Reviewer's report

Title: Advice or Exercise for Chronic Whiplash Disorders? Design of a randomized controlled trial.

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Reviewer: Robert Ferrari

Level of interest: A paper whose findings are important to those with closely related research interests

Advice on publication: Unable to decide on acceptance or rejection until the authors have responded to the compulsory revisions

This is an excellent proposal for a trial of therapy in whiplash patients. I very much hope the authors are able to proceed with this study as it is much needed. Because the manuscript is descriptive only and does not contain data, I will not evaluate it as per the usual questions posed for original research manuscripts. I can state that the objectives and methods of the study are generally well-described, in sufficient detail. The title and abstract are appropriate and the writing is acceptable.

Compulsory Revisions

I put forward questions or suggestions that pertain to the study design. These should be dealt with by the authors before a decision on publication can be reached

1. The impression is that the authors perceive their subjects to have neck pain only. Since a sizeable portion of whiplash patients (at least in my country) also have back pain, the researchers should include subjects with low back pain and pay as much attention to documenting low back pain and measuring back-specific disability.

Further, where they have statements like "that physical activity ... is unlikely to further damage the neck", they should include "neck and back"

Where the researchers indicate they will assess upper body mobility, will they also not include an assessment of lower body mobility?

2. A certain percentage of subjects will have tendinitis of the limbs or things like trochanteric and anserine bursitis. Will the researchers screen for these things? Will these subjects be excluded? or will their limb problems also be treated? One wonders what the outcome would be for people who have neck pain and shoulder tendinitis, but have no treatment prescribed for the shoulder tendinitis like a corticosteroid injection and rotator cuff exercises. At the least, the researchers need to identify any non-spinal injuries that could affect overall outcomes.
3. I suggest a full symptom checklist be obtained at the onset. It is important to know if these patients have things like cognitive symptoms, jaw pain, chest pain, dizziness, et cetera and to see if any of these additional symptoms affect outcome measures. It may be that subjects with multiple non-pain symptoms, for example have a different response to treatments. Also, this data will let the rest of us know what kind of patients entered the study.

4. The litigation status as well as any sources of monetary compensation including private insurance schemes needs to be known for each subject and reported. The researchers may question the relevance of this, but there are enough reasons to have concerns about confounding factors that one thing that must be shown to have been successful in randomization is randomization for litigation/compensation status.

**Competing interests:**

None declared.