THE ESCAPE TRIAL FOR OLDER PEOPLE WITH CHRONIC LOW BACK PAIN: PROTOCOL OF A RANDOMIZED CONTROLLED TRIAL

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Background: Low-back pain is one of the most common health conditions worldwide. It is defined as pain below the costal margin and above the inferior gluteal folds. Current guidelines recommend management of chronic health (e.g., low back pain) conditions in older people at primary health care settings using active strategies (e.g., exercise). In non-specific low back pain, high quality evidence supports active strategies for general population. However, the management of non-specific low back pain in older people has been overlooked and evidence is limited to a small number of low powered randomized controlled trials with high risk of bias.

Objectives: The primary outcomes will be pain intensity over the previous week and disability. The secondary outcomes will be: Global impression of recovery; frequency of falls; fear of falling; and Physical Activity level.

Methods: This is a prospectively registered, open, two-arm randomized controlled trial comparing the group-based exercise and waiting list. The randomization sequence to our two groups of interest (i.e., group-based exercise or control) will be computer-generated by one of the investigators who will not be involved in the recruitment of participants. The sequence will be blocked (block sizes of 4, 6, and 8, in random order). Allocation will be concealed in sequentially numbered, sealed, opaque envelopes. Participants will be stratified by gender (female or male). The GBE comprises three sessions per week of group-based exercise in a local community center, for 8 weeks. Each group session will consist of 10 to 18 participants and each exercise session will last 60 minutes and consist of four stages: (1) five minutes warm up (i.e., self-regulated walk); (2) twenty minutes of moderate intensity walking; (3) thirty minutes of resistance training for the major muscles of the leg, trunk and arm and balance exercises that progress in difficulty; and (4) five-minute cool down period (i.e., self-regulated walk). Participants randomly allocated to control group will remain on a waiting list. In addition, weekly contact will be made to ensure that they do not start treatment during the study protocol. However, previous treatments like medications will be allowed. The sample size calculation was performed using the G*Power 3.1 software. A sample size of 120 participants was calculated (60 in each group), with a statistical power of 80%, alpha of 5%, and 20% dropout rate. The statistical analysis will be performed following the intention-to-treat analysis principles. Then, considering normal distribution, an analysis of mixed linear models (random intercepts and fixed coefficients) will be conducted, which incorporated terms for treatment, time, and the treatment-time interactions.

Implications: The practice of individualized exercise has been studied for the management of chronic non-specific low back pain in older people. However, the group exercise, even showing high quality evidence for the improvement of several important outcomes in this population, has been ignored until now. Thus, the results of this study have the potential to indicate a viable and accessible strategy for managing chronic non-specific low back pain in older people.

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CONTENT ANALYSIS OF INFORMATION AVAILABLE ON INTERNET SOURCES ABOUT PLAY ACTIVITIES

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Background: Child development depends on motor and environmental stimuli that can be experienced during play activities. Parents’ virtual access to information on how to stimulate their babies through play has been frequent, but the quality of this information should be investigated.

Objective: To verify the type of information available on internet sources about play activities for children up to 1 year of age.

Methods: Content analysis study, which is part of a collaborative study between the University of Brasilia (UnB) and the University of Delaware (UD). The same coding protocol developed by a team of specialists in child development and early intervention at the UD was used. This study is a sub-analysis in which only Brazilian sources related to play activities available on the internet for children under 1 year old were included. A search was carried out through the Google site, using the terms: “play activities for babies”, “how to play with babies”, “play activities” and “babies”. The inclusion criteria of the analyzed sources were a) any sources on websites that contained information about play activities for children younger than 1 year of age; b) sources available on the internet. Information regarding the type of source, details of the authors, child’s development process and the role of parents in development were extracted and individually coded using Excel by two coders (inter-rater reliability: M=87.98%, SD= 6.2).

Results: One hundred and fifteen sources were identified, and 100 sources were included. Most sources included were popular websites (52%), followed by professional organization websites (24%). Among the sources included, only 9% mentioned the authors’ credentials, 5% mentioned information about the child development process, and 5% about the role of parents in the developmental process.

Conclusion: Most of the sources were from popular websites, and in general, those provided a few or no information related to the authors’ credentials (e.g., authors’ education and expertise). Content and information about how child development occurs and the importance of parents in child development were found on the minority of websites.

Implications: Parental knowledge can directly impact their children’s development. Play websites can be a valuable source of information for parents, but it is extremely important that the information provided is accurate, up-to-date and evidence based.