**Table E42. Data abstraction of systematic reviews of traction**

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| **Author, Year** | **Comparison** | **Data Sources** | **Number and****Type of Studies** | **Interventions and Number of****Patients** | **Methods for Rating Methodological Quality of Primary Studies** | **Methods for Synthesizing Results of Primary Studies** |
| Wegner, 2013 | Traction vs. sham,placebo or no treatmentTraction vs. other active treatments One type of traction vs. another type of traction | MEDLINE, CCRCT,EMBASE, CINAHL, Cochrane Back Group Specialized Register (all through August 2012) | 32 RCTs(n=2,762)Traction vs. sham, placebo or no treatment: 13 trials Traction vs. other treatments: 15 trialsTraction vs. traction: 5 trialsChronic LBP: 10 trialsSubacute LBP: 1 trialMixed acute, subacute and chronic: 17 trials Unspecified duration of LBP: 5 trials | A. TractionA1. Traction + physiotherapy B. Sham, placebo or no treatmentB1. Physiotherapy aloneC. Other interventions (exercise, interferential therapy, massage, balneotherapy) | Cochrane BackReview Group criteria(2009) | Qualitative synthesis(due to heterogeneity of outcomes reported) including study risk of bias; results pooled (qualitative analysis) when possible |

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| **Author, Year** | **Results** | **Adverse Events** | **Quality****Rating** | **Comments** |
| Wegner, 2013 | A vs. BDifference in LBP population with or without radiationPain, 3-5 weeks (2 trials): -18.49 (95% CI -24.12 to -12.87) Pain, 6-12 weeks (1 trial): 0.30 (95% CI -9.91 to 10.51) Pain, 6 months (1 trial): -0.5 (95% CI -11.55 to 10.55)Pain, 1 year (1 trial): -9.10 (95% CI -19.32 to 1.12)Functional status, 3-5 weeks (1 trial): -1.30 (95% CI -2.90 to 0.30) Functional status, 6-12 weeks (1 trial): 0.10 (95% CI -1.76 to 1.96) Functional status, 6 months (1 trial): 0.70 (95% CI -1.16 to 2.56) Global improvement, 3-5 weeks (2 trials): -0.03 (95% CI -0.17 to 0.12)Global improvement, 6-12 weeks (2 trials): 0.03 (95% CI -0.12 to 0.18) Global improvement, 6 months (1 trial): 0.02 (95% CI -0.14 to 0.18) Return to work, 3-5 weeks (1 trial): -1.80 (95% CI -5.51 to 1.91)Return to work, 6-12 weeks (1 trial): -4.30 (95% CI -14.71 to 6.11) Return to work, 6 months (1 trial): -8.00 (95% CI -26.99 to 10.99)Difference in LBP population with radiationPain, 1-2 weeks (2 trials): 2.93 (95% CI -14.73 to 20.59)Global improvement, 1-2 weeks (4 trials): 0.13 (95% CI 0.04 to 0.22) Global improvement, 3-5 weeks (2 trials): 0.27 (95% CI 0.12 to 0.43) Global improvement, 12-16 weeks (1 trial): 0.06 (95% CI -0.16 to 0.28) Return to work, 2 years (1 trial): 0.15 (95% CI -0.15 to 0.45)Difference in LBP population without radiationPain intensity, 12-16 weeks: -4.00 (95% CI -17.65 to 9.65)A vs. A (one traction type versus another)Difference in LBP population with or without radiationGlobal improvement, 1-2 weeks: -0.08 (95% CI -0.46 to 0.30; static traction vs. intermittent traction); 0.53 (95% CI 0.32 to 0.73; auto traction vs. mechanical traction)Difference in LBP population with radiationPain, 1-2 weeks (3 trials): 6.58 (-2.77 to 15.93)Global improvement, 1-2 weeks (1 trial): -0.16 (-0.40 to 0.09) | Adverse events were reported in11/32 studies; 4 reported no adverse events.A vs. BAggravation of symptoms (2 trials): 24% (9/38) vs. 20% (4/20); RR 1.18 (95% CI 0.42 to3.37); 12% (5/43) vs. 2% (1/43); RR 5.00 (95% CI 0.61 to 41) Subsequent surgery (1 trial): 9% (7/82) vs. 0% (0/60); RR 11 (95% CI 0.64 to 189)A vs. AIncreased pain (2 trials): Inversion vs. conventional traction - 79% (11/14) vs. 15% (2/13); RR 5.11 (95% CI 1.39 to19); Static vs. intermittent traction - 31% (4/13) vs. 15% (2/13); RR 2.00 (95% CI 0.44 to9.08)A1 vs. B1Worsening of symptoms (1 trial):25% (5/21) vs. 37% (8/21); RR0.63 (95% CI 0.24 to 1.60)A vs. CTemporary deterioration (1 trial): Traction vs. exercise - 17% (4/24) vs. 15% (4/26); RR 1.08 (95% CI 0.30 to 3.86) | Good | Results notstratified according to duration of LBP |

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| **Author, Year** | **Results** | **Adverse Events** | **Quality****Rating** | **Comments** |
| Wegner, 2013(cont.) | A1 vs. B1Difference in LBP population with or without radiation Pain, 1-2 weeks (1 trial): 0.00 (95% CI -7.61 to 7.61) Pain, 12-16 weeks (1 trial): 5.00 (95% CI -5.67 to 15.67) Functional status, 1-2 weeks (1 trial): 3.90 (-1.91 to 9.71)Functional status, 12-16 weeks (1 trial): 4.00 (95% CI -2.78 to 10.78) Global improvement, 1-2 weeks (1 trial): 0.05 (95% CI -0.25 to 0.35) Global improvement, 12-16 weeks (1 trial): 0.53 (95% CI 0.28 to 0.79)Difference in LBP population with radiationPain, 1-2 weeks (2 trials): -7.96 (95% CI -16.53 to 0.61) Pain, 6 weeks (1 trial): 2.00 (95% CI -10.02 to 14.02)Functional status, 1-2 weeks (2 trials): -0.08 (95% CI -0.49 to 0.32) Functional status, 6-12 weeks (1 trial): 0.14 (95% CI -0.35 to 0.63) Functional status, 12-16 weeks (1 trial): 0.43 (95% CI -0.30 to 1.16) Functional status, 6 months (1 trial): 0.18 (95% CI -0.54 to 0.90)Global improvement: No pooled estimates for any timepoint. Results from three individualtrials showed no significant difference between groups from timepoints ranging from 1-2 to 12-16 weeks.Return to work, 3-5 weeks (1 trial): OR 1.41 (95% CI 0.61 to 3.28) A vs. CDifference in LBP population with or without radiationPain: No pooled estimates for any timepoint. Results from four individual trials were mixed for all timepoints ranging from 1-2 weeks to 1 yearFunctional status, 1-2 weeks (1 trial): -0.06 (95% CI -0.40 to 0.27) Functional status, 3-5 weeks (1 trial): 0.20 (95% CI -0.05 to 0.46) Functional status, 12-16 weeks (2 trials): -0.03 (95% CI -0.26 to 0.21) Functional status, 6 months (1 trial): 0.15 (95% CI -0.16 to 0.45) Functional status, 1 year (1 trial): 0.04 (95% CI -0.25 to 0.34)Global improvement: No pooled estimates for any timepoint. Results from three individual trials were mixed for timepoints ranging from 1-2 to 12-16 weeks.Difference in LBP population with radiationPain: No pooled estimates for any timepoint. Results from two individual trials showed no significant difference between groups from timepoints ranging from 1-2 to 12-16 weeks. Functional status: No pooled estimates for any timepoint. Results from two individual trials showed no significant difference between groups from timepoints ranging from 1-2 to 12-16 weeks.Global improvement: No pooled estimates for any timepoint. Results from two individual trials showed no significant difference between groups from timepoints ranging from 1-2 and 3-5 weeks. |  |  |  |

**Please see Appendix C. Included Studies for full study references.**