Author's response to reviews

Title: How good is inspection of movement control tests of the lumbar spine? A reliability study

Authors:

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Version: 4 Date: 29 July 2007

Author's response to reviews: see over
Author’s response to reviews

Title: How good is inspection of movement control tests of the lumbar spine? A reliability study

changed to: Reliability of movement control tests in the lumbar spine

Authors: Hannu Luomajoki, Jan Kool, Eling D. de Bruin, Olavi Airaksinen

Version: 2 Date: 29 07 2007
Author’s response to reviews: see over

Reviewer’s report

Title: Version: 2 Date: 29 May 2007
Reviewer: Gregory Lehman

Reviewer’s report:

General
General

This is a valuable study. It is an excellent example of clinical research that can be performed with minimal resources in a clinic environment. My congratulations to the researchers.

Thank you!

Major/Minor Essential Revisions

Title: The title is awkward. Something more simple may be better. E.g. Reliability of movement control tests in the lumbar spine.

The title has been changed as suggested by reviewer

You aren’t really testing how “good” the tests are, rather just their reliability.

I would like to see more information describing the exact instructions to the participants in the study. How do you tell the participants to move? Can you publish the standardized instructions? Can they change how they perform the test with feedback? The ability to change their performance is important. If they perform the test “incorrectly” is that because they are physically incapable of performing it “correctly” or because they chose a pattern of movement that happens to be considered incorrect?

- Added: Page 7. test protocol added: For example in the prone knee bend test the commando was: “please bend your knee so far as you can without moving your back” and: “keep your back in neutral position, do not let it move while bending the leg”,
And
Added: If the patient was still performing the test incorrectly, it was permitted.

What next?: Accept after minor essential revisions
You collected both a symptomatic and asymptomatic population. In your methods it appears that you pooled all of the data together for the analysis. Did you perform separate repeatability analyses on the different participant groups?

- **No, we did not. We added on text following remark:** Page 10. a new para: On average, the LBP patients were performing 3-4 tests incorrectly out of 10 and the healthy controls on average 1 test out of ten. We did not follow this data further in this study.

Paragraph 9 in the Discussion: “One study and other....” This is an awkward sentence that needs to be written more clearly. The paragraph also seems unnecessary. You did not measure stability and can not make an comments regarding it. I can understand how it is relevant but it appears out of place with the majority of your discussion.

- Page 13. last paragraph. Omitted 2 first sentences
- Page 14. last para: omitted: Our next study focuses on this

A number of grammatical and spelling errors exist through out the text that need to be corrected.

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**English has been once again proof read and corrected (american English)**

Discretionary Revisions (which the author can choose to ignore)

Considering this is an open source journal and fully online have you considered uploading some video examples of normal and abnormal movements control tests. This journal is an excellent vehicle to do such a thing.

That could be done, We have not. If wanted, we can do that.

**What next?: Accept after minor essential revisions**
Reviewer's report

Title: How good is inspection of movement control tests of the lumbar spine? A reliability study

Version: 2 Date: 13 June 2007

New version: 2 Date: 29 07 2007

Reviewer: Lieven Danneels

Reviewer's report:

This manuscript provides data on the reliability of the inspection of movement control tests of the lumbar spine. This study is well performed and provides the reader scientific as well as clinical relevant new information. Therefore I would like to advise to accept this paper.

Thank you!

Minor comments:

P2
background section: diagnosis is not always done by physiotherapists...

- Abstract; Background: diagnosis is done by physiotherapists—omitted

p6 methods:
- why 27 LBP patients and 13 others?
- including a sample of “not LBP” does not automatically means that these subjects “would perform the tests correctly”

- Page 6. study sample. Added last sentence 1. para: Table 1. shows the background data of the patients in the videos.
- Page 6. Study sample 2. para: We considered it important to also include in the sample subjects who would be performing the tests for avoiding a bias through too many incorrect test results

p 8
analysis: rates of intra and inter agreement WERE...

Changed

p9
results:
figure 1 ???

Changed: Tables and figures numbered understandable

p11
Van Dillen: flexion in standing
This study: waiters bow
I am convinced that both exercises are very different!

- Notice: Page 11. line 6-7. we did not change it, although Reviewer was “complaining”, because we mean the same with him.

P. 11, last sentence para 1:
Methods HAVE been

What next?: Accept after minor essential revisions
Changed

P 12 last para: Five of the tests were the as also... (??)

P14, para 2:
Omit “our next study focuses on this”
Omitted

- New changes: Movement control dysfunction everywhere with abbreviation MCD replaced. English proof read and corrected.

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

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