

RESEARCH IN OSTEOPATHY

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AGENDA

- REVIEW OF MATERIAL
 - HYPOTHESIS/RESEARCH QUESTION
 - P-VALUE
 - STUDY DESIGNS
 - VARIABLES AND MEASUREMENTS
- SAMPLE SIZE DETERMINATION
- CHOOSING MEASUREMENT INSTRUMENT/TOOL
- QUASI-EXPERIMENTAL DESIGNS
- RELIABILITY STUDIES

REVIEW: RESEARCH QUESTION

1. WHY DO PATIENTS SEEK OSTEOPATHIC TREATMENT?
2. DOES OSTEOPATHIC INTERVENTION X EFFECTIVELY REDUCE PATIENTS' PAIN AFTER 5 SESSIONS?
3. IS THERE AN ASSOCIATION BETWEEN THE AGE OF PARTICIPANTS AND THE NUMBER OF OSTEOPATHIC SESSIONS ATTENDED?
4. IS THERE A DIFFERENCE BETWEEN OSTEOPATHIC INTERVENTION X AND INTERVENTION Y IN INCREASING THE PARTICIPANTS' QUALITY OF LIFE?
5. HOW RELIABLE IS A PARTICULAR TECHNIQUE IN DIFFERENTIATING EMPTY VS FILLED BLADDER?
6. IS THERE A CONSENSUS IN PUBLISHED STUDIES REGARDING THE EFFECTIVENESS OF INTERVENTION X?

REVIEW: HYPOTHESIS

Hypothesis = Research Question + **Measurement Tool** + " **$p \leq 0.05$** "

Examples of Hypothesis formulation:

1. Osteopathic treatment will significantly reduce the redness associated with acne as measured by **infra-red photography**, $p \leq 0.05$.
2. Five sessions of osteopathic intervention X will result in significant reduction in patients' pain as measured by **Visual Analog Scale**, $p \leq 0.05$.
3. Three trained osteopathy students at the end of their curriculum could achieve at least moderate agreement on osteopathic sacral palpatory diagnostic tests, **evaluated using Fleiss K (Kappa) statistics**, $p \leq 0.05$.
4. Osteopathic treatment X is more effective than osteopathic intervention Y in increasing the participants' quality of life as measured by **WHOQOL questionnaire**, $p \leq 0.05$.

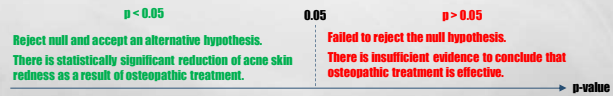
REVIEW: HYPOTHESES

Null Hypothesis (H₀):

Osteopathic treatment **will NOT** significantly reduce the redness associated with acne as measured by **infra-red photography**, $p > 0.05$.

Alternative Hypothesis (H_a):

Osteopathic treatment **will** significantly reduce the redness associated with acne as measured by **infra-red photography**, $p \leq 0.05$.



UNDERSTANDING RESEARCH ARTICLES

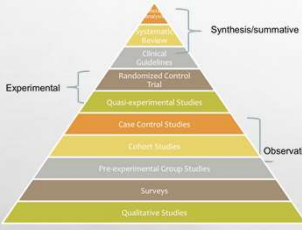
Table 2 Comparison of the VAS, MOV and ROM values between OMT and CCT groups (n = 25) at T0, T1 and T2.

		OMT		CCT		t	p
T0	VAS ^a	6.9	±0.88	6.40	±1.42		NS
	MOV ^b	35.1	±4.36	34.9	±34.5		NS
	ROM ^c	62.4	±10.67	64.5	±9.55		NS
T1	VAS ^a	1.5	±0.85	2.6	±0.7	-4.995	0.000
	MOV ^b	46.0	±4.78	41.3	±4.52	3.572	0.000
	ROM ^c	81.9	±10.31	71.9	±9.05	3.654	0.000
T2	VAS ^a	3.8	±1.26	4.4	±1.75		NS
	MOV ^b	42.9	±2.69	40.4	±2.41	3.461	0.001
	ROM ^c	80.5	±5.44	72.4	±2.95	6.545	0.000

^a The visual analogue pain scale was scored from 0 to 10.
^b Measure in millimeters.
^c Measure in degrees.

Source: A.M. Cuccia et al. Osteopathic manual therapy versus conventional conservative therapy in the treatment of temporomandibular disorders: A randomized controlled trial. *Journal of Bodywork & Movement Therapies* (2010) 14, 179-184
<https://doi.org/10.1016/j.jbmt.2010.03.001>

REVIEW: STUDY DESIGNS

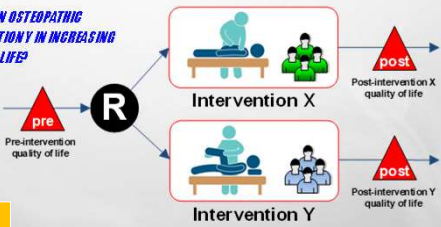


Acceptable Forms of Student Research:

1. Experimental and quasi-experimental research
2. Reliability, validity, and palpation studies
3. Technique studies
4. Case series studies
5. Fundamental studies - investigative but non-experimental
6. Qualitative studies

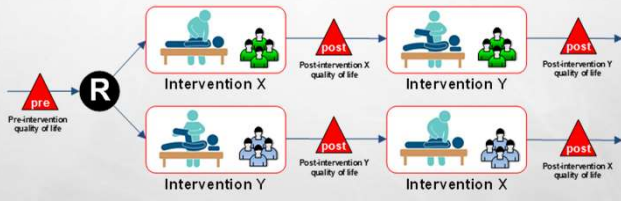
REVIEW: EXPERIMENTAL (RCT)

RESEARCH QUESTION:
 IS THERE A DIFFERENCE BETWEEN OSTEOPATHIC INTERVENTION X AND INTERVENTION Y IN INCREASING THE PARTICIPANTS' QUALITY OF LIFE?



R	O	X ₁	O
R	O	X ₂	O

REVIEW: QUASI-EXPERIMENTAL (CROSSOVER)



R	O	X ₁	O	washout	O	X ₂	O
R	O	X ₂	O	washout	O	X ₁	O

REVIEW: QUASI-EXPERIMENTAL (WITHIN SUBJECT)

RESEARCH QUESTION:
DOES OSTEOPATHIC INTERVENTION X EFFECTIVELY REDUCE PATIENTS' PAIN AFTER 5 SESSIONS?

pre
Pre-intervention VAS pain score

Intervention X

post
Post-intervention VAS pain score

O X O

REVIEW: RELIABILITY STUDY

RESEARCH QUESTION:
HOW RELIABLE IS A PARTICULAR TECHNIQUE IN DIFFERENTIATING EMPTY VS FILLED BLADDER?

Osteopathic Technique

Osteopath Practitioners (raters)

%
% correctly identified bladders
Inter-rater reliability
Intra-rater reliability

REVIEW: VARIABLES

Variable is a thing that changes in experiment. A variable is any factor, trait, or condition that can exist in differing amounts or types.

Independent Variable – the variable that is changed or controlled in a scientific experiment. Usually the Treatment: technique, global or regional osteopathic intervention vs control.

Dependent Variable – the outcome of interest, what we are hoping to change or alter.

Variable type: **Numerical** (Age) or **Categorical** (Gender, Group)

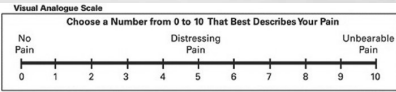
REVIEW: MEASUREMENTS

Measurement is a variable that is being assessed (quantified / measured) using a particular technique, tool or instrument.

$$\text{BMI} = \frac{\text{weight (kg)}}{\text{height (m}^2\text{)}}$$

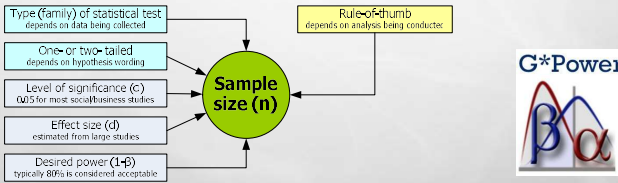


In the last 4 weeks have you	No Problem	Slight Problem	Moderate Problem	Marked Problem	Extreme Problem
1. Had difficulty moving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Had difficulty walking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Had problems with your balance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Had difficulty standing up without support?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Had difficulty speaking?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



SAMPLE SIZE DETERMINATION

Level of significance (Type I error) – chance of finding effect if it does not exist
Effect size – expected amount of change in dependent variable (treatment effect)
Statistical power – credibility of the test, chance of finding effect if it does exist



<http://www.psych.uni-duesseldorf.de/abteilungen/aap/gpower3/download-and-register>

HOW DO I KNOW EFFECT SIZE?

Approaches to determine effect size:

- Previous (published) studies with similar research question
 - similar Population, Intervention, Outcome
 - look for numbers to quantify effect size (mean, standard deviation, %)
- Pilot study conducted with small group of participants ($n = 12$)
- Based on practical significance
 - Clinically important change, Minimal Important Difference (MID)
- Assume to be medium effect (*Cohen's* $d = 0.5$)

STUDENTS' RESEARCH

- Proposal (PICO statement)
 - P = patient/problem (research question)
 - I = intervention (experiment design)
 - C = comparison (control)
 - O = outcome (validated instrument to measure)

MEASUREMENT INSTRUMENT/TOOL

Examples:

- Strain → Strain gauge
- Angle → Goniometer (manual or digital)
- Acceleration (3-axis) → Accelerometer (Fitbit or less expensive alternatives)
- Ground reaction force → Force platform/plate
- Object thickness → Caliper
- Time interval → Stopwatch (iPhone has one built-in)
- Weight → Scale



Clinical measurements (pulse, blood pressure, temperature, respiratory rate)

Ensure sufficient level of **accuracy/precision** and **range**



MEASUREMENT INSTRUMENT/TOOL

Google Scholar



Examples:

- Tinnitus symptoms → Tinnitus Handicap Inventory (THI)
- Quality of life → Quality of Life Scale (QOLS) questionnaire
- Pain → Visual Analog Scale (VAS)
- Feet functioning → Foot and Ankle Survey (FAOS) or Foot Functioning Index (FFI)

Good instrument is both **Reliable** and **Valid** (validated).

INSTRUMENT RELIABILITY AND VALIDITY

Not valid and not reliable

Valid, but not reliable

Reliable, but not valid

Reliable and valid

INSTRUMENT RELIABILITY AND VALIDITY

Reliability:

- Internal consistency reliability (Cronbach's $\alpha > 0.8$)
- Test-retest reliability correlation ($r > 0.7$)
- Inter-rater (inter-observer) reliability (Kappa > 0.4 or interclass correlation coefficient > 0.7)

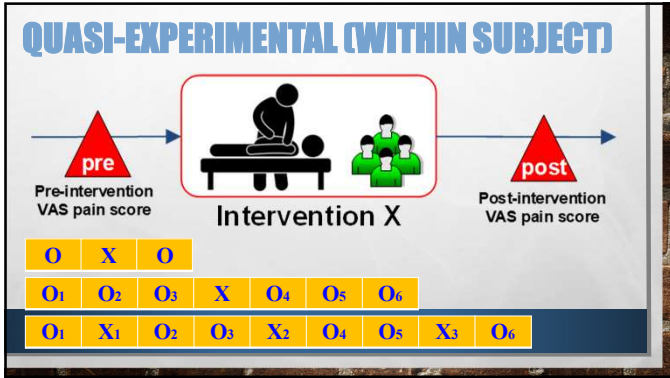
Validity:

- Correlation with "gold standard" instrument ($r > 0.7$)
- Overall accuracy with respect to actual state (diagnostic accuracy, sensitivity, specificity, PPV, NPV)

< 0	0.00-0.20	0.21-0.40	0.41-0.60	0.61-0.80	0.81-1.00
Poor	Slight	Fair	Moderate	Substantial	Almost perfect

QUASI-EXPERIMENTAL (CROSSOVER)

R	O	O	washout	O	X	O
R	O	X	O	washout	O	O



- ### RELIABILITY/VALIDITY/PALPATION STUDIES
- Practical aspects
 - Live patients or objects (models)
 - Repeated trials to make a diagnosis
 - Benefits
 - Relative simplicity in design
 - Contribution to osteopathic profession
 - Improving manual skills
 - Osteopathic students as study participants

RELIABILITY STUDY EXAMPLE

Assessment or Diagnostic Tool

Osteopath Practitioners (raters)

Inter-rater reliability
Intra-rater reliability

Example:
Consorti et al. (2017) study explored inter-rater reliability of Osteopathic Sacral Palpatory Diagnostic Test using 52 patients and 3 trained osteopathy students (raters). Fleiss Kappa ranges between 0.06 to 0.34 (Table 3).

Categorical outcomes:
Cohen's Kappa (2 raters), Fleiss Kappa (3+ raters)

Numerical outcomes:
Cronbach's α , Interclass Correlation Coefficient

< 0	0.00-0.20	0.21-0.40	0.41-0.60	0.61-0.80	0.81-1.00
Poor	Slight	Fair	Moderate	Substantial	Almost perfect

VALIDITY STUDY EXAMPLE

Examples:

- Assessing accuracy of palpation technique to differentiate between empty and filled bladders
- Using wax blocks to assess participants' skills in differentiating two heights (Christopher Reich study)
- Evaluating palpation technique to determine knee problems (validate through radiographs)
- Palpation sensitivity study using a hydrodynamic model (Monica Roy project)

Categorical outcomes:
Overall accuracy, sensitivity, specificity, NPV, PPV

Numerical outcomes:
Correlation coefficient, mean absolute error

PALPATION STUDY EXAMPLE

Intervention examples:

- Feedback when using wax blocks
- Take home models to self-practice palpation skills
- Workshops with group practice sessions

TRAINING STATION FOR SURGEONS

Presented with the permission of Dr. Ilay Habaz and Dr. Eran Shlomovitz (University Health Network)

STUDENTS' RESEARCH – PARTICIPANTS

Recruitment of study participants

- Specialized clinics
- Osteopathic practices
- Social media (Facebook, LinkedIn, Twitter)
 - Post message on your own page
 - Ask friends to re-post your message on their pages
 - Join relevant Facebook group
 - Paid advertisement
- Kijiji and other online posting sites



QUESTIONS? COMMENTS? THOUGHTS?

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Research Proposals | Sample Size Calculation | Methodology/Design | Statistical Data Analysis | Interpretation
