

# Assessing the effectiveness of a lateral glide cervical spine mobilisation on cervicobrachial (neck and arm) pain

<b>Submission date</b> 16/06/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 14/04/2011	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 04/10/2017	<b>Condition category</b> Musculoskeletal Diseases	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

## Study information

### Scientific Title

A randomised controlled trial to assess the effectiveness of a lateral glide cervical spine mobilisation on cervicobrachial (neck and arm) pain

### Acronym

CBS Trial

### Study objectives

The primary objective of this study is to investigate whether a self-management protocol with lateral glide mobilisation is more beneficial than a self-management protocol in isolation for participants with cervicobrachial syndrome (CBS).

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

South Staffordshire Local Research Ethics Committee approval pending as of 17/06/2010

### Study design

Randomised controlled trial

### Primary study design

Interventional

### Secondary study design

Randomised controlled trial

### Study setting(s)

Other

### Study type(s)

Treatment

### Participant information sheet

Not available in web format, please use contact details below to request a patient information sheet

### Health condition(s) or problem(s) studied

Musculoskeletal pain

### Interventions

Patients will be randomised to

1. Lateral glide with self-management
2. Self-management

### Intervention Type

Other

**Phase**

Not Applicable

**Primary outcome measure**

Pain, assessed by Visual Analogue Score (VAS)

**Secondary outcome measures**

1. Short Form 36-item Health Survey (SF36) (RAND)
2. Neck and Upper Limb Index (NULI)
3. Tampa scale of Kinesiophobia
4. Global Rating of Change (GROC)
5. Self-Administered Leeds Assessment of Neuropathic Symptoms and Signs (S-LANSS)
6. Upper limb nerve extensibility test
7. Cervical Active Range Of Motion (AROM)

**Overall study start date**

24/06/2009

**Completion date**

24/06/2012

## **Eligibility**

**Key inclusion criteria**

1. Aged 18 - 65 years experiencing CBS (described as pain originating in the neck with associated pain radiating below the level of the shoulder joint into the arm) with or without parasthesia and or weakness in a dermatomal distribution
2. Had symptoms for greater than 6 weeks
3. Adequate knowledge of English to participate in a neuro-musculoskeletal examination and to answer the study questionnaire
4. Able to attend assessment and treatment appointments
5. Will have verbally agreed to attend the review appointment at 6, 26 and 52 weeks following initiation of the treatment

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

96

## **Key exclusion criteria**

1. Presenting with any red flags: severe unremitting night pain, unexplained weight loss, history of cancer, general malaise, and constant unvarying pain
2. Bilateral arm symptoms
3. Signs and symptoms strongly suggestive of thoracic outlet syndrome or a specific peripheral pathology e.g. adhesive capsulitis, sub acromial impingement etc.
4. Specific pathology affecting nerve function e.g. multiple sclerosis, known peripheral vascular disease, diabetes
5. Known specific pathology affecting systemic joint function e.g. rheumatoid arthritis, ankylosing spondylitis
6. Cervical spine surgery, botulinum toxin injections or epidural injections to cervical spine or planned imminent treatment
7. Having other forms of manual therapy for their CBS symptoms e.g. osteopathy or chiropractics
8. Involved in compensation and or litigation associated with neck and or upper limb pain
9. Already involved in a research trial

## **Date of first enrolment**

24/06/2009

## **Date of final enrolment**

24/06/2012

## **Locations**

### **Countries of recruitment**

England

United Kingdom

### **Study participating centre**

**Queen's Hospital**

Burton on Trent

United Kingdom

DE13 0RB

## **Sponsor information**

### **Organisation**

University of Birmingham (UK)

### **Sponsor details**

c/o Brendan Lavery

Research and Commercial Services

Edgbaston

England

United Kingdom  
B15 2TT

**Sponsor type**  
University/education

**ROR**  
<https://ror.org/03angcq70>

## **Funder(s)**

**Funder type**  
Other

**Funder Name**  
Manipulation Association of Chartered Physiotherapists (UK)

## **Results and Publications**

**Publication and dissemination plan**  
Not provided at time of registration

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**  
Not provided at time of registration