

Allied health interventions for Friedreich's ataxia

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SUMMARY STATEMENT

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Publication of materials – please use the following format when citing this article:

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REQUEST

What allied health interventions are effective in treating Friedreich's ataxia?

REQUESTED BY

Louise Corben, Occupational Therapy, Monash Medical Centre, Clayton.

METHODOLOGY

Search Strategy

The Centre for Clinical Effectiveness defines the 'best available evidence' as that research we can identify that is least susceptible to bias. We determine this according to pre-defined National Health and Medical Research Council (NHMRC, 2000) criteria (see Appendix 1).

First, we search for systematic reviews, evidence based clinical practice guidelines, health technology assessments and randomised controlled trials. If we identify sound, relevant material of this type, the search stops. Otherwise, our search strategy broadens to include studies that are more prone to bias, less generalisable or have other methodological difficulties. We include case-control and longitudinal cohort studies in our critical appraisal reports. While we cite observational and case series studies, and narrative reviews and consensus statements in our reports, we do not critically appraise them. Such studies can produce accurate results but they are generally too prone to bias to allow determination of their validity beyond their immediate setting.

Details of Evidence Request

Patients (Subjects): patients with Friedreich's ataxia

Intervention: any allied health interventions

Comparisons: any other intervention, placebo, no intervention

Outcomes: any

Search terms

(see Appendix 2 for exact search strategy)

Patient terms: Friedreich's ataxia

Intervention terms: rehabilitation, occupational therapy, physical therapy, physiotherapy

Comparison terms: (none)

Outcome terms: (none)

Resources Searched

We searched the following databases:

The Cochrane Library (CD-ROM) - 2001 Issue 1

MEDLINE (OVID)- 1966 to February Week 1 2001

PREMEDLINE (OVID) – April 2, 2001

CINAHL (OVID) - 1982 to March 2001

Current Contents (OVID) - 1993 Week 26 to 2001 Week 16

SocioFile – 1974 to February 2001

PsycINFO – 1967 to March week 3 2001

Refinements, Searching & Reporting Constraints

We included items of evidence that were available to us on April 11, 2001.

RESULTS

We did not identify any relevant articles higher than Level IV evidence. Our search identified six articles which were excluded from critical appraisal for the following reasons:

Reason for exclusion	Number
Level IV evidence	4
Non-English articles	1
Not relevant	1
Total	6

The citations of the articles (including abstracts if available) excluded from critical appraisal are attached for your information.

REFERENCES

ARTICLES CRITICALLY APPRAISED

None

ARTICLES EXCLUDED FROM CRITICAL APPRAISAL

Descriptive Case Reports or Case Series (Level IV evidence)

Blattner, K. A. (1988). Friedreich's ataxia: a suggested physical therapy regimen. *Clinical Management in Physical Therapy* 8(4): 14-15.

Fillyaw, M. J. & Ades, P. A. (1989). Endurance exercise training in Friedreich ataxia. *Archives of Physical Medicine & Rehabilitation* 70(10): 786-788.

Koch, S. J., Arego, D. E. & Bowser, B. (1986). Outpatient rehabilitation for chronic neuromuscular diseases. *American Journal of Physical Medicine* 65(5): 245-257.

Ramos, E., Latash, M. P., Hurvitz, E. A. et al. (1997). Quantification of upper extremity function using kinematic analysis. *Archives of Physical Medicine & Rehabilitation* 78(5): 491-496.

Non-English articles

Hartmann-von Monakow, K. (1969). [Therapy of cerebellar diseases]. *Bibliotheca Psychiatrica et Neurologica* 139: 691-692.

Not relevant

D'Ambrosio, R., Leone, M., Rosso, M. G. et al. (1987). Disability and quality of life in hereditary ataxias: a self-administered postal questionnaire. *International Disability Studies* 9(1): 10-14.

APPENDIX 1

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Levels Of Evidence

Based on "How to use the evidence: assessment and application of scientific evidence" (National Health & Medical Research Council, Canberra, 2000):

Level I		Evidence obtained from a systematic review (or meta-analysis) of all relevant randomised controlled trials.
Level II		Evidence obtained from at least one randomised controlled trial.
Level III	-1	Evidence obtained from pseudorandomised controlled trials (alternate allocation or some other method).
	-2	Evidence obtained from comparative studies (including systematic reviews of such studies) with concurrent controls and allocation not randomised, cohort studies, case control studies or interrupted time series with a control group.
	-3	Evidence obtained from comparative studies with historical control, two or more single-arm studies or interrupted time series without a parallel control group.
Level IV		Evidence obtained from case series, either post-test or pretest/post-test.

APPENDIX 2

Search strategy

	Search terms for MEDLINE, PREMEDLINE, CINAHL, Current Contents, PsycINFO, SocioFile
1	Friedreich ataxia/
2	(Fried\$ adj ataxia).mp
3	Exp Rehabilitation/
4	Rehabil\$.mp
5	Occupational therap\$.mp
6	Physical therap\$.mp
7	Physiotherap\$.mp
8	Allied health.mp
9	or/1-2
10	or/3-8
11	9 and 10

\$ = wildcard indicating truncation