FINAL Management of abnormal muscle tone in adults aged 19 and over with cerebral palsy, including spasticity and associated movement disorders such as dystonia

							No of patients		Effect			
No of studie s	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	SDR	Pre- opera tive	Relativ e (95% Cl)	Absolute	Quality	Importance
Walking (follow-up 5 years; measured with: Self rated ambulatory ability; range of scores: 0-10; Better indicated by higher values)												
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ¹	none	21	21	-	MD 2.3 higher (2 lower to 6.6 higher)	VERY LOW	CRITICAL
Walking (follow-up 5 years; measured with: walking, running & jumping sub-scale of GMFM; range of scores: 0-100; Better indicated by higher values)												
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	7	7	-	MD 15.09 higher (6.1 to 24.08 higher)	VERY LOW	CRITICAL
Gross values)		(follow-u	p 15 months; m	easured with:	Jebsen-Taylo	or hand function	test; rar	ige of so	cores: 0-7	20; Better in	dicated b	y lower
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	7	7	-	MD 35.29 lower (55.71 to 14.87 lower)	VERY LOW	CRITICAL
	motor function values)	(follow-u	p 4 months; me	asured with: C	Gross Motor F	unction Measur	e (GMFN	l); range	of score	s: 0-100; Bet	ter indica	ted by
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	no serious imprecision	none	7	7	-	MD 6.25 higher (1.73 lower to 14.23 higher)	LOW	CRITICAL

Table 14: Clinical evidence profile: Comparison 2: selective dorsal rhizotomy, post-operative versus pre-operative outcomes

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Quality	assessment						No of patient	S	Effect			
No of studie s	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	SDR	Pre- opera tive	Relativ e (95% Cl)	Absolute	Quality	Importance
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	19	19	-	MD 2.11 lower (2.8 to 1.42 lower)	VERY LOW	CRITICAL
Tone -	hamstrings (fol	llow-up 4	months; measu	red with: Mod	ified Ashwort	h scale; range c	of scores	: 0-4; Be	etter indi	cated by lowe	er values)	
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	19	19	-	MD 3.47 lower (3.83 to 3.11 lower)	VERY LOW	CRITICAL
Tone -	gastroc / soleu	s (follow-	up 4 months; m	easured with:	Modified Ash	worth scale; rar	nge of so	ores: 0-	4; Better	indicated by	lower va	lues)
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	19	19	-	MD 2.96 lower (3.52 to 2.4 lower)	VERY LOW	CRITICAL
Tone -	wrist flexors (fo	ollow-up 1	l5 months; mea	sured with: As	shworth scale	; range of score	s: 1-5; B	etter ind	dicated b	y lower value	es)	
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	6	6	-	MD 2.5 lower (3.6 to 1.4 lower)	VERY LOW	CRITICAL
Tone -	digital flexors (follow-up	15 months; me	asured with:	Ashworth sca	le; range of sco	res: 1-5;	Better in	ndicated	by lower valu	ies)	
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ²	none	7	7	-	MD 2.28 lower (3.25 to 1.3 lower)	VERY LOW	CRITICAL
Health values)		of life (fol	llow-up 5 years;	measured wit	th: Self rated	visual analogue	scale; ra	ange of s	scores: 0	-10; Better in	dicated b	y higher
1	observational studies	no serious	no serious inconsistency	no serious indirectness	serious ¹	none	21	21	-	MD 2 higher (2.3	VERY LOW	CRITICAL

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Quality	v assessment						No of patients		Effect			
No of studie s	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	SDR	Pre- opera tive	Relativ e (95% CI)	Absolute	Quality	Importance
		risk of bias								lower to 6.3 higher)		
Pain (f	ollow-up 5 year	s; measu	red with: Self ra	ted visual ana	logue scale;	range of scores:	: 0-10; В	etter ind	licated by	lower value	s)	
1	observational studies	no serious risk of bias	no serious inconsistency	no serious indirectness	serious ¹	none	21	21	-	MD 1.9 lower (9.61 lower to 5.81 higher)	VERY LOW	IMPORTA NT
Advers	e events - not i	reported										
-	-	-	-	-	-	-	-	-	-	-		IMPORTA NT
Satisfa	ction - not repo	orted										
-	-	-	-	-	-	-	-	-	-	-		IMPORTA NT
Concu	rrent medicatio	ns - not r	eported									
-	-	-	-	-	-	-	-	-	-	-		IMPORTA NT

CI: confidence interval; GMFM: Gross Motor Function Measure; MD: mean difference; MID: minimally important difference; SDR: selective dorsal rhizotomy

1 Confidence interval includes one default MID threshold

2 Number of participants <400