Experts' beliefs on physiotherapy for patients with ankylosing spondylitis and assessment of their knowledge on published evidence in the field. Results of a questionnaire among international ASAS members

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AIM: The aim of this study was to assess both the opinion of an international group of experts about the place and importance of physiotherapy in the management of ankylosing spondylitis (AS) as well as the awareness of the responders about scientific evidence on efficacy and cost-effectiveness of physiotherapy in AS.

METHODS: An e-mail questionnaire "Experts' Beliefs on Physiotherapy for Patients with Ankylosing Spondylitis" has been sent to all 71 international ASsessment of Ankylosing Spondylitis (ASAS) members. Completion of the twenty-eight-item questionnaire was done through the ASAS website (www.ASAS-group.org).

RESULTS: The number of responders was 53 (response rate 73%). Altogether 94% of the responders regard themselves as experts in the field of clinical care for AS patients. There is almost unanimous (86-92%) consensus on the efficacy of physiotherapy (widely defined, i.e. as physical therapy-including exercises, application of physical modalities and spa-therapy) for patients with axial and peripheral joint manifestations of AS. Physiotherapy is considered to be indicated for both early AS (less than 2 years after diagnosis) (88%) and AS of longer duration (2 to 10 years) (94%), implying that this non-pharmaceutical intervention should be made available for or should be prescribed to AS patients. Also daily exercises at home are considered indicated for both early (less than 2 years after diagnosis) AS (90%) and AS of longer duration of disease (90%).

High-level evidence (Cochrane reviews or publications of one or more randomized controlled clinical trials) favoring efficacy of physiotherapy was considered available by 33% of the participants, whereas 43% replied "no" and 24% did not know. Finally, excluding the costs of the intervention, 39% of the participants reported that Spa-therapy might reduce health care costs as usage of NSAIDs, physician visits and ability to work or sick leave, whereas 26% said "no" and 35% did not know.

CONCLUSIONS: The international ASAS experts hold a favorable opinion on the efficacy of physiotherapy in AS, including group exercises and spa therapy, almost irrespective of disease duration and type of articular involvement (axial/peripheral). Awareness of published evidence on physiotherapy in AS is unsatisfactory.

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