no evidence for their accepted use. METHODS: A computerized literature search of Medline, Embase, Cinahl, Psychlit, and the Cochrane Controlled Trial Register was performed. Studies were selected if the design was a (randomized) clinical trial; if all patients had sustained a whiplash injury; if the type of intervention was a conservative one; if pain, global perceived effect, and participation in daily activities were used as one of the outcome measures, and if the publication was written in English, French, German, or Dutch. The methodologic quality was independently assessed by two reviewers by using the Maastricht-Amsterdam list. Three quality scores were calculated using this criteria list: the Overall Methodologic Quality Score, the Internal Validity Score, and the Delphi Quality Score. The conclusion of the review was based on articles that scored a quality score of at least 50% of the maximum available score on two of three quality scores. RESULTS: Eleven studies met the inclusion criteria. Only three studies satisfied at least 50% on two of three ways of calculating a quality score, indicating overall poor methodology. There was a high rank correlation among the three ways of calculating a quality score. No statistical pooling was performed because of the heterogeneity of the interventions. This review indicates that active treatments show a beneficial long-term effect on at least one of the primary outcome measures. CONCLUSION: Caution is needed when drawing a valid conclusion on the efficacy of conservative treatments in patients with whiplash injury. It appears that "rest makes rusty," whereas active interventions have a tendency to be more effective in patients with whiplash injury.
Abstract Author:	Peeters GG, Verhagen AP, de Bie RA, Oostendorp RA.
Journal:	Spine
Biblio:	Feb 15;26(4):E64-73
Year Published:	2001
Category:	Whiplash: Reviews
Abstract Title:	Clinical practice guideline for the physiotherapy of patients with whiplash-associated disorders.
Summary:	Active interventions, such as exercise, educational advice and normal activity are recommended.
Abstract Content:	STUDY DESIGN: A clinical practice guideline. OBJECTIVES: To assist physiotherapists in decision making and to improve the efficacy and uniformity of care for patients with whiplash-associated disorders Grades I and II. SUMMARY OF BACKGROUND DATA: Whiplash constitutes a considerable problem in health care. Many interventions are used in physiotherapy practice, despite increasing evidence for the use of active interventions. There is still no clinical practice guideline for the management of patients with whiplash-associated disorders. METHOD OF DEVELOPMENT: A computerized literature search of Medline, Cinahl, Cochrane Controlled Trial Register, Cochrane Database of Systematic Reviews, and the Database of the Dutch National Institute of Allied Health Professions was performed to search for information about the diagnostic process and the therapeutic process in whiplash patients. When no evidence was available, consensus between experts was achieved to develop the guideline. Practicing physiotherapists reviewed the clinical applicability and feasibility of the guideline, and their comments were used to improve it. RECOMMENDATIONS: The diagnostic process consists of systematic history taking and a physical examination supported by reliable and valid assessment tools to document symptoms and functional disabilities. The primary goals of treatment are a quick return to normal activities and the prevention of chronicity. Active interventions such as education, exercise therapy, training of functions, and activities are recommended according to the length of time since the accident and the rate of recovery. The biopsychosocial model is used to address the consequences of whiplash is sparse; therefore, consensus is used in different parts of the guideline. The guideline reflects the current state of knowledge of the effective and appropriate physiotherapy in whiplash patients. More and better research is necessary to validate this guideline in the future.
Abstract Author:	Scholten-Peeters GG, Bekkering GE, Verhagen AP, van Der Windt DA, Lanser K, Hendriks EJ, Oostendorp RA.

ABSTRAKTA - Whiplash: Reviews (v anglickém jazyce)

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