
Design: Randomized clinical trial

Study question: in the setting of shoulder impingement syndrome, are there differences in outcome between physical therapy treatment with self-management training (exercise) and treatment with joint and soft tissue mobilization (manual) techniques

Reasons not to cite as evidence:

- Several important indicators of study quality are absent from the report
  - There is no description of the method of randomization
  - Allocation concealment is not mentioned and may not have been done
  - Blinding of outcome assessment is unclear
  - Only four week data are presented
  - The presentation of results is brief, sketchy and unclear
    - For example, range of motion (ROM) for abduction, flexion, and external rotation, is stated to have improved significantly in the manual therapy group but not in the exercise group
    - The only ROM outcome data is in the form of bar graphs in Figure 2, which present external and internal rotation but not flexion or abduction
    - The bar graphs appear to show improvement in both groups, with the “after treatment” ROM appearing to be greater for the exercise than for the manual therapy group
    - The cryptic statement is made that “there were statistically differences [sic] between the groups in function (P>0.05)”
    - A similarly cryptic set of results is presented in Table 2, the “Neer results of patients with subacromial impingement”
    - The table is broken down into “Neer 1” and “Neer 2” and counts of patients with values of 0 and 1
    - “Neer 1” and “Neer 2” generally refer to classifications of proximal humeral fractures, and without explanation, make no sense in this context
  - The article is not only unsuitable for citation as evidence; it is unsuitable for citation as information